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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2010

Open to Public Inspection

A Fo	r the	2010 ca	alendar year, or tax year begin	ning 01-01-2010 and ending 12-31-20	010			
		pplicable	C Name of organization AMERICAN PSYCHOLOGICAL ASSO	OCIATION INC		D Emp	loyer	identification number
∏ Add	dress ch	nange	Doing Business As			53-0	0205	890
Na:	me cha	inge	Doing Business vis			E Telep	ohone	number
Init	tıal retu	ırn		ıf maıl ıs not delivered to street address)	Room/suite	(202	2)33	6-5500
Tei	mınate	:d	750 FIRST STREET NE					
☐ Am	ended	return	City or town, state or country, ar WASHINGTON, DC 20002	nd ZIP + 4	<u>'</u>	— G Gross	s recei	pts \$ 153,426,705
Г Арі	plication	n pending	WASHINGTON, DC 20002					
			F Name and address of p	orincipal officer	H(a) Is th	ıs a group returi	n for affi	liates? Yes No
			NORMAN ANDERSON 750 FIRST STREET NE					
			WASHINGTON, DC 2000	02		all affiliates ir		1? Yes No t (see instructions)
			<u> </u>			oup exemp		
<u> </u>	x-exem	npt status	✓ 501(c)(3) 501(c)() •	◀ (insert no)				
J W	ebsite	e:⊫ WW	/W APA ORG					
		ganızatıon	Corporation Trust Associa	ation Other 🕨	L Year of	formation 19	925	M State of legal domicile DC
Pa	rt I	Sum	mary					
		•	-	sion or most significant activities	DEDCUID OR	C 4 NI 7 7 7 T T	0 N G	DEATED TO
a 1				ASSOCIATION IS A NATIONAL MEM NS OF PROMOTING HEALTH, EDUCA				
Governance				,,				
≅								
<u>₹</u>	,	Chack th	his how b if the organization	discontinued its operations or dispose	d of more than	2 5 % of its	not	accotc
			•			25 % 01113	3	173
Activities &	1			erning body (Part VI, line 1a) rs of the governing body (Part VI, line 1			4	173
₽	1			in calendar year 2010 (Part V., line 2a)		•	5	702
Ē			mber of volunteers (estimate i				6	702
ď			•	n Part VIII, column (C), line 12			7a	9,216,480
				e from Form 990-T, line 34			7b	2,804,203
				Pr	rior Year		Current Year	
	8	Contri	butions and grants (Part VIII	, line 1h)		3,869,	140	3,376,169
≗	9		am service revenue (Part VIII	100,369,		101,151,768		
Revenue	10	_	tment income (Part VIII, colu	478	4,280,744			
ii.	11	Other	revenue (Part VIII, column (A	A), lines 5, 6d, 8c, 9c, 10c, and 11e)		20,696,	,863	22,866,979
	12		_	11 (must equal Part VIII, column (A), l	ine	120751	635	121 675 660
	12			art IX, column (A), lines 1-3)		130,751,		131,675,660
	13 14			t IX, column (A), line 4)	•	167,	0	208,174
	15			oyee benefits (Part IX, column (A), lines	. 5_			
\$	15	10)	es, other compensation, emplo	byee benefits (Fart 1x, Column (x), fine:	, , ,	51,982,	655	51,317,475
Expenses	16a	Profes	sional fundraising fees (Part I	X, column (A), line 11e)			0	0
ੜੀ	ь	Total fu	ındraısıng expenses (Part IX, column	(D), line 25) ▶ <u>0</u>	_			
	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		66,390,	489	68,700,612
	18	Total	expenses Add lines 13-17 (r	nust equal Part IX, column (A), line 25)	118,541,	122	120,226,261
	19	Reven	ue less expenses Subtract lir	ne 18 from line 12		12,210,	513	11,449,399
Net Assets or Fund Balances					Beginni	ing of Curre Year	ent	End of Year
sets afan	20	Total	assets (Part V line 16)			178,565,	643	195,322,496
AB.	21					155,302,		157,812,632
Z Z Z	22			ct line 21 from line 20	. —	23,263,	-	37,509,864
Pai	1311	_	ature Block					
Unde	r penal	Ities of p	erjury, I declare that I have exan	nined this return, including accompanying				
	ledge :		a, ic is crue, correct, and comple	te. Declaration of preparer (other than off	ccijis based 0	n an morm	аиОП	от winch preparer has any
		T _k			1			
c .		Signs	ature of officer			2011-11-15 Date		
Sigr Here		'				Jaco		
	_		HIE TURNER CFO or print name and title					
		Print/Type	<u>'</u>	Preparer's signature	Date	Check if se	elf-	PTIN
Dv: ¬		preparer's	s name		Date	employed		I I IIN
Paid Prepa	arar		me 🕨 ARGY WILTSE & ROBINSON PC					Fırm's EIN
Use (Firm's add	dress 🕨 8405 GREENSBORO DRIVE 7	TH FLOOR				Phone no 🕨 (703) 893-
,			MCLEAN, VA 22102					0600

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

┌Yes ┌No

Form	90 (2010)	Page 2
Par		.F
1	Briefly describe the organization's mission	
PSYC SUPF INCL KNOV PSYC	MERICAN PSYCHOLOGICAL ASSOCIATION (APA) IS A NATIONAL MEMBERSHIP ORGANIZATION CREATED TO ALT OLOGY AS A MEANS OF PROMOTING HEALTH, EDUCATION, AND HUMAN WELFARE APA FULFILLS THESE OBJECT RTING A NUMBER OF PROGRAMS AND ACTIVITIES FOR ITS MEMBERS AND THE GENERAL PUBLIC THESE ACTIVITIES FOR ITS MEMBERS AND THE GENERAL PUBLIC THESE ACTIVITY OF RESEARCH RESULTS AND PSYCHOLOGIC DESIGNED TO SUPPORT THE USE OF SET OF A SOCIETY OF THE USE OF OLOGICAL KNOW-HOW IN EDUCATION, AND PROGRAMS DESIGNED TO ENSURE QUALITY EDUCATIONAL OPPOTED TO THE USE OF UDENTS INTERESTED IN PURSUING A CAREER IN PSYCHOLOGY	TIVES BY ITIES AL
2	Id the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
_		
3	id the organization cease conducting, or make significant changes in how it conducts, any program ervices?	
4	escribe the exempt purpose achievements for each of the organization's three largest program services by expenses ection 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants ar llocations to others, the total expenses, and revenue, if any, for each program service reported	nd
4a	(Code) (Expenses \$ 34,274,251 including grants of \$ 0) (Revenue \$ 80,765,68	36)
	The APA Publications and Databases Office is responsible for the dissemination of psychological information worldwide. Information dissemination projects scholarly journals, a book and video publishing program, and seven electronic database products. In 2010 the APA journals program published more the articles in 270 issues. PsycARTICLES, the electronic database product containing full text journal content, released 322 issues with 3,701 articles of jour published in 2010, and 14 issues with 105 articles of older journal content. APA published 76 books and 12 videos in 2010. 281 books were added to tadabase, these included 42 books published by APA and 239 older books published by others. PsycINFO, the bibliographic database, was increased by records. PsycINFO also added 96 new terms to the Thesaurus of Psychological Index Terms, which constitutes the controlled vocabulary used for index databases. PsycEXTRA, the gray literature database that includes both bibliographic records and full text content, increased by 29,481 records. In 2010 reviews were added to PsycCRITIQUES, the database of book and film reviews.	han 3,255 Irnal content the PsycBOOKS IY 198,009 XING APA
4b	(Code) (Expenses \$ 11,253,363 including grants of \$ 0) (Revenue \$ 17,240,93	20.)
40	THE APA PUBLIC & MEMBER COMMUNICATIONS DIRECTORATE COMPRISES MEDIA RELATIONS AND PUBLIC AFFAIRS, MEMBERSHIP SERVICES, MARKE ADVERTISING SALES, PUBLICATIONS EDITING AND DESIGN, AND TWO MEMBER MAGAZINES THE DIRECTORATE IS THE PRIMARY POINT OF CONTACT MEMBERS AND THE PUBLIC, AND AS SUCH, STRIVES TO ADVANCE PSYCHOLOGY AS A SCIENCE, AS A PROFESSION AND AS A MEANS OF PROMOTING HAND WELFARE DIRECTORATE ACTIVITIES INCLUDE DEVELOPMENT OF MEMBERSHIP RECRUITMENT ADVERTISING AND DIRECT MAIL CAMPAIGNS AND PROMOTION OF MEMBERSHIP BENEFITS AND PRODUCTS RESPONSIBILITIES INCLUDE THE SALE OF ADVERTISING IN ALL OFFICIAL APA MAGAZINES, JON APA'S WEBSITE, THE SALE OF EXHIBIT SPACE AT APA'S ANNUAL CONVENTION, PUBLISHING TIMELY INFORMATION ON APA'S WEBSITE AND ENSURING POSITIVE USER EXPERIENCE, AND OPERATING THE MEMBER SERVICE CENTER, WHICH HANDLES MEMBER RELATIONS, BULK SUBSCRIPTION ORDERS DOURNAL FULFILLMENT AND DUES PROCESSING THE DIRECTORATE SERVES AS THE PRIMARY CONDUIT FOR INFORMATION FOR MEDIA, THE GENERA POLICYMAKERS ABOUT PSYCHOLOGY AND APA THROUGH NEWS STORIES IN POPULAR AND TRADE MEDIA AND THROUGH DISSEMINATION OF INFORM WWW APA ORG AND PUBLICATION OF PAMPHLETS AND BROCHURES	TING AND FOR MEDIA, HUMAN HEALTH OTHE OURNALS, AND ING A BOOK AND AL PUBLIC AND
4c	(Code) (Expenses \$ 8,302,859 including grants of \$ 23,777) (Revenue \$ 3,888,85	 57)
	THE APA EDUCATION DIRECTORATE PLAYS A STRONG ROLE IN THE AREA OF QUALITY ASSURANCE FOR 901 ACCREDITED PROGRAMS IN PROFESSION PSYCHOLOGY THE CONTINUING EDUCATION COMMITTEE APPROVED 782 ORGANIZATIONS AS SPONSORS OF CONTINUING EDUCATION THE DIRECTOR PLAYS AN IMPORTANT ROLE IN SHAPING THE EDUCATIONAL EXPERIENCE OF TOMORROW'S PSYCHOLOGISTS AND IN PROVIDING CONTINUING PROFESEDUCATION FOR TODAY'S PRACTITIONER CONTINUING EDUCATION IS OFFERED THROUGH 67 WEB DELIVERED PROGRAMS, AND 129 BOOK-BASED ARTICLE-BASED PROGRAMS 371 CONTINUING EDUCATION OPPORTUNITIES WERE OFFERED BEFORE AND DURING THE 2010 APA CONVENTION IN SACALIFORNIA	ORATE ALSO SSIONAL AND JOURNAL
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ 22,229,770 including grants of \$ 184,397) (Revenue \$ 1,974,784)	

76,060,243

Total program service expenses▶\$

Form **990** (2010)

Part TV	Checklist	of Require	d Schedules
	CHECKHOL	oi Keguiie	u Scheuules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	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		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
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? <i>If "Yes," complete Schedule D, Part II</i>	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
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 quasiendowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Νο
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	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
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> "Yes," complete Schedule F, Parts I and IV	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? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	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? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20Ь		

Par	t 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? If "Yes," complete Schedule I, Parts I and II	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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete Schedule J	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? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part II	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? If "Yes," complete Schedule L, Part III	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> " <i>Yes,"</i> complete <i>Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	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? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes Vo			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	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? If "Yes," complete Schedule R, Part VI	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	
		F	orm 990	(2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable la 1,307			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	-		
	1b 0	_		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
	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	4a	Yes	
ь	account)?		165	
_	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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		N
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	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		N
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e 7f		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			N
9	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a 9b		
,	Section 501(c)(7) organizations. Enter	30		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club	1		
	facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	-		
U	against amounts due or received from them)	_		
а	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
;	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
_	in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N (
	If "Vas " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14b		

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.

_Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax vear			
b	Enter the number of voting members included in line 1a, above, who are independent			
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		165	
4	supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was	3		No
	filed?	4		No
5	Did the organization become aware during the year of a significant 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			
а	The governing body?	8a	Yes	
Ь	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
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
Ь	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	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		, 03	
	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?			
а	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 15a or 15b, describe the process in Schedule O (See instructions)			
	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		
Se	ection 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)			

- 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 Own website. Another's website. Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public 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

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

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

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

Check this box if neither the organ	•	elated o	rganı	zatio	on co	ompen	sate	d any current office	r, director, or trust	ee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee Key employee		from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
See Additional Data Table											

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

		_											
	(A) Name and Title	(B) Average hours	1	(C) (D) (E) Position (check all Reportable Reportable compensation compensation from the from related								(F) Estima amount o	ated fother
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC) (W- 2/1099- MISC)			compens from t rganizati relat organiza	the ion and ed
See A	ddıtıonal Data Table												
1b	Sub-Total				٠.	٠.		 					
_ с	Total from continuation sheets						Þ		4.746.774				7.47.004
d	Total (add lines 1b and 1c)							<u> </u>	4,716,774		0		747,201
2	Total number of individuals (incl \$100,000 in reportable compen					tea	above) wnc	received more tha	n			
												Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sci							-	or highest compensa	ated employee	3		No
4	For any individual listed on line organization and related organiz										4	Yes	
5	Did any person listed on line 1a services rendered to the organiz		-				-		=		5		No
Se	ection B. Independent Con	tractors											

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
CADMUS PSG PO BOX 822934 PHILADELPHIA, PA 19182	PRINTING SERVICES	4,789,861
AUTOMATED GRAPHIC SYSTEMS 4590 GRAPHICS DRIVE WHITE PLAINS, MD 20695	MAIL & POSTAGE SVC	2,481,886
BRIGHTKEY INC 9050 JUNCTION DRIVE ANNAPOLIS, MD 20701	WAREHOUSING	1,193,882
SPHERION CORPORATION 15552 COLLECTION CENTER DR CHICAGO, IL 60693	STAFFING	1,093,653
GRAND HYATT WASHINGTON 1000 H STREET NW WASHINGTON, DC 20001	CONFERENCE	903,437
2 Total number of independent contractors (including but not limited to those listed above \$100,000 in compensation from the organization ►82) who received more than	

Form 9	•	•					Pag	e 9
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	
ats Ste	1a	Federated campaigns	1a					
	ь	Membership dues	. 1b					
S, C	С	Fundraising events	. 1c					
# # #		Related organizations						
S.E		Government grants (contributions)		3,376,169				
<u>ੋਂ ਨੂੰ</u>								
호	f	All other contributions, gifts, grants similar amounts not included above						
i de de	g	Noncash contributions included in li	nes 1a-1f \$					
Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a-1f			3,376,169			
				Business Code				
eun	2a	JOURNAL SUBSCRIPTIONS		111000	13.778.692	13,778,692		
æ	ь		TS	541900	48,373,910			
90	С	MEMBERSHIP DUES		900099	13,630,822	13,630,822		
<u>5</u>	d	PUBLICATION SALES		511120	19,448,801	19,448,801		
ج د	е	CONVENTION AND CONFERENCE F	EES	611600	2,849,443	2,849,443		
Program Serwce Revenue	f	All other program service re	venue		3,070,100	3,070,100		
š	g	Total. Add lines 2a-2f			101,151,768			
	3	Investment income (includir	ıg dıvıdends, ınterest					
		and other similar amounts)			774,932			774,932
	4	Income from investment of tax-ex	empt bond proceeds		0			
	5	Royalties	<u> </u>		0			
	_		(ı) Real 14,711,999	(II) Personal				
		Gross Rents Less rental	14,711,999					
		expenses	44.744.000					
	С	Rental income or (loss)	14,711,999					
	d	Net rental income or (loss)			14,711,999		4,586,084	10,125,915
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	25,256,857	0				
		assets other						
	ь	than inventory Less cost or	21,688,434	62,611				
		other basis and sales expenses						
	c	Gain or (loss)	3,568,423	-62,611				
	d	Net gain or (loss)	<u> </u>		3,505,812			3,505,812
Other Revenue	8a	Gross income from fundraisi (not including \$	line 1c)					
He He	Ь	Less direct expenses .						
Ò		Net income or (loss) from ful	_		0			
			ctivities See Part IV, line 19	. a				
				ь				
	С	Net income or (loss) from ga	ming activities		0			
	10a	Gross sales of Inventory, les returns and allowances	a a					
		Less cost of goods sold .						
	С	Net income or (loss) from sa	les of inventory •		0			
	4.0	Miscellaneous Revenue		Business Code 541800	3 457 743		2,457,713	
		ADVERTISING			2,457,713			
	6	INVESTMENT INCOME (AF TEN G LLC K-1)	² A	900003	2,745,582		1,939,487	806,095
	c	EXPENSE REIMBURSEMEN	 T	900003	1,481,610	1,481,610		
		All other revenue			1,470,075	1,236,879	233,196	
		• Total. Add lines 11a–11d			8,154,980			
	12	Total revenue. See Instructi	ons		131,675,660	103,870,257	9,216,480	15,212,754
						For	n 990 (20:	10)

	990 (2010)				Page 10
Par	Statement of Functional Expenses				
А	Section $501(c)(3)$ and $501(c)(4)$ organizations mus II other organizations must complete column (A) but are not required to c			(D).	
Do no	ot include amounts reported on lines 6b, b, 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	143,964	143,964		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	61,122	61,122		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	3,088			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	4,053,256	2,658,828	1,394,428	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			
7	Other salaries and wages	36,807,381	24,039,228	12,768,153	0
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,011,186	0	2,011,186	0
9	Other employee benefits	5,672,738	28,795	5,643,943	0
10	Payroll taxes	2,772,914	0	2,772,914	0
а	Fees for services (non-employees) Management	339,598	0	339,598	0
Ь	Legal	781,675	116,647	665,028	0
с	Accounting	257,843	0	257,843	0
d	Lobbying	252,332	252,332	0	0
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	438,248	0	438,248	0
g	Other	10,098,117	6,986,289	3,111,828	0
12	Advertising and promotion	1,503,646	1,117,409	386,237	0
13	Office expenses	16,666,634	13,000,716	3,665,918	0
14	Information technology	0			
15	Royalties	2,418,387	2,420,928	-2,541	0
16	Occupancy	14,233,283	958,968	13,274,315	0
17	Travel	897,538	829,037	68,501	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	1,895,891	680,733	1,215,158	0
20	Interest	4,039,188	0	4,039,188	0
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	6,741,229	774,955	5,966,274	0
23	Insurance	405,326	0	405,326	0
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	SPECIAL PROJECTS	4,023,877	2,014,387	2,009,490	0
b	BOARD AND COMMITTEE	2,686,141	843,555	1,842,586	0
С	HONORARIA AND STIPENDS	1,854,043	1,646,843	207,200	0
d	INCOME TAX EXPENSE	1,138,644	0	1,138,644	0
e	OTHER GRANTS TO TRAINEES	820,790	820,790	0	0
f	A II other expenses	-2,791,818	16,661,629	-19,453,447	0
25	Total functional expenses. Add lines 1 through 24f	120,226,261	76,060,243	44,166,018	0
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a				
	combined educational campaign and fundraising solicitation				

Part X Balance Sheet (A) (B) Beginning of year End of year 500 500 1 35,862,031 2 45.137.245 2 3 3 17,995,545 4 17,591,860 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 221,500 5 215,000 Schedule L . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) **A**ssets 6 7 8 4,590,000 8 4,680,000 2,262,939 2,146,282 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete 102,438,357 10a Part VI of Schedule D 60.404.097 46.008,350 **10c** ь Less accumulated depreciation 10b 42.034.260 56.890,657 68.921.307 11 11 8,218,889 12 8,256,173 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 6,515,232 15 6,339,869 15 178,565,643 16 16 195,322,496 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 14,444,782 14.742.363 17 17 Accounts payable and accrued expenses . 18 18 46,194,735 19 19 47,075,051 20 17,350,000 20 16,685,000 Liabilities 21 8,748,429 21 7,712,158 Escrow or custodial account liability $Complete\ Part\ IV\ of\ Schedule\ D$. . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 56.090.667 54.557.047 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 12.175.947 25 17,338,594 Other liabilities Complete Part X of Schedule D 26 155.302.141 26 157,812,632 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶
☐ and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets Temporarily restricted net assets 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ 🔽 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 23,263,502 32 37,509,864 Retained earnings, endowment, accumulated income, or other funds ¥ 23,263,502 33 37,509,864 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 178.565.643 195,322,496 34

Pa	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		131,6	675,66
2	Total expenses (must equal Part IX, column (A), line 25)	2			226,26
3	Revenue less expenses Subtract line 2 from line 1	3			449,39
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		23,2	263,50
5	Other changes in net assets or fund balances (explain in Schedule O)	5		2,7	796,96
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		37,5	509,86
Pai	rt XII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response to any question in this Part XII			୮	•
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
Ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of 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				
	Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ıssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	required	3b	Yes	

DLN: 93493319056521

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

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

Inspection **Employer identification number**

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) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% 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 331/3% 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) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 10 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 Type I **b** Type II **c** Type III - Functionally integrated Type III - Other 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) 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 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) No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s) (iii) (iv) (vi) (v) Type of Is the Did you notify the Is the (i) organization organization in (vii) organization in organization in Name of (ii) (described on col (ı) lısted ın A mount of col (1) of your col (i) organized supported EIN lines 1 - 9 above your governing support in the US? or IRC section support? organization document? (see Yes instructions)) Yes Yes

Total

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

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

	dider rate III. If the	organización i	ans to quanty t	maci the tests	iisted below, pic	case complet	c raic III.						
S	ection A. Public Support		_										
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total						
1	Gifts, grants, contributions, and												
	membership fees received (Do not												
	ınclude 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												
	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												
Ü	line 4												
S	ection B. Total Support	1				I							
	endar year (or fiscal year beginning												
Cur	in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total						
7	A mounts from line 4												
8	Gross income from interest,												
0	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 Do not include gain												
	or loss from the sale of capital												
	assets (Explain in Part IV)												
11	Total support (Add lines 7												
	through 10)												
12	Gross receipts from related activities	es, etc (See inst	ructions)			12							
13	First Five Years If the Form 990 is f	or the organization	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	nızatıon,						
	check this box and stop here	_	r		•	. , . , -	▶ ┌॔						
S	ection C. Computation of Pub	lic Support P	ercentage										
14	Public Support Percentage for 2010	(lıne 6 column (f) divided by line	11 column (f))		14							
15	Public Support Percentage for 2009	Schedule A Par	rt II line 14			15							
							 						
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, chec							
	and stop here. The organization qua	•				2.2.4.204	▶ [
b	33 1/3% support test—2009. If the				oa, and line 15 is :	1/3% or mor کد	. -						
17-	box and stop here. The organization				12 16 1C	handler - 4.4	▶						
r/a	10%-facts-and-circumstances test-						ın.						
	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												
	_	is the facts and	circumstances"	test ine organiz	acion quanifies as	a publicly supp	orted F						
L	organization 10%-facts-and-circumstances test-	_2000 Ifthe era	anization did not	chack a hay an lu	no 13 165 166 5	or 17a and line	F1						
ט	15 is 10% or more, and if the organ												
	Explain in Part IV how the organizat			•		<u>-</u>	clv						
	supported organization	aon meets the 16	aces and circuitis	tances test life	. organization qual	iiiies as a publi	ETY ▶ ¯						
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b. check this	box and see	- 1						
	instructions	a.a not eneck		, , 0 0 , 7 0 0	. 2. 2, 511558 61115		▶ □						

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support				, ,	•		
Cale	ndar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20	10	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	6,045,674	3,703,445	3,760,072	3,869,140	3	,376,169	20,754,500
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt	88,630,760	5 90,940,893	96,050,799	102,030,463	103	,870,257	481,523,178
3	purpose Gross receipts from activities that are not an unrelated trade or							
4	business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5	94,676,440	94,644,338	99,810,871	105,899,603	107	,246,426	502,277,678
	A mounts included on lines 1, 2, and 3 received from disqualified persons		0	0	0		0	0
b	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of		0	0	C		0	0
	the amount on line 13 for the year							
с 8	Add lines 7a and 7b Public Support (Subtract line 7c from line 6)		0	0	0		0	502,277,678
Se	ction B. Total Support				•		•	
Cale	ndar year (or fiscal year	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20	10	(f) Total
9	beginning in) A mounts from line 6	94,676,440	94,644,338	99,810,871	105,899,603	107	246,426	502,277,678
10a	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties and income from similar sources	20,877,517	13,176,962	10,328,214	10,292,416	11	.706,942	66,382,051
b	Unrelated business taxable income (less section 511 taxes) from businesses		10,021,578	9,025,010	9,073,408	9	216,480	37,336,476
С	acquired after June 30, 1975 Add lines 10a and 10b	20,877,517	23,198,540	19,353,224	19,365,824	20	923,422	103,718,527
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	377,095	416,667	423,440	0		0	1,217,202
13	Total support (Add lines 9, 10c, 11 and 12)	115,931,052	118,259,545	119,587,535	125,265,427	128	169,848	607,213,407
14	First Five Years If the Form 990 is check this box and stop here	for the organizat	ıon's fırst, second	, thırd, fourth, or	fifth tax year as a	section5	01(c)(3) organization, ►
Se	ction C. Computation of Pub	olic Support P	ercentage					
15	Public Support Percentage for 201			13 column (f))		15		82 718 %
16	Public support percentage from 20	09 Schedule A , F	Part III, line 15			16		83 583 %
Se	ction D. Computation of Inv							
17	Investment income percentage for	•	• •	•	n (f))	17		17 081 %
18	Investment income percentage fro	m 2009 Schedule	A, Part III, line 1	. 7		18		15 784 %

18 Investment income percentage from 2009 Schedule A, Part III, line 17

19a 33 1/3% support tests—2010. 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

33 1/3% support tests—2009. 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 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours		((tion (hat a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
Norman Abeles PhD COR Member	1 0	×						1,200	0	0		
Sare J Akdag PhD COR Member	1 0	×						0	0	0		
Jeffrey R Alberts PhD COR Member	1 0	Х						0	0	0		
Judith L Alpert PhD COR Member	1 0	Х						0	0	0		
Linda G Alverson-Eiland PhD COR Member	1 0	Х						0	0	0		
Barry S Anton PhD ABPP Recording Secretary	12 0	Х		х				18,700	0	0		
Laura H Barbanel EdD COR Member	1 0	Х						0	0	0		
Stephen Neil Berk PhD COR Member	1 0	Х						0	0	0		
Larry E Beutler PhD COR Member	1 0	Х						1,073	0	0		
Linas A Bieliauskas PhD COR Member	1 0	х						0	0	0		
Rosie Phillips Bingham PhD BO D Member-At-Large	100	Х						12,900	0	0		
Kenneth H Bohm PhD COR Member	1 0	Х						0	0	0		
Meg A Bond PhD COR Member	1 0	Х						0	0	0		
Philip H Bornstein PhD COR Member	1 0	Х						0	0	0		
Frances E Boulon-Dıaz PhD COR Member	1 0	Х						0	0	0		
James H Bray PhD Past President	12 0	Х						16,558	0	0		
Sharon M Brennan PhD COR Member	1 0	Х						0	0	0		
Gary R Brooks PhD COR Member	1 0	Х						1,664	0	0		
Kathleen S Brown PhD COR Member	1 0	Х						0	0	0		
Lında F Campbell PhD COR Member	1 0	Х						300	0	0		
Cındy I Carlson PhD COR Member	1 0	Х						0	0	0		
Jean A Carter PhD BOD Member-At-Large	100	Х						16,650	0	0		
Rachel N Casas PhD BOD Member-At-Large	10 0	Х						12,900	0	0		
Armand R Cerbone PhD BOD Member-At-Large	10 0	Х						12,900	0	0		
Margaret C Charmolı PhD COR Member	1 0	Х						0	0	0		

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per		((tion (hat a	che	′)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	we e k	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
Jean Lau Chın EdD COR Member	1 0	×						0	0	0		
Joan C Chrisler PhD COR Member	1 0	×						0	0	0		
Scott D Churchill PhD COR Member	1 0	х						0	0	0		
Karen D Cogan PhD COR Member	10	х						0	0	0		
James K Cole PhD COR Member	10	х						0	0	0		
Helen L Coons PhD COR Member	1 0	х						114	0	0		
M Lynne Cooper PhD COR Member	10	х						2,500	0	0		
Stewart E Cooper PhD COR Member	10	х						0	0	0		
Chester D Copemann PhD COR Member	10	х						0	0	0		
Paul L Craig PhD Treasurer	17 0	х		х				20,600	0	0		
Grady Dale Jr EdD COR Member	10	х						0	0	0		
Jessica Henderson Daniel PhD COR Member	10	х						0	0	0		
Jaine L Darwin PsyD COR Member	10	х						0	0	0		
Richard C Diedrich PhD COR Member	10	х						309	0	0		
Beth Doll PhD COR Member	10	х						0	0	0		
Emanuel Donchin PhD COR Member	10	х						0	0	0		
Rosalınd S Dorlen PsyD COR Member	1 0	х						0	0	0		
Louise A Douce PhD COR Member	1 0	х						0	0	0		
Martın Drapeau PhD COR Member	10	х						0	0	0		
Carol R Drummond PhD COR Member	10	х						0	0	0		
Sarı H Dworkin PhD COR Member	1 0	х						0	0	0		
Elena J Eısman EdD COR Member	1 0	х						0	0	0		
Randall W Engle PhD COR Member	1 0	Х						800	0	0		
Charles R Figley PhD COR Member	1 0	Х						0	0	0		
William E Foote PhD COR Member	1 0	х						78	0	0		

(A) Name and Title	(B) Average hours per		tion (that a	(che	′)	_		(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
I Bruce Frumkın PhD COR Member	1 0	Х						0	0	C
Kurt F Geisinger PhD COR Member	1 0	Х						0	0	0
Terry S Gock PhD COR Member	1 0	Х						0	0	0
Carol D Goodheart EdD President	19 0	Х		х				37,137	0	0
Samuel L Graham PhD COR Member	1 0	Х						0	0	0
Stanley R Graham PhD COR Member	1 0	Х						0	0	0
Melvin A Gravitz PhD COR Member	1 0	Х						0	0	0
Beverly Greene PhD COR Member	1 0	Х						916	0	C
Lorraine Williams Greene PhD COR Member	1 0	Х						300	0	0
Mary Banks Gregerson PhD COR Member	1 0	Х						0	0	0
Luis F Guevara PsyD COR Member	1 0	Х						0	0	C
John W Hagen PhD COR Member	1 0	Х						1,000	0	(
Douglas C Haldeman PhD COR Member	1 0	Х						1,500	0	(
M Elizabeth Lewis Hall PhD COR Member	1 0	Х						0	0	(
Raymond F Hanbury PhD COR Member	1 0	х						0	0	(
Charles J A Hayes PhD COR Member	1 0	Х						0	0	(
J Stephen Hazel PhD COR Member	1 0	х						0	0	(
James D Herzog PhD COR Member	1 0	Х						0	0	(
G William Hill PhD COR Member	1 0	Х						0	0	(
Valerie Holms PhD COR Member	1 0	Х						0	0	C
Sally S Horwatt PhD COR Member	1 0	Х						0	0	(
Josephine D Johnson PhD COR Member	1 0	Х						0	0	(
Norine G Johnson PhD COR Member	1 0	Х						0	0	(
Suzanne Bennett Johnson PhD BO D Member-At-Large	10 0	Х						14,211	0	
Robert Frank Kaltenbach PhD COR Member	1 0	x						О	0	(

(A) Name and Title	(B) Average hours		((tion (hat a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Nadıne J Kaslow PhD BO D Member-At-Large	10 0	х						27,900	0	C
Jennıfer F Kelly PhD BOD Member-At-Large	10 0	х						16,650	0	C
Robert D Kerns PhD COR Member	1 0	х						0	0	0
Deborah A King PhD COR Member	1 0	х						0	0	0
Gerald P Koocher PhD COR Member	1 0	х						0	0	0
Annette M La Greca PhD COR Member	1 0	х						7,500	0	0
Kaye Price Laud PhD COR Member	1 0	х						0	0	0
David M Lechuga PhD COR Member	1 0	х						0	0	0
Elaine S LeVine PhD COR Member	1 0	х						0	0	0
John C Linton PhD ABPP COR Member	1 0	х						0	0	0
Edwin A Locke PhD COR Member	1 0	х						0	0	0
Catherine E Lord PhD COR Member	1 0	х						1,000	0	0
Arthur W Lyons DA COR Member	1 0	х						0	0	0
Debra A Major PhD COR Member	1 0	х						0	0	0
Jennıfer J Manly PhD COR Member	1 0	х						0	0	0
Bonnie Markham PhD PsyD COR Member	1 0	х						0	0	0
Michael E Martinez PhD COR Member	1 0	х						0	0	0
Donald McAleer PsyD COR Member	1 0	х						0	0	0
Susan H McDaniel PhD COR Member	1 0	х						3,416	0	0
Cathy McDaniels Wilson PhD COR Member	1 0	х						0	0	0
Richard M McGraw PhD COR Member	1 0	х						0	0	0
Charlotte McGray PsyD COR Member	1 0	Х						0	0	0
William John Meegan PhD COR Member	1 0	х						0	0	0
Steven D Moore PhD COR Member	1 0	Х						0	0	0
Joel E Morgan PhD COR Member	1 0	×						0	0	0

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours	Posi t	(C tion (hat a	che				(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	per week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
John N Moritsugu PhD COR Member	1 0	х						0	0	0		
Chad D Morris PhD COR Member	1 0	Х						0	0	0		
Dolores O Morris PhD COR Member	1 0	х						0	0	0		
Mandell J Much PhD COR Member	1 0	Х						0	0	0		
James Anton Mulick PhD COR Member	1 0	Х						0	0	0		
Michael J Murphy PhD COR Member	1 0	х						0	0	0		
Helen A Neville PhD COR Member	1 0	х						0	0	0		
Maureen A O'Connor PhD JD COR Member	1 0	Х						0	0	0		
Judith K Olson PhD COR Member	1 0	Х						0	0	0		
Allen M O moto PhD COR Member	1 0	Х						213	0	0		
George W O'Neill PhD COR Member	1 0	Х						0	0	0		
Peter M Oppenheimer PhD COR Member	1 0	Х						0	0	0		
Randy K Otto PhD MLS COR Member	1 0	Х						1,215	0	0		
Jodi Rae Owen PsyD COR Member	1 0	Х						0	0	0		
Lynn T Pantano PhD COR Member	1 0	Х						0	0	0		
A bigail T Panter PhD COR Member	1 0	х						0	0	0		
William D Parham PhD COR Member	1 0	Х						0	0	0		
James L Pate PhD COR Member	1 0	Х						0	0	0		
Gary I Payne PhD COR Member	1 0	Х						0	0	0		
Walter E Penk PhD ABPP COR Member	1 0	Х						1,050	0	0		
David B Peterson PhD COR Member	1 0	Х						0	0	0		
Terry D Pezzot-Pearce PhD COR Member	1 0	х						0	0	0		
Dianne M Polowczyk PhD COR Member	1 0	х						0	0	0		
Diana Lee Prescott PhD COR Member	1 0	Х						0	0	0		
Mitchell J Prinstein PhD COR Member	1 0	х						1,875	0	0		

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per		tion (that a	che	')		ı	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
Thomas P Pusaterı PhD COR Member	1 0	х						0	0	0		
James W Quillin PhD MP COR Member	1 0	Х						0	0	0		
Lynn P Rehm PhD COR Member	1 0	X						0	0	0		
Robert J Resnick PhD COR Member	1 0	Х						145	0	0		
Mary E Reuder PhD COR Member	1 0	Х						0	0	0		
Frank C Richardson PhD COR Member	1 0	Х						156	0	0		
Barbara T Roberts PhD COR Member	1 0	Х						0	0	0		
Craig H Robinson PhD COR Member	1 0	Х						0	0	0		
Michael R Rodriguez PhD COR Member	1 0	Х						0	0	0		
Daniel Edward Rohe PhD COR Member	1 0	Х						0	0	0		
Beth N Rom-Rymer PhD COR Member	1 0	X						0	0	0		
Sandra C Rose PhD COR Member	1 0	Х						0	0	0		
Kurt Salzınger PhD COR Member	1 0	Х						585	0	0		
David D Sandberg PhD COR Member	1 0	Х						0	0	0		
Clifton J Saper PhD COR Member	1 0	Х						0	0	0		
Douglas S Saunders PhD COR Member	1 0	Х						0	0	0		
Karen J Saywitz PhD COR Member	1 0	Х						0	0	0		
David J Dean Schroeder PhD COR Member	1 0	Х						0	0	0		
Kenneth J Sher PhD COR Member	1 0	Х						0	0	0		
Stephanie A Shields PhD COR Member	1 0	Х						0	0	0		
L J Shrum PhD COR Member	1 0	Х						0	0	0		
Norman L Stephenson PhD COR Member	1 0	Х						0	0	0		
Bonnie R Strickland PhD COR Member	1 0	Х						0	0	0		
William J Strickland PhD COR Member	1 0	Х						0	0	0		
Terı L Strong PhD COR Member	1 0	Х						0	0	0		

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per		tion (that a	che	')			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
Richard M Suinn PhD COR Member	1 0	Х						0	0	0		
Janet K Swim PhD COR Member	1 0	X						0	0	0		
Patricia L G Taimanglo PhD COR Member	1 0	Х						0	0	0		
Harold Takooshian PhD COR Member	1 0	Х						0	0	0		
Nına K Thomas PhD COR Member	1 0	Х						0	0	0		
Jalie A Tucker PhD MPH COR Member	1 0	Х						0	0	0		
Albert Valencia EdD COR Member	1 0	Х						0	0	0		
Judith L Van Hoorn PhD COR Member	1 0	Х						0	0	0		
Melba J T Vasquez PhD President - Elect	12 0	Х		х				17,356	0	0		
Thomas John Vaughn PhD ABPP COR Member	1 0	Х						0	0	0		
Shirley A Vickery PhD COR Member	1 0	Х						0	0	0		
Laurel B Wagner PhD COR Member	1 0	Х						0	0	0		
Lenore E Walker EdD COR Member	1 0	Х						167	0	0		
W Bruce Walsh PhD COR Member	1 0	Х						0	0	0		
Patrıcıa Walz PhD COR Member	1 0	Х						0	0	0		
Chris K Wehl PhD COR Member	1 0	Х						0	0	0		
Howard M Weiss PhD COR Member	1 0	Х						0	0	0		
Susan K Whitbourne PhD COR Member	1 0	Х						0	0	0		
Gregory H Wilmoth PhD COR Member	1 0	Х						0	0	0		
Barbara C Wilson PhD COR Member	1 0	Х						0	0	0		
Erica H Wise PhD COR Member	1 0	Х						600	0	0		
Frank C Worrell PhD COR Member	1 0	Х						0	0	0		
Karen M Zager PhD COR Member	1 0	Х						500	0	0		
Norman B Anderson PhD EVP/CEO	38 0			х				507,362	0	111,521		
Archie L Turner CFO	38 0			х				317,550	0	37,518		

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

(A) Name and Title	(B) A verage hours	Posi t	((tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Tony F Habash DSC Chief Information Officer	38 0				х			251,526	0	37,048
Michael Honaker PHD Deputy CEO	38 0				х			323,375	0	42,880
Katherine C Nordal PHD ED Professional Practice	19 0				х			268,812	0	23,828
Gwendolyn P Keita PHD ED Publica Interest Directorat	38 0				х			269,666	0	30,961
Cynthia D Belar PHD ED, Education Directorate	38 0				х			268,233	0	62,689
Rhea K Farberman ED, Public & Member communic	38 0				х			322,988	0	80,198
Steven J Breckler PHD ED, Science Directorate	38 0				х			246,208	0	46,332
Nathalie P Gilfoyle JD General Counsel	38 0				х			321,537	0	88,809
Gary R Vandenbos PHD ED, PUBS & COMM Publisher	38 0				х			263,047	0	41,883
Marilyn S Richmond JD Associate ED Govt Relations	38 0					х		231,842	0	26,580
Nancy Moore ED, Governance Affairs	38 0					х		224,807	0	33,605
Randy Phelps Deputy ED, Practice Directorat	38 0					Х		197,921	0	25,691
Stephen Behnke JD PHD Director Ethics Office	38 0					Х		204,810	0	26,214
Peter M Gaviorno SR DIR SLS, LIC, MKT & EXBTS	38 0					х		242,452	0	31,444

DLN: 93493319056521

OMB No 1545-0047

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.

Open to Public Inspection

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

- ◆ 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

	me of the organization ERICAN PSYCHOLOGICAL ASSOCIATION	INC		Employer ide 53-0205890	ntıfıcatıon number
ar	t I-A Complete if the or	ganization is exempt und	ler section 501(
1	Provide a description of the or	ganization's direct and indirect p	olitical campaign ac	tivities in Part IV	
2	Political expenditures			▶	\$
3	V olunteer hours				
a i	t I-B Complete if the or	ganization is exempt und	ler section 501(c)(3).	
1		e tax incurred by the organization			\$
2	Enter the amount of any excis	e tax incurred by organization ma	anagers under sectio	n 4955 >	\$
3	If the organization incurred a s	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				
Pai	rt I-C Complete if the or	ganization is exempt und	ler section 501(c) except section 50	1(c)(3).
1	Enter the amount directly exp	ended by the filing organization fo	or section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed t	o other organization	s for section 527	\$
3	Total exempt function expend	itures Add lines 1 and 2 Enter h	ere and on Form 112	20-POL, line 17b	
			0.0 0 0 1		
	· ·	Form 1120-POL for this year? nd employer identification numbe	er (EIN) of all section	n 527 political organization	_
	Enter the names, addresses a organization made payments amount of political contributio	Form 1120-POL for this year?	er (EIN) of all section or the amount paid fr nd directly delivered	n 527 political organization om the filing organization's to a separate political org	s to which the filing funds. Also enter the anization, such as a ation in Part IV (e) A mount of political contributions received
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	er (EIN) of all section er the amount paid fr nd directly delivered) If additional space	n 527 political organization om the filing organization's to a separate political orgens is needed, provide information (d) A mount paid from filing organization's	s to which the filing funds. Also enter the anization, such as a ation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	er (EIN) of all section er the amount paid fr nd directly delivered) If additional space	n 527 political organization om the filing organization's to a separate political orgens is needed, provide information (d) A mount paid from filing organization's	s to which the filing funds Also enter the anization, such as a ation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	er (EIN) of all section er the amount paid fr nd directly delivered) If additional space	n 527 political organization om the filing organization's to a separate political orgens is needed, provide information (d) A mount paid from filing organization's	s to which the filing funds. Also enter the anization, such as a ation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	er (EIN) of all section er the amount paid fr nd directly delivered) If additional space	n 527 political organization om the filing organization's to a separate political orgens is needed, provide information (d) A mount paid from filing organization's	s to which the filing funds Also enter the anization, such as a ation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	er (EIN) of all section er the amount paid fr nd directly delivered) If additional space	n 527 political organization om the filing organization's to a separate political orgens is needed, provide information (d) A mount paid from filing organization's	s to which the filing funds. Also enter the anization, such as a ation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	er (EIN) of all section er the amount paid fr nd directly delivered) If additional space	n 527 political organization om the filing organization's to a separate political orgens is needed, provide information (d) A mount paid from filing organization's	s to which the filing funds. Also enter the anization, such as a ation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
4 5	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	er (EIN) of all section er the amount paid fr nd directly delivered) If additional space	n 527 political organization om the filing organization's to a separate political orgens is needed, provide information (d) A mount paid from filing organization's	s to which the filing funds. Also enter the anization, such as a ation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	er (EIN) of all section er the amount paid fr nd directly delivered) If additional space	n 527 political organization om the filing organization's to a separate political orgens is needed, provide information (d) A mount paid from filing organization's	s to which the filing funds Also enter the anization, such as a ation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,

section 4911 tax for this year?

┌ Yes ┌ No

Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) a	nd filed Form 5768	(election
	Check If the filing organization belongs to a	an affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)	4,503	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	647,994	
c	Total lobbying expenditures (add lines 1a and 18	b)	652,497	
d	Other exempt purpose expenditures		113,096,091	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	113,748,588	
f	Lobbying nontaxable amount Enter the amount f	from the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 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		
	Grassroots nontaxable amount (enter 25% of lin	ne 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ente	er -0-		
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -		

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.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(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	541,989	618,362	775,699	652,497	2,588,547				
_d	Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000				
е 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000				
f	Grassroots lobbying expenditures		5,527			17,865				

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

		1.	a)		(b)	
		Yes	No		\ moun	nt
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					
а	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?					
е	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					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	** THE A. Commisse if the every instinction is every medical exception FA4/s\/4\ exception [n
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	501(c)(5), (or se		
	501(c)(6).	501(c)(5), « 		Yes	No
1	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?	501(c)(5), (1		
1 2	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c)(5), (1 2		
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?			1 2 3	Yes	No
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c)(5), (1 2 3	Yes	No
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-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 Part I	501(c)(5), (1 2 3	Yes	No
1 2 3 Par	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-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 Part I answered "Yes".	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-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 Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-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 Part I answered "Yes". Dues, assessments and similar amounts from members 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).	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-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 Part I answered "Yes". Dues, assessments and similar amounts from members 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). Current year	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-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 Part I answered "Yes". Dues, assessments and similar amounts from members 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). Current year Carryover from last year	501(c II-A, 1 2a 2b)(5), (1 2 3	Yes	No
1 2 3 Par 1 2 a b	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-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 Part I answered "Yes". Dues, assessments and similar amounts from members 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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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	501(c II-A, 1 2a 2b 2c)(5), (1 2 3	Yes	No
1 2 3 Par 1 2 a b c	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TIII-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 Part I answered "Yes". Dues, assessments and similar amounts from members 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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	2a 2b 2c 3)(5), (1 2 3	Yes	No

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 1 Also, complete this part for any additional information

Ident if ier Return Reference | Explanation DLN: 93493319056521

OMB No 1545-0047

Open to Public Inspection

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.

Name of the organization

Employer identification number

MERICAN	PSYCHOLOGICAL ASSOCIATION INC		
Part I	Organizations Maintaining Donor A	dvised Eunds or Other Similar E	153-0205890
raiti	organization answered "Yes" to Form 99		inds of Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
Total	number at end of year		
Aggre	egate contributions to (during year)		
Aggre	egate grants from (during year)		
Aggre	egate value at end of year		
	he organization inform all donors and donor adv	<u> </u>	oradvised Yes No
used	he organization inform all grantees, donors, and only for charitable purposes and not for the ber		•
	Conservation Easements. Complete	if the organization answered "Ves" to	<u> </u>
	·		5 TOTHI 950, Part IV, line 7.
_ `	ose(s) of conservation easements held by the o Preservation of land for public use (e.g., recreat	<u> </u>	historically importantly land area
<u> </u>	Protection of natural habitat	•	certified historic structure
	Preservation of open space		
•	plete lines 2a-2d if the organization held a qual	ified conservation contribution in the form	of a conservation
	ment on the last day of the tax year	med conservation contribution in the form	of a conservation
			Held at the End of the Year
Total	number of conservation easements		2a
Total	acreage restricted by conservation easements	3	2b
Numl	per of conservation easements on a certified his	storic structure included in (a)	2c
Numl	per of conservation easements included in (c) a	cquired after 8/17/06	2d
Numl	per of conservation easements modified, transfe	urred released extinguished or terminate	d by the organization during
	axable year 🛌	arrea, released, extinguished, or terminate	a by the organization during
Numl	per of states where property subject to conserv	ation easement is located ►	
	the organization have a written policy regardin cement of the conservation easements it holds		dling of violations, and Yes No
Staff	and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation easem	ents during the year 🟲
A mo	unt of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	during the year ► \$
	each conservation easement reported on line 2 h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sec	tion Yes No
balar	irt XIV, describe how the organization reports c ice sheet, and include, if applicable, the text of rganization's accounting for conservation easer	the footnote to the organization's financial	·
rt III	Organizations Maintaining Collection Complete if the organization answered		or Other Similar Assets.
art, h	organization elected, as permitted under SFAS istorical treasures, or other similar assets held de, in Part XIV, the text of the footnote to its fir	for public exhibition, education or researc	ch in furtherance of public service,
hısto	e organization elected, as permitted under SFAS rical treasures, or other similar assets held for de the following amounts relating to these items	public exhibition, education, or research in	•
(i) _R	evenues included in Form 990, Part VIII, line 1		▶ \$
(ii) _A	ssets included in Form 990, Part X		► \$
	organization received or held works of art, hist ving amounts required to be reported under SFA	•	
Reve	nues included in Form 990, Part VIII, line 1		► \$

Assets included in Form 990, Part X

Part	•••• Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tı</u>	reası	ures, or C)the	r Similar	Ass	ets (c	ontınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne fol	lowing	that a	re a signific	ant u	ise of its co	llectio	n	
а	Public exhibition		d	Γ	Loan	orexo	hange prog	rams				
ь	Scholarly research		e	Γ	O the	r						
С	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	ain hov	w the	y furthe	er the	organızatıor	ı's ex	xempt purpo	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								nılar	Г	Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answere	d "Y	es" to For	m 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	ediary	forc	ontribu	utions	or other ass	ets	not	Г	Yes	√ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving t	able		Г			A mo	unt	
c	Beginning balance							1c				
d	Additions during the year						ţ	1d				
e	Distributions during the year						ļ	1e				
f	Ending balance						ŀ	1f				
2a	Did the organization include an amount on Fo	orm 990 Part X lin	a 212				L				Yes	
	If "Yes," explain the arrangement in Part XIV		621.							,,	163	, 110
	rt V Endowment Funds. Complete		n ans	.wer	ad "Ye	s" to	Form 990	Pai	rt IV line	10		
	Endownient i anabi complete	(a)Current Year)Prior			wo Years Back		Three Years B		e) Four Y	ears Back
1a	Beginning of year balance											
b	Contributions											
с	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 yea	r end balance held	as					_		•		
а	Board designated or guasi-endowment											
ь	Permanent endowment											
c	Term endowment ►											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are hel	d and	admınıstere	d for	the			
	organization by										Yes	No
	(i) unrelated organizations									3a(i)		
	(ii) related organizations									3a(ii)	<u> </u>	<u> </u>
	If "Yes" to 3a(II), are the related organizatio	•				•		•		3b		<u> </u>
4	Describe in Part XIV the intended uses of th						\- 1 \/ 1	10				
Par	t VI Investments—Land, Buildings	s, and Equipme	nt. S							T		
	Description of investment				Cost or s (invest		(b)Cost or o basis (othe		(c) Accumu depreciat		(d) Bo	ook value
1a	Land						6,596	5,734				6,596,734
b	Buildings						60,558	3,109	31,60	6,380	2	28,951,729
c	Leasehold improvements						4,618	3,962	3,92	20,399		698,563
d I	Equipment						25,292	2,364	20,02	25,857		5,266,507
е	Other	<u></u> .	<u> </u>				5,372	2,188	4,85	51,461		520,727
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colu	mn (B,), line	10(c).)) .			►			12,034,260
									Sched	ule D (Form 9	990) 2010

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	2.	
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year market value	
(1)Financial derivatives			
(2)Closely-held equity interests Other			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line 1	13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation	
	(2,200.10.00	Cost or end-of-year market value	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III (a) Descrip		(b) Book value	
(a) Descrip	, cron	(b) Book value	•
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	0		
DEFERRED RENT	2,696,606		
INTEREST RATE SWAP	11,225,894		
DEFERRED 457(B)	1,195,784		
INTERCOMPANY ACCOUNTS	2,220,310		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	17,338,594		
, , , , , , , , , , , , , , , , , , , ,	17,000,004		

Pai	It XII Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	131,675,660
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	120,226,261
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	11,449,399
4	Net unrealized gains (losses) on investments	4	6,065,686
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-3,068,177
9	Total adjustments (net) Add lines 4 - 8	9	2,997,509
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	14,446,908
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	oer R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	140,060,805
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 2,695,096		
e	Add lines 2a through 2d	2e	8,760,782
3	Subtract line 2e from line 1	3	131,300,023
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 438,248		
b	Other (Describe in Part XIV) 4b -62,611		
c	Add lines 4a and 4b	4c	375,637
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	131,675,660
Part	XIIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	Return
1	Total expenses and losses per audited financial	1	125,613,897
2	statements	-	
z a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	5,825,884
3	Subtract line 2e from line 1	3	119,788,013
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	<u> </u>	119,700,013
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 438,248		
b	Other (Describe in Part XIV) 4b	1	
c	Add lines 4a and 4b	4c	438,248
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	120,226,261
	t XIV Supplemental Information		

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

Ident if ier	Return Reference	Explanat ion
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 120,784 UNREALIZED LOSS ON INTEREST RATE SWAP (3,188,961) (3,068,177) PART XII, 2D- OTHER REVENUE AMOUNTS ON FS BUT NOT ON RETURN UNREALIZED LOSS ON INTEREST RATE SWAP (3,188,961) REVENUE OF AFFILIATES 14,442,808 INTERCOMPANY REVENUE ELIMINATIONS (8,558,751)
FIN 48 FOOTNOTE	PART XIV, SUPPLEMENTAL INFORMATION, FIN 48 FOOTNOTE	The FASB issued new guidance on accounting for uncertainty in income taxes, which was adopted by the Association during the year ended December 31, 2008 Management evaluated the Association's tax positions and concluded that the Association has taken no uncertain tax positions that require adjustment to the consolidated financial statements to comply with the provisions of this guidance. With few exceptions, the Association is no longer subject to income tax examinations by the U.S. federal, state or local tax authorities for years before 2007.
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. A mounts collected and held by APA on behalf of the divisions. Cash and cash equivalents and investments held on behalf of the divisions totaled \$7,712,158 and \$8,592,290 as of December 31, 2010 and 2009, respectively.

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

DLN: 93493319056521 OMB No 1545-0047

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

Name of the organization						Employer identifi	cation number
AMERICAN PSYCHOLOGICAL	ASSOCIATION INC					53-0205890	
Part I General Inform	nation on Grants	and Assistance					
 Does the organization main the selection criteria used Describe in Part IV the or Part II Grants and Oth 	l to award the grants ganızatıon's procedu	orassistance?	of grant funds in the U	Inited States			✓ Yes ☐
Form 990, Part I'		recipient that received	l more than \$5,000.	Check this box if r		ved more than \$5,0	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ARCHIVES OF THE HISTORY OF AMERICAN PSYCHOLOGYPOLSKY BUILDING LL10A AKRON,OH 443254302	34-6002924	501(C)(3)	60,000				GENERAL SUPPORT
2 Enter total number of sect 3 Enter total number of othe							<u> </u>

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

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) DOCTORAL DISSERTATION RESEARCH SUPPORT	92	27,600		COST	
(2) TRAVEL TO APA CONVENTION	21	26,700		COST	

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

Ident if ier	Return Reference	Explanation
	, ,	Individuals and/or organizations receiving disbursements from the organization in furtherance of its exempt programs are adequately investigated to ensure that they are qualifying recipients. Procedures are followed to confirm that discrimination
FUNDS IN USA		does not factor in assigning grants

DLN: 93493319056521

Employer identification number

OMB No 1545-0047

Compensation Information

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Open to Public Inspection

53-0205890					
rt I Questions Regarding Compensation					
		Yes	Νo		
Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form					
_					
preisonal services (e.g., maid, chauneur, cher)					
If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain					
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			
Indicate which, if any, of the following the organization uses to establish the compensation of the					
During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization	ו				
Receive a severance payment or change-of-control payment from the organization or a related organization?					
Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo		
Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo		
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III					
compensation contingent on the revenues of					
The organization?	5a	Yes			
Any related organization?	5b		Νo		
If "Yes," to line 5a or 5b, describe in Part III					
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					
The organization?	6a		Νo		
Any related organization?	6b		Νo		
If "Yes," to line 6a or 6b, describe in Part III					
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		
Were any amounts reported in Form 990, Part VII, paid or accured 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	Ω		No		
If "Vac" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	F		10		
	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items First-class or charter travel Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Payments for business use of personal residence Pax idemnification and gross-up payments Payments for business use of personal residence Payments for busi	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel First-class or charter travel	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 1 a Complete Part III to provide any relevant information regarding these items First-Class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Payments for business use of personal residence Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain 1b. Yes 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 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply Compensation committee Written employment contract Vompensation committee Vompensation survey or study Vompensation committee Vompensation survey or study Vompensation Vompensation Vompensation committee Vompensation Vompens		

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is 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	f W-2 and/or 1099-MIS	3C compensation	(C) Retirement and		(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) Norman B Anderson PhD	(ı) (ıı)	426,950 0	60,000 0	20,412 0	61,728 0	49,793 0	618,883 0	
(2) Archie L Turner	(ı) (ıı)	309,250 0	0	8,300 0	14,700 0	22,818 0	355,068 0	
(3) Tony F Habash DSC	(ı) (ıı)	248,685 0	0	2,841 0	14,700 0	22,348 0	288,574 0	
(4) Michael Honaker PHD	(ı) (ıı)	291,334 0	29,403 0	2,638 0	20,052	22,828 0	366,255 0	
(5) Katherine C Nordal PHD	(ı) (ıı)	265,512 0	0	3,300 0	14,700 0	9,128 0	292,640 0	
(6) Gwendolyn P Keita PHD	(ı) (ıı)	238,860 0	24,827 0	5,979 0	14,700 0	16,261 0	300,627 0	
(7) Cynthia D Belar PHD	(1) (11)	263,051 0	0	5,182 0	46,468 0	16,221 0	330,922 0	
(8) Rhea K Farberman	(ı) (ıı)	316,948 0	0	6,040 0	46,184 0	34,014 0	403,186 0	65,27
(9) Steven J Breckler PHD	(1) (11)	242,887 0	0	3,321 0	42,018 0	4,314 0	292,540 0	
(10) Nathalie P Gilfoyle JD	(ı) (ıı)	316,078 0	0	5,459 0	72,193 0	16,616 0	410,346 0	
(11) Gary R Vandenbos PHD	(ı) (ıı)	257,862 0	0	5,185 0	19,489 0	22,39 4 0	304,930 0	
(12) Marilyn S Richmond JD	(ı) (ıı)	229,862 0	0	1,980 0	12,918	13,662 0	258,422 0	
(13) Nancy Moore	(ı) (ıı)	222,654 0	0	2,153 0	12,347	21,258 0	258,412 0	
(14) Randy Phelps	(ı) (ıı)	174,223 0	20,418	3,280 0	12,250 0	13,441	223,612 0	
(15) Stephen Behnke JD PHD	(ı) (ıı)	201,620 0	0	3,190 0	12,720 0	13,494 0	231,024 0	
(16) Peter M Gaviorno	(ı) (ıı)	145,355 0	96,382	715 0	9,156 0	22,288	273,896 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

<u> </u>		
Ident if ier	Return Reference	Explanation
COMPENSATION CONTINGENT ON REVENUE	· · · · · · · · · · · · · · · · · · ·	The Association has entered into an agreement with Peter M Gaviorno whereby a commission is paid for incremental gross publication revenue generated above previous year levels. The commission amount is determined by a specific formula
COMPENSATION REPORTED IN PRIOR YEAR	· · · · · · · · · · · · · · · · · · ·	Rhea Farberman elected to exercise her option to liquidate \$65,275 in accrued Executive Supplemental Compensation during 2010 She received the \$65,275 in 2010, however, it was reported as deferred compensation on prior year returns

Schedule J (Form 990) 2010

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	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form			
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
Norman B Anderson PhD	(I) (II)	426,950 0	60,000 0	20,412 0	61,728 0	49,793 0	618,883 0	
Archie L Turner	(I) (II)		0	8,300 0	14,700 0	22,818	355,068 0	
Tony F Habash DSC	(I) (II)		0	2,841	14,700 0	22,348	288,574 0	
Michael Honaker PHD	(I) (II)	I .	29,403	2,638	20,052	22,828	366,255 0	
Katherine C Nordal PHD	(ı) (ıı)		0	3,300	14,700	9,128	292,640	
Gwendolyn P Keita PHD	(ı) (ıı)		24,827 0	5,979 0	14,700 0	16,261 0	300,627 0	
Cynthia D Belar PHD	(I) (II)		0	5,182 0	46,468 0	16,221 0	330,922 0	
Rhea K Farberman	(I) (II)	I .	0	6,040 0	46,184 0	34,014 0	403,186 0	65,275 0
Steven J Breckler PHD	(ı) (ıı)	I .	0	3,321 0	42,018 0	4,314 0	292,540 0	
Nathalie P Gilfoyle JD	(ı) (ıı)		0	5,459 0	72,193 0	16,616 0	410,346 0	
Gary R Vandenbos PHD	(I) (II)		0	5,185 0	19,489 0	22,394 0	304,930 0	
Marilyn S Richmond JD	(I) (II)		0	1,980	12,918 0	13,662	258,422 0	
Nancy Moore	(I) (II)		0	2,153 0	12,347 0	21,258 0	258, 4 12 0	
Randy Phelps	(ı) (ıı)		20,418	3,280 0	12,250 0	13,441	223,612 0	
Stephen Behnke JD PHD	(ı) (ıı)		0	3,190 0	12,720 0	13,494 0	231,024	
Peter M Gaviorno	(ı) (ıı)		96,382 0	715 0	9,156 0	22,288 0	273,896 0	

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.

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

OMB No 1545-0047

DLN: 93493319056521

Open to Public **Inspection**

Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION INC Employer identification number

	RICAN PSYCHOLOGICAL AS	SOCIATION INC								5	3-020	5890			
Pa	rt I Bond Issues (a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue P	rice	(f)	Description	of Purpose	(g) De	feased	Beh	On alf of suer		Pool
										Yes	No	Yes	No	Yes	No
A	DISTRICT OF COLUMBIA	53-6001131	254839e66	03-20-2003	21,100	0,000 L	LOAN	REFINANC	ING		x		x		x
														<u> </u>	
Pa	rt II Proceeds														
ı a	110cccus				T	Α			3		С		T	D	
1	A mount of bonds retired														
2	A mount of bonds legally defe	eased													
3	Total proceeds of issue					21,100	,000								
4	Gross proceeds in reserve fu	ınds					0								
5	Capitalized interest from pro	ceeds					0							,	
6	Proceeds in refunding escrov	W					0								
7	Issuance costs from proceed	ds				422	,000								
8	Credit enhancement from pro	oceeds					0								
9	Working capital expenditures	s from proceeds				506	,629								
10	Capital expenditures from pr	oceeds				20,171	,371								
11	Other spent proceeds														
12	Other unspent proceeds														
13	Year of substantial completion	on			20	03									
					Yes	No	•	Yes	No	Yes		No	Yes	<u>; </u>	No
14	Were the bonds issued as pa	art of a current refund	ling issue?			Х									
15	Were the bonds issued as pa	art of an advance refu	ındıng ıssue?			Х									
16	Has the final allocation of pro	oceeds been made?			Х										
17	Does the organization mainta allocation of proceeds?	aın adequate books a	and records to sup	port the final	х										
Par	t IIII Private Business	Use				'					'				
						<u> </u>			3		C			D	
	M/ bl			I.I.Ch.alt arms 1	Yes	No	•	Yes	No	Yes		No	Yes	<u> </u>	No
1	Was the organization a partn		or a member of an	LLC, which owned	X										

Are there any lease arrangements that may result in private business use of bond-

property financed by tax-exempt bonds?

financed property?

Part III Private Business Use (Continued)

Are there any management or service contracts that may is use? b Are there any research agreements that may result in priv	ate business use of bond-	Yes	No No	Yes	No No	Yes	No	Yes	No No
use?	ate business use of bond-		No	Yes	No	Yes	No	Yes	No
use?	ate business use of bond-	Х							
b Are there any research agreements that may result in priv			,,						
financed property?			X						
c Does the organization routinely engage bond counsel or ot any management or service contracts or research agreement property?		Х							
4 Enter the percentage of financed property used in a private other than a section 501(c)(3) organization or a state or lo	·		0 530 %						
Enter the percentage of financed property used in a private unrelated trade or business activity carried on by your org 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 p post-issuance compliance of its tax-exempt bond liabilitie		Х							

|--|

		Α.		В	3	С		D	
		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?								
	bolla 155 de /		×						
2	Is the bond issue a variable rate issue?	×							
3a	Has the organization or the governmental issuer entered								
	into a hedge with respect to the bond issue?								
			X						
	Name of provider								
ь	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
			X						
	Was a hedge terminated?								
е	was a neage terminated.								
4a	Were gross proceeds invested in a GIC?								
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market					+			
u	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?								
		l v	1	1	1	1	1	1	1

Part V Supplemental Information

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

Ident if ier	Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493319056521

Schedule L

(Form 990 or 990-EZ)

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.

OMB No 1545-0047

2010

Open to Public Inspection

	ne organization SYCHOLOGICAL ASSOCIATION	INC						E	mployer i	dent if ica	tion numb	er
									3-02058			
	xcess Benefit Trai										401	
	omplete if the organizat			res on Fori	m 990, F	'art IV, line 25a o	r ∠ 5 D, C	or Form	990-EZ,	Part V, I		orrected?
1	(a) Name of disq	ualıfıed	person			(b) Desc	ription o	of trans	action		Yes	
											1	1
3 5	.h		L			d l. & . d						
	the amount of tax impos		_		-				_	r '\$		
	the amount of tax, if any									· \$		
					-							
Part II	Loans to and/or I						_	000	- -			
	Complete if the organiz			Treston F	orm 990	, Part IV, line 26,	or Forn	n 990-E	=2, Part V (f)		<u>a</u>	
(-) N	6t	1 , ,	oan to om the	(-)0			(e) 1	[n	Approved		(g)Written agreement?	
(a) Name o	finterested person and purpose		zation?	(c)Orig		(d)Balance due	defau	lt?				
		To	From	┧			Yes	No	Yes	No No	Yes	No
(1) NORMAI	N ANDERSON PHD	10	110111				163	140	163	140	165	140
- MORTGAG			X	3	300,000	215,000		Νο	Yes		Yes	
									_			1
Total					▶ \$	215,000			+			
	Grants or Assistar					•	<u> </u>					
	Complete if the orga						. line 2	7.				
						en interested per						
(a) (Name of interested pers	on				ganization		(c) A n	nount of g	rant or ty	/pe of assi	stance

Part IV Business Transactions Involving Interested Persons.

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

complete if the organization	ii aliswerea Tes Oli	roini 550, raic IV, iii	10 200, 20b, 01 20c.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sha organız reven	ation's
	organization			Yes	No

Part V Supplemental Information

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

Ident if ier	Return Reference	Explanation
LOANS TO AND/OR FROM INTERESTED PERSONS		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 & FMV OF CONSIDERATION CASH 01/01/10 BEGINNING BALANCE 228,250 12/31/10 ENDING BALANCE 215,000

Schedule L (Form 990 or 990-EZ) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493319056521

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION INC **Employer identification number**

53-0205890

ldentifier	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

ldentifier	Return Reference	Explanation
FORM 990 REVIEW PROCESS	FORM 990, PART VI, LINE 11b	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

	turn erence	Explanation
DETERMINING COMPENSATION PART LINES AND 1	VI, 6 15A 15B	APA IS GOVERNED BY A COUNCIL OF REPRESENTATIVES COMPRISED OF 174 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

ldentifier	Return Reference	Explanation
AVAILABILITY OF OTHER DOCUMENTS	FORM 990, PART VI, LINE 19	THE BYLAWS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST AND ON APA'S WEBSITE

ldentifier	Return Reference	Explanation
OTHER PROGRAM SERVICE ACCOMPLISHMENTS	FORM 990, PART III, LINE 4D	The Science Directorate supports the integrity and infrastructure of psychological science and helps prepare tomorrow's behavioral scientists. Its programs include research and travel grants for graduate students (159 grants in 2010), disseminating information about the psychology workforce (more than 25 presentations, reports, and briefs, hundreds of data tables posted), supporting advanced research training for faculty and students (4 training sessions, more than 100 participants attending in 2010), and archiving information important to the discipline (over 1900 new items added, over 700 requests satisfied in 2010). 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 2010 the Directorate managed nearly \$3.2 million in federal and foundation grants addressing violence prevention and child maltreatment, HIV/AIDS research, prevention, and care, public education and training about sexual orientation, postpartum depression, SES-related cancer disparities, and work, stress, and health. Among numerous 2010 APA-funded programs and activities were advocacy related to provisions in the new health reform law and to the repeal of the military's "Don't Ask, Don't Tell" policy, guidelines for evaluating dementia and age-related cognitive decline, refugee families and children in the U.S., public education addressing sexual orientation, development of a recovery oriented curriculum for psychologists, homelessness, prevention of violence and child maltreatment, women's leadership in psychology, and the sexualization of girls. 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

Identifier Return Reference	Explanation
MEMBERS PART VI, LINE 1A, 1B	APA IS GOVERNED BY A COUNCIL OF REPRESENTATIVES COMPRISED OF 174 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 BHMONTHLY 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 BYLAWS 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

ldentifier	Return Reference	Explanation
FAMILY/BUSINESS RELATIONSHIPS	1 '	AS AN ASSOCIATION OF PSYCHOLOGISTS, OUR MEMBERS ROUTINELY DO BUSINESS WITH EACH OTHER, INCLUDING COUNCIL MEMBERS DOING BUSINESS WITH EACH OTHER

ldentifier	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 BY LAWS

ldentifier	Return Reference	Explanation
REPORTABLE COMPENSATION FROM THE ORGANIZATION	FORM 990, PART VII, SECTION A, COLUMN D	Amounts paid to Board members are for honoraria associated with Board roles, editorial fees and other honoraria

ldentifier	Return Reference	Explanation
OTHER CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAIN ON INVESTMENT 6,142,449 UNREALIZED HOLDING LOSSES ON INTEREST RATE SWAPS (3,188,961) REVENUE ON FORM 990 NOT ON FINANCIAL STATEMENTS (2,745,582) CHANGE IN NET ASSETS OF AFFILIATES 2,589,057 2,796,963

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

DLN: 93493319056521

SCHEDULE R (Form 990)

Name of the organization

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.

2010

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2010

Employer identification number

Department of the Treasury Internal Revenue Service

AMERICAN PSYCHOLOGICAL ASSOCIATION INC				53-0205890			
Part I Identification of Disregarded Entities (Com	plete if the organizatio	n 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 control entity	ling	
(1) APA 750 LLC 750 1ST STREET NE WASHINGTON, DC 20002 53-0205890	RE RENTAL	DC	16,706,741	52,772,850	NA		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during		ıf the organızatıon	answered "Yes" or	n Form 990, Part I\	V, line 34 becau	se it had	one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13 controlled organization	
						Yes	No
(1) APA PRACTICE ORGANIZATION							
750 1ST STREET NE WASHINGTON, DC 20002 52-2262136	MEMBERSHIP	DC	501(C)(6)	N.	A		

Cat No 50135Y

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)		(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 Disprop allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana part	ral or	(k) Percentage ownership
							Yes	No		Yes	No	
(1) APA TEN G LLC 750 FIRST STREET NE WASHINGTON, DC20002 52-1890269	RE RENTAL	DC	NA	UNRELATED	2,745,582	45,803,391		No		Yes		100 000 %
Part IV Identif	ication of Relat	ted Or	ganizations Tax	able as a Corpo	ration or Trust	(Complete if the o	organi	zation	answered "Yes"	on Fo	orm 9	90. Part IV.

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			
(1) APA G STREET CORPORATION 750 FIRST STREET NE WASHINGTON, DC20002 47-0909591	HOLDING COMPANY	DE	na	C CORPORATION	27,733	10	100 000 %			
Caladala P (Farm 200) 2010										

r Other transfer of cash or property from other organization(s)

chedule	e R (Form 990) 2010		Pi	age 3
Part \	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
Not	te. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 Durin	g the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Re	eceipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b Gr	ft, grant, or capital contribution to other organization(s)	1b		No
c Gıf	ft, grant, or capital contribution from other organization(s)	1 c		No
d Lo	ans or loan guarantees to or for other organization(s)	1d		No
e Lo	ans or loan guarantees by other organization(s)	1e		No
f Sa	le of assets to other organization(s)	1f		No
g Pu	urchase of assets from other organization(s)	1g		No
h Ex	change of assets	1h		No
i Lea	ase of facilities, equipment, or other assets to other organization(s)	1i		No
j Lea	ase of facilities, equipment, or other assets from other organization(s)	1j	Yes	
k Pe	erformance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	
I Per	rformance of services or membership or fundraising solicitations by other organization(s)	11		No
m Sh	aring of facilities, equipment, mailing lists, or other assets	1m	Yes	
n Sh	naring of paid employees	1n	Yes	
o Re	embursement paid to other organization for expenses	10		No
p Re	embursement paid by other organization for expenses	1р	Yes	
a Ot	ther transfer of cash or property to other organization(s)	10	1	No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including	g covered relationships and transaction thresholds
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(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) APA 750 LLC	J	8,310,331	
(2) APA PRACTICE ORGANIZATION	М	935,674	
(3) APA PRACTICE ORGANIZATION	N	1,589,597	
(4) APA PRACTICE ORGANIZATION	Р	1,589,597	
(5) APA 750 LLC	R	5,926,942	
(6) APA TEN G LLC	R	3,163,438	

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)	501(c)(3) organizations?		partners section 501(c)(3) organizations?		(e) Share of end-of-year assets		rtionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	N			
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Part VII Supplemental Information

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

Identifier I Return Reference I	er Return Reference Explanation
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Schedule R (Form 990) 2010

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) A mount Involved (\$)	(d) Method of determining amount involved
(1)	APA 750 LLC	J	8,310,331	
(2)	APA PRACTICE ORGANIZATION	М	935,674	
(3)	APA PRACTICE ORGANIZATION	N	1,589,597	
(4)	APA PRACTICE ORGANIZATION	Р	1,589,597	
(5)	APA 750 LLC	R	5,926,942	
(6)	APA TEN G LLC	R	3,163,438	