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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

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

Open to Public Inspection

A F	or the	2009 cal	endar year, or tax year beginning JUL 1, 2009 and ending	<u>JUN 30, 2010</u>	
B Ci	neck if	Please use IRS	C Name of organization	D Employer identific	cation number
	Addres	ss label or print or	NC PSYCHOLOGICAL ASSOCIATION		
	Name change Initial	type	Doing Business As		242192
<u></u>	return	See Specific	Number and street (or P 0. box if mail is not delivered to street address) Room/suit	.	
\vdash	Termin ated Amend	Instruc-	1004 DRESSER COURT, STE. 106		872-1005
\vdash	return		City or town, state or country, and ZIP + 4	G Gross receipts \$	512,569.
L	Jtion pendin	L	RALEIGH, NC 27609	H(a) Is this a group re	
		FNar	ne and address of principal officer RICHARD R. RUMER PH.D.	for affiliates?	Yes X No
			E AS C ABOVE	H(b) Are all affiliates inc	
			us X 501(c) (6) ◀ (insert no)		list (see instructions)
			W. NCPSYCHOLOGY ORG	H(c) Group exemption	
<u>κ</u> ⊦α Pa				r of formation: 19/9 N	State of legal domicile: NC
Pa		Summ		DODECCTONAL '	DEVEL ODMENIO
Activities & Governance		IN ME	scribe the organization's mission or most significant activities PROMOTE P		
i a	2	Check thi	s box 🕨 📖 if the organization discontinued its operations or disposed of mo	re than 25% of its net as	
ŏ	3	Number c	if voting members of the governing body (Part VI, line 1a)	3	35
8	4	Number c	f independent voting members of the governing body (Part VI, line 1b)	4	35
es	_		ber of employees (Part V, line 2a)	5	4
<u>×</u>			ber of volunteers (estimate if necessary)	6	125
Act	7a	Total gros	s unrelated business revenue from Part VIII, column (C), line 12	<u>7a</u>	16,816.
_	b	Net unrela	ated business taxable income from Form 990-T, line 34	7b	0.
			_	Prior Year	Current Year
	8	Contribut	ions and grants (Part VIII, line 1h)	338,255.	340,425.
ZRevenge[9	Program :	service revenue (Part VIII, line 2g)	76,348.	104,683.
- <u>§</u> -			nt income (Part VIII, column (A), lines 3, 4, and 7d)	4,463.	2,823.
			enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	67,629.	64,638.
ا ا			nue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	486,695.	<u>512,569.</u>
-			d similar amounts paid (Part IX, column (A), lines 1·3)	35,515.	38,050.
0			paid to or for members (Part IX, column (A), line 4)	244 022	255 267
S(Expenses)			other compensation, employee benefits (Part IX, column (A), lines 5-10)	244,832.	255,367.
نان ويز			nal fundraising fees (Part IX, column (A), line 11e)		
58 58			draising expenses (Part IX, column (D), line 25)	100 706	215 026
			penses (Part IX, column (A), lines 11a-11d, 11f-24f)	199,706.	215,826.
•			enses Add lines 13-17 (must equal Part IX, column (A), line 25)	480,053.	509,243.
_ <u>S</u>	19	Revenue	less expenses Subtract line 18 from line #2ECEIVED	6,642.	3,326.
Net Assets or Fund Balances			I [[[]	Seginning of Current Year 119,908.	End of Year 123,234.
Sse			ets (Part X, line 16) Inties (Part X, line 26) Sor fund balances Subtract line 21 from line 20	119,900.	143,434.
nud.			Ities (Part X, line 26) NU V Z Z / () () O	119,908.	123,234.
	22 rt		s or fund balances Subtract line 21 from line 20	119,900.	143,434.
Fa		Under pens	alties of perjury, I declare that I have examined the return, including accompanying schedules and statements	s and to the best of my knowled	ge and belief, it is true, correct.
		and comple	ste Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	ge ,	
C:			V/ V- 11/ 16mm V/1/	115	W-2010
Sigr		Sign	nature of officer	Date	10 00 10
Her	В	J. 5.g.	Ruhard R Rumer (W). Treasures	r .	
		Tvo	e or print name and title		
		Preparer'	Date C		er's identifying number
Paid		signature			structions)
Prep	arer's	Firm's nam		EIN ▶	
Use	Only	yours if self-employ	\	LIII	
		address, ar	RALEIGH, NORTH CAROLINA 27607	Phone no ▶ 9	19-781-7550_
May	the II		s this return with the preparer shown above? (see instructions)	I HONO HO. P J	X Yes No

Form 990 (2009)

	990 (2009) NC PSYCHOLOGICAL ASSOCIATION	56-1242192	Page 2
Pa	rt III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission. PROMOTE PROFESSIONAL DEVELOPEMENT IN MENTAL HEALTH	-199 A	
	Did the event ration undertake any eventional program converse divine the year which were not local as		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O	Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O	Yes	X No
4	Describe the exempt purpose achievements for each of the organization's three largest program services by ex Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of allocations to others, the total expenses, and revenue, if any, for each program service reported	•	
4a	(Code) (Expenses \$ including grants of \$) (ReCONFERENCES AND SEMINARS HELD TO SUPPORT AND FACILITATE PSYCHOLOGY	evenue \$ STUDY OF)
4b	(Code) (Expenses \$ including grants of \$) (Right of the control)
4c	(Code.) (Expenses \$ including grants of \$) (ReNEWSLETTER FOR PUBLICATION AND DISTRIBUTION OF PROFESSION ARTICLES AND INFORMATION	evenue \$ ON RELATED)
			
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	
<u>4</u> e	Total program service expenses ▶\$		

Form 990 (2009) NC PSYCHOLOGICAL ASSOCIATION

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_		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
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_	_X_	
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	Х	
•	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		X
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 X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	_16_		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	 	<u> X</u>
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_	-	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			٠,,
	complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20_	990 (X X

Form 990 (2009) NC PSYCHOLOGICAL ASSOCIATION

Part IV Checklist of Required Schedules (continued)

	·		res	NO
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? If "Yes," complete Schedule I, Parts I and II	21	<u>X</u>	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		<u>X</u>
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		<u> X</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
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? If "Yes," complete Schedule L, Part II	26	-	<u> </u>
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? If "Yes," complete			7,5
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			v
а		28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			.
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		^
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	00		v
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			х
	If "Yes," complete Schedule N, Part I	31		- A
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		x
	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		х
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	30		
34	Was the organization related to any tax-exempt or taxable entity?	34	х	
^-	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	- 54		
35		35	Х	
20	If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	3		
36		36		
~	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30	 	
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	"		 -
38	Note, All Form 990 filers are required to complete Schedule O	38	x	
	INOTE: VIII 1 OITH 330 IIIG13 & G TEQUIEG TO COMPLETE OCHOOGIE O			2009)
			- 1	/

			Vaa	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		Yes	No
	U.S. Information Returns Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	За	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	_	X
b	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and			ĺ
	Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	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		X
þ	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).			
а	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		
_	to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year Did the exampleation during the year receive any finds directly or indicately to now promise an according to			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	- -		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e		
q	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7f		
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7g 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	<i>,</i> ,,,		
•	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.			
а	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		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
2a	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			

Form **990** (2009)

Page 5

Form 990 (2009) NC PSYCHOLOGICAL ASSOCIATION 56-1242192 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management			
	don't do to ming body and management		Yes	No
1a	Enter the number of voting members of the governing body			
	Enter the number of voting members that are independent 1b 35			ı
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		ı
_	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
Ū	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	X	
	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
•	by the following			
а	The governing body?	8a	Х	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
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		_X_
Sec	tion 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		X
	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		<u></u>
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	<u> </u>
	and the second s			l
_	to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ĺ
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			1
	taxable entity during the year?	16a		X
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			1
	exempt status with respect to such arrangements?	16b		L
Sec	tion C. Disclosure		 .	
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	ind fina	ancial	
	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ation	-	
	SALLY CAMERON - 919-872-1005			
	1004 DRESSER COURT, RALEIGH, NC 27609		000	
		Form	990	(2009)

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

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

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

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

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

(A)	(B)	(C)						(D)	(E)	(F)	
Name and Title	Average hours	(ct		Posi		app	I۷۱	Reportable compensation	Reportable compensation	Estimated amount of	
	per week	Individual frustee or director	Institutional trustee	Officer		Highest compensated complete		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
SALLY CAMERON	-										
DIRECTOR	40.00							94,000.	_0.	0	
DIRECTORS (SEE ATTACHED)		 					_	0.	0.	0	
	-										
	_ .		_					-			
					_						
		_									
	-										

rait	Section A. Officers, Directors, Iri	T	mpic	yee			High	est			_		
	` (A)	(B)			((-	_		(D)	(E)	-	(F)	
	Name and title	Average hours	(cl		Posi call t		ı app	lv)	Reportable compensation	Reportable compensation		Estimate Imount	
		per week	-						from the organization	from related organizations (W-2/1099-MISC)		other mpensa from th	ation
			individual trustee or director	Institutional trustee	je.	Key employee	Highest compensated employee	ner ner	(W-2/1099-MISC)		aı	ganizat nd relat ganizati	ted
			- pri	Instr	Officer	Key	E Had	Former		·			
								_	-				
-			_					-			+		
•			<u> </u>										
	·····	-	-				-					<u></u>	
			_								+		
			-		ļ		_				_		
	Total						▶		94,000.	0			0.
	Total number of individuals (including but recompensation from the organization	not limited to th	hose	liste	ed a	bov	e) w	ho r	eceived more than \$100	0,000 in reportable			(
-	compensation from the organization											Yes	No
	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s			e, ke	y en	nplo	уее,	or h	nighest compensated e	mployee on	3		х
4	For any individual listed on line 1a, is the s and related organizations greater than \$15	um of reportab	ole c							the organization	4		х
5	Did any person listed on line 1a receive or	accrue compe	nsat	tion						rices rendered to			
	the organization? If "Yes," complete Schedion B. Independent Contractors	dule J for such	pers	son							5	<u> </u>	<u> </u>
	Complete this table for your five highest countries the organization NONE	ompensated in	dep	ende	ent c	ont	ract	ors t	that received more than	\$100,000 of compe	nsation	ı from	
	(A) Name and business	address			-				(B) Description of	services	Comp	(C) ensatio	
	realite and business	addicas											
	Total number of independent contractors \$100,000 in compensation from the organ		not I	ımıte	d to		ose I	stec	d above) who received r	nore than			
											Forr	n 990	(2009

	990 (2			CAL ASSO	CIATION		56-1242	192 Page 9
Pa	rt VIII	Statement of Reven	ue					
	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts st	1 a	Federated campaigns	1a					
gran	b	Membership dues	1b	305,490.				
ts, g	С	Fundraising events	1c					
gif lar	d	Related organizations	1d					
ins,		Government grants (contribute						
utio er s	f	All other contributions, gifts, grant	1 1	24 025				
랷		similar amounts not included above		34,935.				
Contributions, gifts, grants and other similar amounts	_	Noncash contributions included in lines	1a-1f \$		340,425.			
0 10	<u>h</u>	Total. Add lines 1a-1f		Business Code	340,445.			
	•	CONFERENCES/SEM	TMADC	Business Code 611430	87,867.	87,867.		
20		NEWSLETTER ADS	TIME	541800	9,240.	01,001.	9,240.	
Ser		DIRECTORY ADS		541800	7,576.		7,576.	
E E	d			341000	7,570.		7,3700	
Program Service Revenue	e							
P	f	All other program service reve	nue		1			
	-	Total, Add lines 2a-2f		•	104,683.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		>	2,823.			2,823.
	4	Income from investment of tax	x-exempt bond p	oroceeds >				
	5	Royalties						
			(ı) Real	(II) Personal				
	6 a	Gross Rents						
	b	Less rental expenses						
	С	Rental income or (loss)		1				
	d	Net rental income or (loss)		_ _				
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory						
	p	Less cost or other basis						
		and sales expenses						
		Gain or (loss)			il			
		Net gain or (loss)						
e	8 a	Gross income from fundraisin						
Ven		including \$	of					
Re		contributions reported on line			•			
Other Revenue		Part IV, line 18	a b					
ō		Less direct expenses Net income or (loss) from fund	-					
		Gross income from gaming at						
	9 4	Part IV, line 19	a a					
	h	Less direct expenses	- b					
	ł	Net income or (loss) from gam	ning activities	>				
		Gross sales of inventory, less						
		and allowances	а					
	b	Less cost of goods sold	b					
	С	Net income or (loss) from sale	s of inventory					
		Miscellaneous Revenu		Business Code				
	11 a			812900	63,642.			
	ь	MISCELLANEOUS E	EXPENSE	900099	996.	996.		
	C			-				
	d	All other revenue			64 620			
	e	Total. Add lines 11a-11d			64,638.		16,816.	2 022
0220	12	Total revenue See instructions.			512,569.	134,303.	10,010.	2,823.

Form **990** (2009)

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

	All other organizations must comple				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	38,050.			
2	Grants and other assistance to individuals in				
	the U S See Part IV, line 22				· · · · · · · · · · · · · · · · · · ·
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	200,248.			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	8,208.			·····
9	Other employee benefits	30,747.			
10	Payroll taxes	16,164.			
11	Fees for services (non-employees)				
а	Management				
b	Legal				.,
С	Accounting	5,069.			
d	Lobbying	29,004.			
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	10,730.			
12	Advertising and promotion	3,385.			
13	Office expenses	35,703.			
14	Information technology				
15	Royalties				
16	Occupancy	51,515.			
17	Travel	3,459.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	46,843.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,235.			<u> </u>
23	Insurance				
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.)				
а	DITECT DOOKS AND MERMIN	13,356.			
h	MISCELLANEOUS EXPENSE	8,043.			
c	BANK AND CREDIT CARD SE	5,323.			
d	LEGISLATIVE EXPENSE	1,467.			
e	OTHER TAXES	440.			
f	All other expenses	254.			
25	Total functional expenses Add lines 1 through 24f	509,243.			
26	Joint costs. Check here				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
					Form 990 (2009

B) of year
<u>21,468.</u>
1,766.
23,234.
-
-
0.
23,234.
23,234.
23,234.

Form **990** (2009)

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

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

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

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), then

• 9	Section 501(c)(4), (5), or (6) organiza	ations Complete Part III	• ,,		
$\overline{}$	e of organization			Empl	oyer identification number
	NC PSYC	CHOLOGICAL ASSOCI	ATION		56-1242192
Pai	rt I-A Complete if the or	ganization is exempt und	der section 501(c)	or is a section 527 o	rganization.
1	Provide a description of the organi				
2	Political expenditures	·		▶ \$	
	Volunteer hours				
_					
Par	rt I-B Complete if the or	ganization is exempt und	der section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955	▶ \$	
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 495		
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
	Was a correction made?				Yes No
b.	If "Yes," describe in Part IV				
Par	rt I-C Complete if the or	ganization is exempt und	der section 501(c)	, except section 501((c)(3).
1	Enter the amount directly expende	d by the filing organization for se	ection 527 exempt fund	ction activities	
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for s	ection 527	
	exempt function activities			▶ \$	
3	Total exempt function expenditure	s 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
	Enter the names, addresses and e				
	For each organization listed, enter				
	that were promptly and directly de		janization, such as a se	eparate segregated fund or	a political action committee
	(PAC) If additional space is neede	d, provide information in Part IV	<u> </u>	,	·
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds If none, enter 0-	contributions received and promptly and directly
				iulius il florie, efilei -0-	delivered to a separate
					political organization
					If none, enter -0-
					
					
		Í	1	1	1
		-			
		-			
		-			
_					

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

Schedule C (Form 990 or 990-EZ) 2009

Sche	dule C (Form 990 or 990-EZ) 2009	NC P	SYCHOL	OGICAL ASSO	CIATION	<u> </u>	1242192 Page 2
Par	t II-A Complete if the org			mpt under section	on 501(c)(3) and fil	ed Form 5768	
	· (election under sec	tion 501	(h)).				
A Ch	neck 🕨 🔲 if the filing organization	ion belong	s to an affi	liated group			
B Ch	neck 🕨 🔛 if the filing organizat	ion check	ed box A ar	nd "limited control" pr	ovisions apply.		
			oying Exper eans amou	nditures ints paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influ	ience publ	lic opinion (grass roots lobbying)			
b	Total lobbying expenditures to influ	ience a leg	jislative boo	dy (direct lobbying)			
С	Total lobbying expenditures (add lii	nes 1a and	d 1b)				
d	Other exempt purpose expenditure	s					
е	Total exempt purpose expenditure	s (add line	s 1c and 1c	i)		<u></u>	
f	Lobbying nontaxable amount Ente	r the amo	unt from the	e following table in bo	th columns		
	If the amount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable an	nount is:		
ļ	Not over \$500,000		20% of	the amount on line 1e			
}	Over \$500,000 but not over \$1,000	,000	\$100,00	00 plus 15% of the ex	cess over \$500,000		
	Over \$1,000,000 but not over \$1,5	00,000	\$175,00	00 plus 10% of the ex	cess over \$1,000,000.		
ļ	Over \$1,500,000 but not over \$17,	000,000	\$225,00	00 plus 5% of the exc	ess over \$1,500,000		
l	Over \$17,000,000	l	\$1,000,	000			
						<u> </u>	
9	Grassroots nontaxable amount (en	ter 25% of	f line 1f)				
h	Subtract line 1g from line 1a If zero	o or less, e	nter -0-				
i	Subtract line 1f from line 1c If zero	or less, e	nter -0-				
j	If there is an amount other than zer	ro on eithe	r line 1h or	line 1i, did the organia	ation file Form 4720		
	reporting section 4911 tax for this	year?				·	Yes No
		ations tha	it made a s		r Section 501(h) on do not have to comp es 2a through 2f on pa		
		Lobb	ying Expe	nditures During 4-Ye	ar Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2	2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
<u>2a</u>	Lobbying nontaxable amount						
b	Lobbying ceiling amount						
	(150% of line 2a, column(e))					<u> </u>	<u> </u>
<u>c</u>	Total lobbying expenditures						
	Grassroots nontaxable amount			-			 - -
е	Grassroots ceiling amount						
	(150% of line 2d, column (e))				 	<u> </u>	
f	Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2009 NC PSYCHOLOGICAL ASSOCIATION 56-1242192 Page 3 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		Am	ount
ı Dı	uring the year, did the filing organization attempt to influence foreign, national, state or			Ì		
10	cal legislation, including any attempt to influence public opinion on a legislative matter					
or	referendum, through the use of					
a Vo	plunteers?			_		
b Pa	ald staff or management (include compensation in expenses reported on lines 1c through 1i)?		<u> </u>	_		
с М	edia advertisements? .					
d M	ailings to members, legislators, or the public?			_		
e Pi	ublications, or published or broadcast statements?			_		
f G	rants to other organizations for lobbying purposes?			_		
g D	rect contact with legislators, their staffs, government officials, or a legislative body?					
h Ra	allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				=.	
i O	ther activities? If "Yes," describe in Part IV				_	
j To	otal Add lines 1c through 1i				_	
a D	d 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			L		
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?					
ırt I	II-A Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6).	on 501(c)(5), or	sec	tion	
					Yes	No
	ere substantially all (90% or more) dues received nondeductible by members?		Γ.	.		Х
	ele substantially all (30% of mole) ages received nondeductible by mollibors:					
	·			1		1
D:	d the organization make only in-house lobbying expenditures of \$2,000 or less? Id the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section.)(5), or	sec		Х
Di Di	d the organization make only in-house lobbying expenditures of \$2,000 or less? Id the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes."		(5), or ine 3 is	sec s an	tion swered	Х
Di Part I	d the organization make only in-house lobbying expenditures of \$2,000 or less? Id the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." The prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes."	nrt III-A, li	(5), or ine 3 is	sec	tion swered	Х
Di art I	d the organization make only in-house lobbying expenditures of \$2,000 or less? Id the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Les, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures).	nrt III-A, li	(5), or ine 3 is	sec s an	tion swered	Х
Di Di Di Di Si	d the organization make only in-house lobbying expenditures of \$2,000 or less? Id the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes." The proof of the organization is exempt under section 501(c)(4), section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	nrt III-A, li)(5), or ne 3 is	sec s an	tion swered	X I 5,490
Di Dirt I	d the organization make only in-house lobbying expenditures of \$2,000 or less? Id the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes." The property of the organization is exempt under section 501(c)(4), section 101(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes." The property of the organization agree to carryover lobbying and 2 are answered "No" OR if Partyes." The property of the organization agree to carryover lobbying and 2 are answered "No" or if Partyes." The property of the organization agree to carryover lobbying and 2 are answered "No" or if Partyes." The property of the organization agree to carryover lobbying and 2 are answered "No" or if Partyes." The property of the organization agree to carryover lobbying and 2 are answered "No" or if Partyes." The property of the organization agree to carryover lobbying and 2 are answered "No" or if Partyes." The property of the organization agree to carryover lobbying and 2 are answered "No" or if Partyes." The property of the organization agree to carryover lobbying and 2 are answered "No" or if Partyes." The property of the organization agree to carryover lobbying and 2 are answered "No" or if Partyes. The property of the organization agree to carryover lobbying and 2 are answered "No" or if Partyes. The property of the organization agree to carryover lobbying and 2 are answered "No" or if Partyes. The property of the organization agree to carryover lobbying and 2 are answered "No" or if Partyes. The property of the organization agree to carryover lobbying and 2 are answered "No" or if Partyes. The property of the organization agree to carryover lobbying and 2 are answered "No" or if Partyes. The property of the organization agree to carryover lobbying agree to carryover lobbying agree to carryover lobbying agree to carryover	ort III-A, li	(5), or ine 3 is	sec s an	tion swered	Х
Di Di Si ez a C b C	d the organization make only in-house lobbying expenditures of \$2,000 or less? Id the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa "Yes." Lues, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year arryover from last year	ort III-A, li	2 3)(5), or ine 3 is	sec s and	swered 30	x 5,490 3,853
Di art I	d the organization make only in-house lobbying expenditures of \$2,000 or less? Id the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Paryes." Less, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year arryover from last year ortal	ort III-A, li	2 2 2 2	sec s and	30 3	x 5,490 3,853
Di Di Si ez a C b C Ti A	d the organization make only in-house lobbying expenditures of \$2,000 or less? Id the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Paryes." Les, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year arryover from last year organization are considered in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	rt III-A, li	2 2 2 2	sec s and	30 3	x 5,490 3,853
Dispersion of the property of	Id the organization make only in-house lobbying expenditures of \$2,000 or less? Id the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes." In use, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). In urrent year arryover from last year organization of the section 6033(e)(1)(A) notices of nondeductible section 162(e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditures were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditures were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditures of the prior to the expenditures of the prior to the prior to the expenditures of the prior to the	ical	2 2 2 2	sec s and	30 3	x 5,490 3,853
Dispart I	Id the organization make only in-house lobbying expenditures of \$2,000 or less? Id the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes." The provided in the section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). The provided in the section 527(f) tax was paid). The provided in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	ical	2 2 2 2	sec s and	30 3	x 5,490 3,853
Di D	Id the organization make only in-house lobbying expenditures of \$2,000 or less? Id the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes." In use, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). In urrent year arryover from last year organization of the section 6033(e)(1)(A) notices of nondeductible section 162(e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditures were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditures were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditures of the prior to the expenditures of the prior to the prior to the expenditures of the prior to the	ical	2 2 2 2	sec s and	30 3 3	x 5,490 3,853

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 Open to Public Inspection

Name of the organization

Employer identification number

Pai	t I Organizations Maintaining Donor Advise	od Funds or Other Similar Fund	ts or Accounts Complete if the
			33 CI ACCOUNTS: Complete it the
	organization answered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
	Tatal according at and of according	(a) bollor advised latids	(b) Turius 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		l
5	Did the organization inform all donors and donor advisors in		
	are the organization's property, subject to the organization's		└ Yes └ No
6	Did the organization inform all grantees, donors, and donor a	• •	· · · · · · · · · · · · · · · · · · ·
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpos	· — —
Da	impermissible private benefit?		Yes No
Pa			, Part IV, line /
1	Purpose(s) of conservation easements held by the organizati		
	Preservation of land for public use (e.g., recreation or p	· —	nistorically important land area
	Protection of natural habitat	Preservation of a ce	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the forr	n of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired	after 8/17/06	2d
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by t	he organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located	-
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling o	f
	violations, and enforcement of the conservation easements in	t holds?	L Yes L 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 durir	ng the year ► \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	70(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expen	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describe	es the organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections o		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, no	·	
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of p	public service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these	items	
þ	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and bala	ance sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public servi	ce, provide the following amounts relating to
	these items		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under SFAS 1	16 relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$

		<u> HOLOGICAL</u>							<u>42192</u>	
Par	t III Organizations Maintaining C	collections of A	rt, His	torical Tr	easures, c	or Other	' Simil	ar Asse	ts (contin	nued)
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	t are a sig	nıfıcant	use of its	collection	items
	(check all that apply)									
а	Public exhibition	(. L	Loan or exc	hange progra	ams	•			
b	Scholarly research		• 🔲	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	in how t	hey further t	he organizatio	on's exem	pt purpo	se in Par	t XIV	
5	During the year, did the organization solicit of				_					
	to be sold to raise funds rather than to be m	aintained as part of	the orga	inization's co	ollection?				Yes	☐ No
Par	t IV Escrow and Custodial Arran	gements. Compl	lete if org	ganization ai	nswered "Yes	s" to Form	990, Pa	ırt IV, line	9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	s or other as	sets not ir	ncluded			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV									
Par	t V Endowment Funds. Complete	f the organization ai	nswered	"Yes" to Fo	rm 990, Part	IV, line 10				
		(a) Current year	(b) F	rıor year	(c) Two year	s back (c) Three y	ears back	(e) Four y	years back
1a	Beginning of year balance			.						
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance		<u> </u>							
2	Provide the estimated percentage of the year	r end balance held :	as							
а	Board designated or quasi-endowment		%							
b	Permanent endowment >	%								
С	Term endowment >	%								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation th	at are held a	nd administe	red for the	e organiz	ation	_	
	by								\	Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
þ	If "Yes" to 3a(II), are the related organizations	s listed as required o	on Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the									
Par	t VI Investments - Land, Building					10				
	Description of investment	(a) Cost or o		1 ''	or other		umulate	ed	(d) Book	value
		basis (investi	ment)	basis	(other)	depr	eciation			
1a	Land			ļ						
b	Buildings		···	 		·········				
С	Leasehold improvements				F 000		24 4			
d	Equipment			3	5,899.		34,1	33.	1	<u>,766.</u>
	Other			L				_		7.6
ı otal	l, Add lines 1a through 1e (Column (d) must e	quai rorm 990. Part	: X, Colui	าเก (<i>เ</i> ร), line 1	U(C))				1	.766.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009

uncertain tax positions under FIN 48

932053 02-01-10

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

NC PSYCHOLOGICAL ASSOCIATION

General Information on Grants and Assistance

Part I

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

2009	Open to Public Inspection
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Employer identification number

56-1242192

d Individuals in the United States swered "Yes" on Form 990, Part IV, line 21 or 22.

° □	×) 2009
X Yes	V, line 21, for any Il space is needed ▶	(h) Purpose of grant or assistance					Schedule I (Form 990) 2009
Istance, and the selecti	es" to Form 990, Part l' (Form 990) if additiona	(g) Description of non-cash assistance					
ly for the grants of ass	lanization answered "Y art IV and Schedule I-1	(f) Method of valuation (book, FMV, appraisal, other)					
grantees eligibilit d States	Complete if the org	(e) Amount of non-cash assistance					
or assistance, tne funds in the Unite	United States. C	(d) Amount of cash grant					for Form 990.
s amount of the grants oring the use of grant	Organizations in the	(c) IRC section if applicable				ganizations	see the Instructions
o substantiate the tance? cedures for monit	Sovernments and 5,000 Check this	(a)				nd government or	tion Act Notice,
 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees eligibility for the grants of assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 	art =	1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of or government (a) EIN (b) EIN (c) IRC section (d) Amount of or government (e) IRC section (d) Amount of or government (e) IRC section (d) Amount of or grant or grant (e) Method of valuation (b) Description of or assistance or assistance or assistance other)				 Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations 	_ ہا

Schedule I (Form 990) 2009

21

932102 02-02-10

Page 2

56-1242192

NC PSYCHOLOGICAL ASSOCIATION

Schedule I (Form 990) 2009

Part III

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

NC PSYCHOLOGICAL ASSOCIATION

Employer identification number 56-1242192

FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS WHO
ELECT THE BOARD OF DIRECTORS.
FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION HAS MEMBERS WHO
ELECT THE BOARD OF DIRECTORS.
FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION PROVIDES A COPY OF
THE FORM 990 TO ITS BOARD OF DIRECTORS PRIOR TO THE RETURN BEING FILED.
FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION HAS A WRITTEN
CONFLICT OF INTEREST POLICY AND REQUIRES ITS BOARD OF DIRECTORS AND KEY
EMPLOYEES TO DISCLOSE ANNUALLY THAT THEY ARE IN COMPLIANCE WITH THIS
POLICY.
FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS AND THE
FINANCE COMMITTEE DETERMINE THE COMPENSATION FOR THE EXECUTIVE DIRECTOR.
THE BOARD OF DIRECTORS, FINANCE COMMITTEE AND THE EXECUTIVE DIRECTOR
DETERMINE COMPENSATION FOR OTHER EMPLOYEES.
FORM 990, PART VI, SECTION C, LINE 19: ALL OF THE ORGANIZATIONS GOVERNING
DOCUMENTS, POLICY STATEMENTS, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON
REQUEST
FORM 990, PART XI, LINE 1.
THE ORGANIZATION USES A MODIFIED CASH METHOD FOR ACCOUNTING. THIS
METHOD HAS NOT CHANGED FROM PRIOR YEARS.

SCHEDULE O

(Form 990)

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

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Name of the organization NC PSYCHOLOGICAL ASSOCIATION	Employer identification number 56-1242192
FORM 990, PART XI, LINE 2C	
THE ORGANIZATIONS FINANCE COMMITTEE OVERSEES THE COMPILAT	ION OF ITS
FINANCIAL STATEMENTS & THE SELECTION OF ITS INDEPENDENT A	CCOUNTANT,
THIS PROCESS HAS NOT CHANGED SINCE THE PRIOR YEAR.	
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SCHEDULE R

(Form 990)

Related Organizations and Unrelated Partnerships

2009 Open to Public Inspection

OMB No 1545-0047

Direct controlling

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entity

Employer identification number 56-1242192 End-of-year assets ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Total income ▶ See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Legal domicile (state or foreign country) ► Attach to Form 990. NC PSYCHOLOGICAL ASSOCIATION Primary activity Name, address, and EIN of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service Part

Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) status (if section 501(c)(3)) Public charity <u>e</u> Exempt Code section 501(C)(3) ਉ Legal domicile (state or foreign country) NORTH CAROLINA EDUCATION AND ASSISTANCE PROVIDE PSYCHOLOGICAL Primary activity 58-1958201, 1004 DRESSER COURT, RALEIGH, NC NORTH CAROLINA PSYCHOLOGICAL FOUNDATION Name, address, and EIN of related organization 27609

Part II

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

24

Schedule R (Form 990) 2009

932161 02-04-10

56-1242192

Page 2

Schedule R (Form 990) 2009 NC PSYCHOLOGICAL ASSOCIATION

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

General or managing partner?		related	(h) Percentage ownership			90) 2006
(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		ad one or more	(g) Share of Prend-of-year of assets			 Schedule R (Form 990) 2009
ortion- ations?		t because it b	(f) Share of total income			Sch
(g) Share of end-of-year assets		art IV, line 34	(f) Share of to			
		Form 990, P	(d) Type of entity (C corp, S corp, or trust)			
Share of total income		ared "Yes" to	(d) Direct controlling entity	 		
(e) Predominant income (related, unrelated, excluded from tax under		ization answ	Cole Direct con er		 	
		if the organ	(c) Legal domicile (state or foreign country)			25
(d) Direct controlling entity		ust (Complete	(b) Primary activity			
(C) Legal domicile (state or foreign country)		poration or Tr	Prim			
(b) Primary activity		Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related	IN N			}
(a) Name, address, and EIN of related organization		Part IV Identification of Related Org				932162 02-04-10

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Yes

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Schedule R (Form 990) 2009 NC PSYCHOLOGICAL ASSOCIATION

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

Note. Complete line I in any entity is listed in Parts II, III, of IV of this schedule	I 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?	- Donount of fil interest fill annumber on full round from a constrailed antitu
Note. Complete line I it any er	1 During the tax year, did th	- Donoth of (i) to topood

- Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled er
 - Gift, grant, or capital contribution to other organization(s)
- : Gift, grant, or capital contribution from other organization(s)
 - d Loans or loan guarantees to or for other organization(s)
 - e Loans or loan guarantees by other organization(s)
- - f Sale of assets to other organization(s)
- g Purchase of assets from other organization(s)
- ι Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- j Lease of facilities, equipment, or other assets from other organization(s)
- k Performance of services or membership or fundraising solicitations for other organization(s)
 - 1 Performance of services or membership or fundraising solicitations by other organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets
- n Shanng of paid employees
- Reimbursement paid to other organization for expenses

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- p Reimbursement paid by other organization for expenses
- q Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

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(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1) NORTH CAROLINA PSYCHOLOGICAL FOUNDATION	В	38,050.
(2) NORTH CAROLINA PSYCHOLOGICAL FOUNDATION	ט	41,440.
(3) NORTH CAROLINA PSYCHOLOGICAL FOUNDATION	×	63,642.
(4)		
(5)		
(9)		

Schedule R (Form 990) 2009

26

932163 02-04-10

Page 4

Schedule R (Form 990) 2009 NC PSYCHOLOGICAL ASSOCIATION

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37) Part VI 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)	(a)	(0)	9	(e)	ε	(6)	æ
Name, address, and EIN	Primary activity	nicile	Are all partners section 501(c)(3)	Share of end-of- vear assets	- oc-	Code V-UBI amount in box 20	General or managing
Garage			Yes No			or schedule K-1 (Form 1065)	, ,
			•				
					-		
			-		_		
							_
					_		

Schedule R (Form 990) 2009

NORTH CAROLINA PSYCHOLOGICAL ASSOCIATION - 2009-2010

1004 Dres	1004 Dresser Court, Suite 106, Raleigh, NC 3	rstenocosicac Assoc 27609 Phone com Web site	– 2009-2010 -1005 Fax. nepsychology ord	919-872-0805
President	APA Council Representative	Colleague Assistance		Law and Psychology Committee
James L. Hilke, Ph D	Erica H Wise, Ph D	Glen Martin, Ph D	\vdash	Mark D Hazelrigg, Ph D
Raleigh	Chapel Hill	Chapel Hill	Raleigh	Durham
919/870-8151 office	919/929-8183 office	919/966-3658 office	919/870-8151 office	919/733-8462 office
919/293-0404 home	919/544-4100 home	919/967-5148 home	919/293-0404 home	919/606-0563 home
capspa@earthlink net	ewise@email unc edu	Glen Martin@unc edu	capspa@earthlink net	mark hazelrigg@dhhs nc gov
President-Elect	Central Piedmont Representative	Development Committee (F)	Legislative Committee	Program/CE Committee (F)
Jennifer A Snyder, Ph D	Leslie Branden-Muller, Ph D	Henry W Majestic, Ph D	Jennifer A Snyder, Ph D	Catherine A Forneris, Ph D
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919/764-5543 office	919/933-3329 office	919/286-3453 x 104 office	919/764-5543 office	919/843-7696 or 966-0011 office
919/806-0648 home	919/967-3323 home	919/688-4497 home	919/806-0648 home	919/304-5323 home
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Judith C Powell, Ph D	Janette Wellman, Ph D	Sandra G Wartskı, Psy D	Raleigh	Carlyle Johnson, Ph D
Raleigh	Wilmington	Raleigh	919/782-4060 office	Cary
919/467-4782 office	910/251-5700 office	919/876-5658 office	919/743-3367 home	919/250-3123
919/420-0199 home	910/799-5843 home	919/848-0467 home	dcwiesner@nc rr com	919/481-3639
Jcpphd@nc rr com	Janette_wellman@med unc edu	Sandra@wartskı org	Membership Committee	cjohnson@co wake nc us
Treasurer/Finance Committee	Mountain Representative	Diversity Committee	Deborah Graves McFarlane Ph D	James Phillips Ph.D.
Richard R Rumer Ph D	Daniel H. Cogswell, Ph.D.	Anthony Smith Ph D	Chanel Hill	Raleigh
Durham	Asheville	Durham	919/929-1227 office	919/575-1258 office
919/215-7842 office	828/232-9933 office	919/957-7357 office		919/981-0911 home
919/383-5019 home	828/255-9194 home	919/957-9539 home	dgmcfarlane@gmail com	Jim phillips@ncmail net
rrumer@nc rr com	danielhcogswell@bellsouth net	Kstellar1@alase net		
			Newsletter Committee	Scientific, Academic, and
Immediate Past President	North Predmont Representative	Travis Colwell, Ph D		Student Affairs Committee
Annette Perot, Ph D	Michael H Bigsby, Ph D	Jacksonville		Vinston J Goldman, Ph D
Durham	Durham	919/880-9335 office (cell)		Durham
919/493-19/5 office	919/560-20/4 office	colwellyt@gmail com		919/530-6471 office
919/484-1546 home	919/419-9202 home			919/957-3331 home
perot@email unc edu	michael bigsby@dpsnc net	Early Career psychologists TF		vgoldman@nccu edu
NODE Brosidont	Northeast Diedmont Degreeontative		Professional Affairs and Ethics	Q 4Q F 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Applica Barrick Dh D			Changling Silversitein, Pri D	Lise Osvold, Ph D
Stem	Raleigh San		919/733-5344 office	G10/786 6088 office
919/764-2241 office	919/961-1095 office		919/933-2112 home	919/836-8482 home
919/693-6574 home	919/834-9165 home		elliot silverstein@ncmail net	liseosvold@hotmail.com
ann louise barrick@dhhs nc gov	RHicksPhD@gmail.com			
	- 4, 1		Erica H Wise, Ph D	NCPA Staff
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828/324-6397 office	336/802-2205 × 28		919/344-4100 Home	Cond Killing Office Manager
828/495-7320 home	psydkat@yahoo com			nonacarol@mindspring.com
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		Mark R Stein, Ph D	Erica H Wise, Ph D	Elizabeth Cloud, Communications
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Lee A Jackson, Ph D	Nona L Patterson, Ph D	919/469-2800 office		
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			0.000	

Revised March 4, 2010

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