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

OMB No 1545-0047

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
750 FIRST STREET NE
Suite

City or town, state or country, and ZIP + 4
WASHINGTON, DC 20002

D Employer identification number
53-0205890

E Telephone number
(202) 336-5500

G Gross receipts $ 160,200,962

F Name and address of principal officer
NORMAN ANDERSON
750 FIRST STREET NE
WASHINGTON, DC 20002

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ WWW APA ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | L Year of formation 1925 | M State of legal domicile DC

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
THE AMERICAN PSYCHOLOGICAL ASSOCIATION IS A NATIONAL MEMBERSHIP ORGANIZATION CREATED TO ADVANCE PSYCHOLOGY AS A MEANS OF PROMOTING HEALTH, EDUCATION AND HUMAN WELFARE

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	173
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	173
5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	714
6	Total number of volunteers (estimate if necessary)	6	161
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	8,382,166
b	Net unrelated business taxable income from Form 990-T, line 34	7b	2,663,199

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	3,262,611	2,785,859
	9	Program service revenue (Part VIII, line 2g)	99,052,430	102,301,209
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,440,529	4,672,970
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	22,917,845	9,049,659
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	130,673,415	118,809,697
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	275,319	2,072,920
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	53,561,356	57,723,885
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	67,524,837	59,830,086
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	121,361,512	119,626,891
	19	Revenue less expenses Subtract line 18 from line 12	9,311,903	-817,194
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	193,166,631	236,941,077
	21	Total liabilities (Part X, line 26)	162,685,847	200,894,310
	22	Net assets or fund balances Subtract line 21 from line 20	30,480,784	36,046,767

Part II Signature Block

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

Sign Here

****** | 2013-11-14
Signature of officer | Date

ARCHIE L TURNER CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Jeffrey J Schragg		2013-11-14		

Firm's name ▶ BDO USA LLP | Firm's EIN ▶

Firm's address ▶ 8405 GREENSBORO DRIVE 7TH FLOOR MCLEAN, VA 22102 | Phone no (703) 893-0600

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . ☑

1 Briefly describe the organization's mission

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

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 39,538,691 including grants of $) (Revenue $ 81,601,701)

The APA Publications and Databases Office is responsible for the dissemination of psychological information worldwide Information dissemination projects include 65 scholarly journals, a book and video publishing program, and seven electronic database products In 2012 the APA journals program published more than 3,600 articles in 302 issues PsycARTICLES, the electronic database product containing full-text journal content, released 344 issues with 4,038 articles of journal content published in 2012, and 358 issues with 3,136 articles of older journal content APA published 42 books and 10 videos in 2012 The PsycBOOKS database was increased by 478 books in 2012, these included 39 books published by APA and 439 older books published by others PsycINFO, the bibliographic database, was increased by 191,708 records PsycTESTS, the research database on psychological tests, measures, scales, surveys and other assessments, grew in 2012 by 7,498 test profiles, 73% of which included full tests or test items The test record count was increased by 8,275 in 2012 PsycEXTRA, the gray literature database that includes both bibliographic records and full text content, increased by 52,506 records In 2012, 513 new reviews were added to PsycCRITIQUES, the database of book and film reviews

4b (Code) (Expenses $ 12,450,756 including grants of $) (Revenue $ 14,965,493)

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

4c (Code) (Expenses $ 10,429,337 including grants of $ 635,043) (Revenue $ 2,844,872)

THE APA EDUCATION DIRECTORATE PLAYS A STRONG ROLE IN THE AREA OF QUALITY ASSURANCE FOR 946 ACCREDITED PROGRAMS IN PROFESSIONAL PSYCHOLOGY THE CONTINUING EDUCATION COMMITTEE APPROVED 776 ORGANIZATIONS AS SPONSORS OF CONTINUING EDUCATION THE DIRECTORATE ALSO PLAYS AN IMPORTANT ROLE IN SHAPING THE EDUCATIONAL EXPERIENCE OF TOMORROW'S PSYCHOLOGISTS AND IN PROVIDING CONTINUING PROFESSIONAL EDUCATION FOR TODAY'S PRACTITIONER CONTINUING EDUCATION IS OFFERED THROUGH 66 WEB DELIVERED PROGRAMS, AND 127 BOOK-BASED AND JOURNAL ARTICLE-BASED PROGRAMS 332 CONTINUING EDUCATION OPPORTUNITIES WERE OFFERED BEFORE AND DURING THE 2012 APA CONVENTION IN WASHINGTON, DC

4d Other program services (Describe in Schedule O)

(Expenses $ 23,908,462 including grants of $ 1,437,877) (Revenue $ 2,889,143)

4e **Total program service expenses ▶** 86,327,246

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, 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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*	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	Yes	
e	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 and XII*	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 and XII 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
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		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 United States? *If "Yes," 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 United States? *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? *If "Yes," complete Schedule G, Part I (see instructions)*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	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, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	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 through 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, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *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
c	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? *If "Yes," complete Schedule M*	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, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		No
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 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	1,511			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	714			
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	
3a	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	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
b	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					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 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		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	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	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

Check if Schedule O contains a response to any question in this Part VI . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	**1a** 173			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	**1b** 173			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		**5**		No
6	Did the organization have members or stockholders?		**6**	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		**7a**	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		**7b**	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		**9**		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**	Yes	
11a	Has the organization provided a complete 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	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did the organization have a written document retention and destruction policy?	**14**	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
▶NANCY PINA 750 FIRST STREET NE WASHINGTON, DC (202) 336-5827

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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 organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
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 per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

		(D)	(E)	(F)
1b	**Sub-Total** . . . . ▶			
c	**Total from continuation sheets to Part VII, Section A** . . . . ▶			
d	**Total (add lines 1b and 1c)** . . . . ▶	5,508,439	0	540,537

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶92

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
CADMUS PSG , PO BOX 822934 PHILADELPHIA PA 19182	PRINTING SERVICES	4,498,828
AUTOMATED GRAPHIC SYSTEMS , 4590 GRAPHICS DRIVE WHITE PLAINS MD 20695	MAIL & POSTAGE SVC	1,381,616
SPHERION CORPORATION , 15552 COLLECTION CENTER DR CHICAGO IL 60693	STAFFING	1,065,286
Innodata Isogen Inc , 3 University Plaza HACKENSACK NJ 07601	TECHNOLOGY SERVICES	1,102,641
CANVEO PUBLISHER SERVICES , PO BOX 822934 PHILADELPHIA PA 19182	PUBLISHING	833,476

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶90

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII . . . . ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations . . .	1d				
	e	Government grants (contributions)	1e 2,785,859				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f $					
	h	**Total.** Add lines 1a-1f . . . . ▶		2,785,859			
Program Service Revenue			Business Code				
	2a	LICENSING, ROYALTIES AND RIGHTS	541900	56,447,097	56,447,097		
	b	JOURNAL SUBSCRIPTIONS	111000	15,239,276	12,350,133	2,889,143	
	c	MEMBERSHIP DUES	900099	11,210,305	11,210,305		
	d	PUBLICATION SALES	511120	13,672,356	13,672,356		
	e	CONVENTION AND CONFERENCE FEES	611600	2,373,895	2,373,895		
	f	All other program service revenue		3,358,280	3,358,280		
	g	**Total.** Add lines 2a–2f . . . . ▶		102,301,209			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		1,556,275			1,556,275
	4	Income from investment of tax-exempt bond proceeds . . ▶		0			
	5	Royalties . . . . ▶		0			
			(i) Real / (ii) Personal				
	6a	Gross rents	(i) 19,326,515 / (ii)				
	b	Less rental expenses	(i) 11,652,132 / (ii)				
	c	Rental income or (loss)	(i) 7,674,383 / (ii) 0				
	d	Net rental income or (loss) . . . . ▶		7,674,383		5,386,102	2,288,281
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	(i) 29,256,424 / (ii) 3,559,404				
	b	Less cost or other basis and sales expenses	(i) 25,962,983 / (ii) 3,776,150				
	c	Gain or (loss)	(i) 3,293,441 / (ii) -216,746				
	d	Net gain or (loss) . . . . ▶		3,116,695			3,116,695
	8a	Gross income from fundraising events (not including $ ____________ of contributions reported on line 1c) See Part IV, line 18 . .	a				
	b	Less direct expenses . . .	b				
	c	Net income or (loss) from fundraising events . . ▶		0			
	9a	Gross income from gaming activities See Part IV, line 19 . . .	a				
	b	Less direct expenses . . .	b				
	c	Net income or (loss) from gaming activities . . . ▶		0			
	10a	Gross sales of inventory, less returns and allowances .	a				
	b	Less cost of goods sold . .	b				
	c	Net income or (loss) from sales of inventory . . ▶		0			
		Miscellaneous Revenue	Business Code				
	11a	APA OTHER REVENUE	900099	1,268,355			1,268,355
	b	MAILING LIST RENTAL	533110	106,921		106,921	
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . ▶		1,375,276			
	12	**Total revenue.** See Instructions . . . . . ▶		118,809,697	99,412,066	8,382,166	8,229,606

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response to any question in this Part IX . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	**(A)** Total expenses	**(B)** Program service expenses	**(C)** Management and general expenses	**(D)** Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,937,322	1,937,322		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	135,598	135,598		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0	0		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors, trustees, and key employees	4,815,044	3,078,221	1,736,823	0
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 Other salaries and wages	41,880,559	26,773,923	15,106,636	0
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,218,324	0	2,218,324	0
9 Other employee benefits	5,624,254	32,885	5,591,369	0
10 Payroll taxes	3,185,704	0	3,185,704	0
11 Fees for services (non-employees)				
a Management	0	0	0	0
b Legal	834,977	52,307	782,670	0
c Accounting	161,684	0	161,684	0
d Lobbying	285,150	285,150	0	0
e Professional fundraising services See Part IV, line 17	0			0
f Investment management fees	463,446	0	463,446	0
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	13,448,715	9,069,255	4,379,460	0
12 Advertising and promotion	1,637,162	1,254,353	382,809	0
13 Office expenses	17,533,020	13,801,918	3,731,102	0
14 Information technology	0	0	0	0
15 Royalties . .	2,841,346	2,849,262	-7,916	0
16 Occupancy	8,966,005	1,117,735	7,848,270	0
17 Travel	907,826	693,773	214,053	0
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19 Conferences, conventions, and meetings	7,487,396	3,834,505	3,652,891	0
20 Interest	1,247,956	0	1,247,956	0
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	2,900,158	632,414	2,267,744	0
23 Insurance	549,544	0	549,544	0
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a HONORARIA AND STIPENDS	2,172,509	1,961,759	210,750	0
b INCOME TAX EXPENSES	781,329	0	781,329	0
c OVERHEAD RECOVERY	-4,419,537	29,993	-4,449,530	0
d CORPORATE MEMBERSHIP	672,639	498,164	174,475	0
e All other expenses	1,358,761	18,288,709	-16,929,948	
25 **Total functional expenses.** Add lines 1 through 24e	119,626,891	86,327,246	33,299,645	0
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		500	1	500
	2	Savings and temporary cash investments		44,913,954	2	52,803,734
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		19,228,500	4	17,322,198
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		208,500	5	202,000
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		5,600,000	8	4,810,000
	9	Prepaid expenses and deferred charges		2,549,929	9	1,754,606
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 150,850,978			
	b	Less accumulated depreciation	10b 81,680,262	40,928,622	10c	69,170,716
	11	Investments—publicly traded securities		63,957,917	11	73,379,863
	12	Investments—other securities See Part IV, line 11		9,593,799	12	4,088,697
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		6,184,910	15	13,408,763
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		193,166,631	16	236,941,077
Liabilities	17	Accounts payable and accrued expenses		13,383,572	17	15,875,264
	18	Grants payable		0	18	0
	19	Deferred revenue		48,285,928	19	50,158,708
	20	Tax-exempt bond liabilities		15,990,000	20	15,265,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D		8,360,994	21	9,034,896
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		52,945,699	23	87,087,636
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		23,719,654	25	23,472,806
	26	**Total liabilities.** Add lines 17 through 25		162,685,847	26	200,894,310
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ☐ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets			27	
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ☑ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		0	30	0
	31	Paid-in or capital surplus, or land, building or equipment fund		0	31	0
	32	Retained earnings, endowment, accumulated income, or other funds		30,480,784	32	36,046,767
	33	Total net assets or fund balances		30,480,784	33	36,046,767
	34	Total liabilities and net assets/fund balances		193,166,631	34	236,941,077

Part XI Reconcilliation 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	118,809,697
2	Total expenses (must equal Part IX, column (A), line 25)	2	119,626,891
3	Revenue less expenses Subtract line 2 from line 1	3	-817,194
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	30,480,784
5	Net unrealized gains (losses) on investments	5	5,470,108
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	913,069
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	36,046,767

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . ☐

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

Additional Data

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BARRY S ANTON PHD ABPP RECORDING SECRETARY	11 0 1 0	X		X				36,152	0	0
NADINE J KASLOW PHD BOD MEMBER-AT-LARGE	9 0 1 0	X						38,799	0	0
MELBA J T VASQUEZ PHD PAST PRESIDENT	11 0 1 0	X						38,190	0	0
JENNIFER F KELLY PHD BOD MEMBER-AT-LARGE	9 0 1 0	X						22,691	0	0
ELENA J EISMAN EDD BOD MEMBER-AT-LARGE	9 0 1 0	X						21,732	0	0
SUSAN H MCDANIEL PHD BOD MEMBER-AT-LARGE	9 0 1 0	X						19,369	0	0
KURT F GEISINGER PHD BOD MEMBER-AT-LARGE	9 0 1 0	X						17,766	0	0
BONNIE MARKHAM PHD PSYD TREASURER	16 0 1 0	X		X				32,568	0	0
SUZANNE B JOHNSON PHD PRESIDENT	18 0 1 0	X		X				37,349	0	0
JOSEPHINE D JOHNSON PHD BOD MEMBER-AT-LARGE	9 0 1 0	X						13,300	0	0
ALI M MATTU PHD BOD MEMBER-AT-LARGE	9 0 1 0	X						19,419	0	0
DONALD N BERSOFF PHD PRESIDENT-ELECT	11 0 1 0	X		X				20,904	0	0
John C Norcross PhD COR MEMBER	1 0	X						6,782	0	0
Carol A Falender PhD COR MEMBER	1 0	X						6,375	0	0
Robert E McGrath PhD COR MEMBER	1 0	X						3,794	0	0
Kim E Dixon PhD COR MEMBER	1 0	X						3,791	0	0
Rosie Phillips Bingham PhD COR MEMBER	1 0	X						3,279	0	0
Frank C Worrell PhD COR MEMBER	1 0	X						2,922	0	0
W Bruce Walsh PhD COR MEMBER	1 0	X						2,621	0	0
Abigail T Panter PhD COR MEMBER	1 0	X						2,438	0	0
Norman Abeles PhD COR MEMBER	1 0	X						2,081	0	0
Richard M Suinn PhD COR MEMBER	1 0	X						2,037	0	0
Irma Serrano-Garcia PhD COR MEMBER	1 0	X						1,980	0	0
David B Peterson PhD COR MEMBER	1 0	X						1,967	0	0
Stewart E Cooper PhD COR MEMBER	1 0	X						1,511	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Michael R Rodriguez PhD COR MEMBER	1 0	X						1,500	0	0
Grady Dale EdD COR MEMBER	1 0	X						1,490	0	0
Helen L Coons PhD COR MEMBER	1 0	X						1,111	0	0
Beverly Greene PhD COR MEMBER	1 0	X						1,102	0	0
Joan C Chrisler PhD COR MEMBER	1 0	X						1,000	0	0
Randy K Otto PhD COR MEMBER	1 0	X						949	0	0
Jalie A Tucker PhD COR MEMBER	1 0	X						949	0	0
Paula Ray Pietromonaco PhD COR MEMBER	1 0	X						906	0	0
Douglas C Haldeman PhD COR MEMBER	1 0	X						860	0	0
William B Gunn PhD COR MEMBER	1 0	X						847	0	0
Curtis P Haugtvedt PhD COR MEMBER	1 0	X						839	0	0
Gerald P Koocher PhD COR MEMBER	1 0	X						759	0	0
Thomas John Vaughn PhD COR MEMBER	1 0	X						703	0	0
Helen A Neville PhD COR MEMBER	1 0	X						601	0	0
Deborah Ann Loftis PhD COR MEMBER	1 0	X						593	0	0
William L Hathaway PhD COR MEMBER	1 0	X						575	0	0
Irving B Weiner PhD COR MEMBER	1 0	X						575	0	0
Annette M La Greca PhD COR MEMBER	1 0	X						475	0	0
Larry E Beutler PhD COR MEMBER	1 0	X						460	0	0
Randall W Engle PhD COR MEMBER	1 0	X						167	0	0
Kristi Van Sickle PsyD COR MEMBER	1 0	X						149	0	0
Terry S Gock PhD COR MEMBER	1 0	X						100	0	0
Chris K Wehl PhD COR MEMBER	1 0	X						44	0	0
Sare J Akdag PhD COR MEMBER	1 0	X						0	0	0
Larry Alferink PhD COR MEMBER	1 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Linda G Alverson-Eiland PhD COR MEMBER	1 0	X						0	0	0
Deborah L Bandalos PhD COR MEMBER	1 0	X						0	0	0
Laura H Barbanel EdD COR MEMBER	1 0	X						0	0	0
Thomas J Barbera PhD COR MEMBER	1 0	X						0	0	0
Bernard C Beins PhD COR MEMBER	1 0	X						0	0	0
Robert M Bilder PhD COR MEMBER	1 0	X						0	0	0
William P Bloom PhD COR MEMBER	1 0	X						0	0	0
Corwin Boake PhD COR MEMBER	1 0	X						0	0	0
Frances E Boulon-Diaz PhD COR MEMBER	1 0	X						0	0	0
Kathleen S Brown PhD COR MEMBER	1 0	X						0	0	0
Charles K Burnett PhD COR MEMBER	1 0	X						0	0	0
Linda F Campbell PhD COR MEMBER	1 0	X						0	0	0
Elizabeth K Carll PhD COR MEMBER	1 0	X						0	0	0
Armand R Cerbone PhD COR MEMBER	1 0	X						0	0	0
Margaret C Charmoli PhD COR MEMBER	1 0	X						0	0	0
Jean Lau Chin EdD COR MEMBER	1 0	X						0	0	0
Scott D Churchill PhD COR MEMBER	1 0	X						0	0	0
Susan D Clayton PhD COR MEMBER	1 0	X						0	0	0
Karen D Cogan PhD COR MEMBER	1 0	X						0	0	0
Annabel J Cohen PhD COR MEMBER	1 0	X						0	0	0
Regina C Colonia-Willner PhD COR MEMBER	1 0	X						0	0	0
Joan M Cook PhD COR MEMBER	1 0	X						0	0	0
Chester D Copemann PhD COR MEMBER	1 0	X						0	0	0
William L Cunningham PhD COR MEMBER	1 0	X						0	0	0
Jessica Henderson Daniel PhD COR MEMBER	1 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Andrea M Dellıgattı PhD COR MEMBER	1 0	X						0	0	0
Davıd S DeMatteo PhD COR MEMBER	1 0	X						0	0	0
Eduardo I Dıaz PhD COR MEMBER	1 0	X						0	0	0
Kathleen H Dockett EdD COR MEMBER	1 0	X						0	0	0
Beth Doll PhD COR MEMBER	1 0	X						0	0	0
Mıchael Domjan PhD COR MEMBER	1 0	X						0	0	0
Davıd L Downıng PsyD COR MEMBER	1 0	X						0	0	0
Martın Drapeau PhD COR MEMBER	1 0	X						0	0	0
Carol R Drummond PhD COR MEMBER	1 0	X						0	0	0
Tımothy R Ellıott PhD COR MEMBER	1 0	X						0	0	0
Frank Farley PhD COR MEMBER	1 0	X						0	0	0
I Bruce Frumkın PhD COR MEMBER	1 0	X						0	0	0
Randy J Georgemıller PhD COR MEMBER	1 0	X						0	0	0
Glorıa Behar Gottsegen PhD COR MEMBER	1 0	X						0	0	0
John Grabowskı PhD COR MEMBER	1 0	X						0	0	0
Stanley R Graham PhD COR MEMBER	1 0	X						0	0	0
Tamara M Greenberg PsyD COR MEMBER	1 0	X						0	0	0
Lorraıne Wıllıams Greene PhD COR MEMBER	1 0	X						0	0	0
Barney Greenspan PhD COR MEMBER	1 0	X						0	0	0
Lısa R Grossman PhD COR MEMBER	1 0	X						0	0	0
Luıs F Guevara PsyD COR MEMBER	1 0	X						0	0	0
John W Hagen PhD COR MEMBER	1 0	X						0	0	0
M Elızabeth Lewıs Hall PhD COR MEMBER	1 0	X						0	0	0
Krıstın A Hancock PhD COR MEMBER	1 0	X						0	0	0
Mıchele Harway PhD COR MEMBER	1 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Charles J A Hayes PhD COR MEMBER	1 0	X						0	0	0
Gordon I Herz PhD COR MEMBER	1 0	X						0	0	0
Angela O Herzog PhD COR MEMBER	1 0	X						0	0	0
Walter J Hillabrant PhD COR MEMBER	1 0	X						0	0	0
Valerie Holms PhD COR MEMBER	1 0	X						0	0	0
Sally S Horwatt PhD COR MEMBER	1 0	X						0	0	0
Deborah F Johnson PhD COR MEMBER	1 0	X						0	0	0
Brick Johnstone PhD COR MEMBER	1 0	X						0	0	0
Deborah A King PhD COR MEMBER	1 0	X						0	0	0
Mary E Kite PhD COR MEMBER	1 0	X						0	0	0
Paul D Kolstoe PhD COR MEMBER	1 0	X						0	0	0
David M Lechuga PhD COR MEMBER	1 0	X						0	0	0
James W Lichtenberg PhD COR MEMBER	1 0	X						0	0	0
John C Linton PhD COR MEMBER	1 0	X						0	0	0
James Raymond Long PhD COR MEMBER	1 0	X						0	0	0
Elizabeth Lonning PsyD COR MEMBER	1 0	X						0	0	0
Carol R Lowery PhD COR MEMBER	1 0	X						0	0	0
Debra A Major PhD COR MEMBER	1 0	X						0	0	0
Jennifer J Manly PhD COR MEMBER	1 0	X						0	0	0
Neil A Massoth PhD COR MEMBER	1 0	X						0	0	0
Sandra Mattar PsyD COR MEMBER	1 0	X						0	0	0
Donald McAleer PsyD COR MEMBER	1 0	X						0	0	0
Cathy McDaniels Wilson PhD COR MEMBER	1 0	X						0	0	0
Richard M McGraw PhD COR MEMBER	1 0	X						0	0	0
William John Meegan PhD COR MEMBER	1 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Marilyn N Metzl PhD COR MEMBER	1 0	X						0	0	0
Rodney Keith Miller PhD COR MEMBER	1 0	X						0	0	0
Joel E Morgan PhD COR MEMBER	1 0	X						0	0	0
John N Moritsugu PhD COR MEMBER	1 0	X						0	0	0
Chad D Morris PhD COR MEMBER	1 0	X						0	0	0
Mandell J Much PhD COR MEMBER	1 0	X						0	0	0
James Anton Mulick PhD COR MEMBER	1 0	X						0	0	0
Darlyne G Nemeth PhD COR MEMBER	1 0	X						0	0	0
Gilbert H Newman PhD COR MEMBER	1 0	X						0	0	0
George H Northrup PhD COR MEMBER	1 0	X						0	0	0
Bruce D Nystrom PhD COR MEMBER	1 0	X						0	0	0
Judith K Olson PhD COR MEMBER	1 0	X						0	0	0
Peter M Oppenheimer PhD COR MEMBER	1 0	X						0	0	0
Lisa M Osbeck PhD COR MEMBER	1 0	X						0	0	0
Jodi Rae Owen PsyD COR MEMBER	1 0	X						0	0	0
William D Parham PhD COR MEMBER	1 0	X						0	0	0
William D Patenaude PhD COR MEMBER	1 0	X						0	0	0
Judith E Patterson PhD COR MEMBER	1 0	X						0	0	0
Dianne M Polowczyk PhD COR MEMBER	1 0	X						0	0	0
Diana Lee Prescott PhD COR MEMBER	1 0	X						0	0	0
Beth N Rom-Rymer PhD COR MEMBER	1 0	X						0	0	0
Richard I Ruth PhD COR MEMBER	1 0	X						0	0	0
Dolly C Sadow PhD COR MEMBER	1 0	X						0	0	0
Francisco Javier Sanchez PhD COR MEMBER	1 0	X						0	0	0
David D Sandberg PhD COR MEMBER	1 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Douglas S Saunders PhD COR MEMBER	1 0	X						0	0	0
K Warner Schaie PhD COR MEMBER	1 0	X						0	0	0
John C Scott PhD COR MEMBER	1 0	X						0	0	0
Nancy M Sidun PsyD COR MEMBER	1 0	X						0	0	0
Norman L Stephenson PhD COR MEMBER	1 0	X						0	0	0
William J Strickland PhD COR MEMBER	1 0	X						0	0	0
Teri L Strong PhD COR MEMBER	1 0	X						0	0	0
Patricia L G Taimanglo PhD COR MEMBER	1 0	X						0	0	0
Harold Takooshian PhD COR MEMBER	1 0	X						0	0	0
Paul W Thayer PhD COR MEMBER	1 0	X						0	0	0
W Douglas Tynan PhD COR MEMBER	1 0	X						0	0	0
Daniel L Ullman PhD COR MEMBER	1 0	X						0	0	0
Timothy C Urdan PhD COR MEMBER	1 0	X						0	0	0
Theresa Katherine Vescio PhD COR MEMBER	1 0	X						0	0	0
Shirley A Vickery PhD COR MEMBER	1 0	X						0	0	0
Martha E Wadsworth PhD COR MEMBER	1 0	X						0	0	0
Susan K Whitbourne PhD COR MEMBER	1 0	X						0	0	0
Randall Phillip White PhD COR MEMBER	1 0	X						0	0	0
Ellen W Williams PhD COR MEMBER	1 0	X						0	0	0
Wendy Rose Williams PhD COR MEMBER	1 0	X						0	0	0
Eric K Willmarth PhD COR MEMBER	1 0	X						0	0	0
Robert H Woody PhD COR MEMBER	1 0	X						0	0	0
Thomas Zentall PhD COR MEMBER	1 0	X						0	0	0
NORMAN B ANDERSON PHD EVP/CEO	37 0 1 0			X				790,281	0	94,683
ARCHIE L TURNER CFO	38 0 0 0			X				348,865	0	40,482

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
TONY F HABASH DSC CHIEF INFORMATION OFFICER	38 0 0 0				X			369,640	0	40,385
MICHAEL HONAKER PHD DEPUTY CEO	38 0 0 0				X			322,405	0	33,919
KATHERINE C NORDAL PHD ED PROFESSIONAL PRACTICE	20 0 18 0				X			289,564	0	25,080
GWENDOLYN P KEITA PHD ED PUBLICA INTEREST DIRECTORAT	38 0 0 0				X			261,573	0	33,509
CYNTHIA D BELAR PHD ED, EDUCATION DIRECTORATE	38 0 0 0				X			292,830	0	33,642
RHEA K FARBERMAN ED, PUBLIC & MEMBER COMMUNIC	38 0 0 0				X			333,761	0	40,393
STEVEN J BRECKLER PHD ED, SCIENCE DIRECTORATE	38 0 0 0				X			260,387	0	20,590
NATHALIE P GILFOYLE JD GENERAL COUNSEL	38 0 0 0				X			388,157	0	25,557
GARY R VANDENBOS PHD ED, PUBS & COMM PUBLISHER	38 0 0 0				X			352,311	0	40,462
NANCY MOORE ED, GOVERNANCE AFFAIRS	38 0 0 0					X		249,747	0	24,767
MARILYN S RICHMOND JD ASSOCIATE ED, GOVT RELATIONS	38 0 0 0					X		226,028	0	23,372
STEPHEN BEHNKE JD PHD DIRECTOR ETHICS OFFICE	38 0 0 0					X		219,396	0	23,138
ELISABETH R STRAUS EXEC VP/EXEC DIR, APF	0 0 38 0					X		216,330	0	23,970
ELLEN GARRISON SENIOR POLICY ADVISOR	38 0 0 0					X		210,593	0	16,588

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

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

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

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

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

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

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

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

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

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

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

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Non-functionally integrated

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

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

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

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the 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)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income 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, etc (see instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) **14**

15 Public support percentage for 2011 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2012.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2011.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶☐

Part 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	3,760,072	3,869,140	3,376,169	3,262,611	2,785,859	17,053,851
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	96,050,799	102,030,463	103,870,257	99,052,430	99,412,066	500,416,015
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 **Total.** Add lines 1 through 5	99,810,871	105,899,603	107,246,426	102,315,041	102,197,925	517,469,866
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0		0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year	0	0	0	0		0
c Add lines 7a and 7b	0	0	0	0		0
8 **Public support** (Subtract line 7c from line 6)						517,469,866

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6	99,810,871	105,899,603	107,246,426	102,315,041	102,197,925	517,469,866
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	10,328,214	10,292,416	11,706,942	15,306,622	5,112,911	52,747,105
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	9,025,010	9,073,408	9,216,480	9,320,082	8,382,166	45,017,146
c Add lines 10a and 10b	19,353,224	19,365,824	20,923,422	24,626,704	13,495,077	97,764,251
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	423,440	0	0	0	0	423,440
13 **Total support.** (Add lines 9, 10c, 11, and 12)	119,587,535	125,265,427	128,169,848	126,941,745	115,693,002	615,657,557

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	84 052 %
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	82 481 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	15 880 %
18 Investment income percentage from **2011** Schedule A, Part III, line 17	18	17 383 %

19a **33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support tests—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

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

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.**

OMB No 1545-0047

2012

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), then

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

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

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

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

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

2 Political expenditures ▶ $

3 Volunteer hours

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

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

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

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

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

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

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

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

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

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

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	7,192	
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	515,176	
c	Total lobbying expenditures (add lines 1a and 1b)	522,368	
d	Other exempt purpose expenditures	85,804,878	
e	Total exempt purpose expenditures (add lines 1c and 1d)	86,327,246	
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000	

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

		(a)	(b)
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, enter -0-		
i	Subtract line 1f from line 1c If zero or less, enter -0-		
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	☐ **Yes**	☐ **No**

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

Lobbying Expenditures During 4-Year Averaging Period

	Calendar year (or fiscal year beginning in)	**(a)** 2009	**(b)** 2010	**(c)** 2011	**(d)** 2012	**(e)** Total
2a	Lobbying nontaxable 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	775,699	652,497	613,898	522,368	2,564,462
d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures	7,835	4,503	3,929	7,192	23,459

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

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

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

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

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

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier	Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493319011563

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047
2012
Open to Public Inspection

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
- ☐ Preservation of land for public use (e g , recreation or education)
- ☐ Preservation of an historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶______

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

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

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

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

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

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

(ii) Assets included in Form 990, Part X ▶ $ ______

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

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

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

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

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

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

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

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

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

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

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

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☑

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

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

The percentages in lines 2a, 2b, and 2c should equal 100%

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

			Yes	No
	(i) unrelated organizations	3a(i)		
	(ii) related organizations	3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		6,596,734		6,596,734
b Buildings		61,486,215	34,955,331	26,530,884
c Leasehold improvements		4,881,030	4,379,477	501,553
d Equipment		22,675,092	17,331,879	5,343,213
e Other		5,176,519	4,803,771	372,748
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				39,345,132

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

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

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

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

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

(a) Description	(b) Book value
(1) DEPOSITS AND ADVANCES	77,000
(2) OTHER ASSETS	297,598
(3) RENT ABATEMENTS	4,240,298
(4) DEFERRED LEASING	4,708,556
(5) OTHER INTANGIBLE ASSETS	4,085,311
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	13,408,763

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

1 (a) Description of liability	(b) Book value
Federal income taxes	0
DEFERRED RENT	2,330,732
INTEREST RATE SWAP	18,209,013
DEFERRED COMPENSATION	2,705,128
INTERCOMPANY ACCOUNTS	227,933
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	23,472,806

2. Fin 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	140,567,972
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	5,470,108		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	6,644,823		
e	Add lines **2a** through **2d**			2e	12,114,931
3	Subtract line **2e** from line **1**			3	128,453,041
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	463,446		
b	Other (Describe in Part XIII)	4b	-10,106,790		
c	Add lines **4a** and **4b**			4c	-9,643,344
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	118,809,697

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	135,228,965
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	4,413,388		
e	Add lines **2a** through **2d**			2e	4,413,388
3	Subtract line **2e** from line **1**			3	130,815,577
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	463,446		
b	Other (Describe in Part XIII)	4b	-11,652,132		
c	Add lines **4a** and **4b**			4c	-11,188,686
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	119,626,891

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
FIN 48 FOOTNOTE	FORM 990, SCHEDULE D, PART X, LINE 2	In accordance with authoritative guidance issued by the FASB, APA recognizes tax liabilities when, despite the management's belief that tax return positions are supportable, APA believes that certain positions may not be fully sustained upon review by tax authorities Benefits from tax positions are measured at the largest amount of benefit that is greater than 50% likely of being realized upon settlement To the extent that the final tax outcome of these matters is different than the amounts recorded, such differences impact income tax expense in the period in which such determination is made Interest and penalties, if any, related to accrued liabilities for potential tax assessments are included in income tax expense APA is generally no longer subject to income tax examinations by the U S federal, state or local tax authorities for years ended December 31, 2008 and prior Management has evaluated APA's tax positions and has concluded that APA has taken no material uncertain tax positions that require adjustment to the consolidated financial statements to comply with the provisions of this guidance
ESCROW AND CUSTODIAL ARRANGEMENT EXPLANATION	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 AMOUNTS COLLECTED AND HELD BY APA ON BEHALF OF THE DIVISIONS ARE INCLUDED IN CURRENT ASSETS AND CURRENT LIABILITIES IN THE ACCOMPANYING CONSOLIDATED STATEMENTS OF FINANCIAL POSITION CASH AND CASH EQUIVALENTS AND INVESTMENTS HELD ON BEHALF OF THE DIVISIONS TOTALED $8,856,199 AND $8,199,750 AS OF DECEMBER 31, 2012 AND 2011, RESPECTIVELY
RECONCILIATION OF REVENUE	FORM 990, SCHEDULE D, PART XI, LINE 2D	UNREALIZED GAIN ON INTEREST RATE SWAPS 442,068 REVENUE OF AFFILIATES 13,785,148 INTERCOMPANY ELIMINATIONS (17,070,249) INTEREST IN LLC ADJUSTMENT 9,487,856 ------------- TOTAL 6,644,823
RECONCILIATION OF REVENUE	FORM 990, SCHEDULE D, PART XI, LINE 4B	REVENUE ON FORM 990 NOT ON FINANCIAL STATEMENTS 1,712,618 Loss on disposition of assets (APA) (167,276) RENTAL EXPENSES (11,652,132) ---------------- Total (10,106,790)
OTHER EXPENSES ON BOOKS BUT NOT ON RETURN	FORM 990, SCHEDULE D, PART XII, LINE 2D	EXPENSES OF AFFILIATES 11,828,505 INTERCOMPANY ELIMINATIONS (7,582,393) Loss on disposition of assets (APA) 167,276 ------------- TOTAL 4,413,388
OTHER EXPENSES ON RETURN BUT NOT ON BOOKS	FORM 990, SCHEDULE D, PART XII, LINE 4B	RENTAL EXPENSES MOVED TO STMT OF REVENUE (11,652,132)

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . ▶ 39

3 Enter total number of other organizations listed in the line 1 table . . . ▶ 2

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance
(1) Travel to APA convention	96	28,800		cost	
(2) Doctoral Dissertation Research Support	45	53,610		cost	
(3) Minority Fellowship Program Dissertation Support	7	21,648		cost	
(4) Travel to International Congress of Psychology	22	23,540		cost	
(5) Basic Psychology Science Research Grant	8	8,000		cost	

Part IV **Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCESS FOR MONITORING GRANT FUNDS IN USA	SCHEDULE I, PART IV, SUPPLEMENTAL INFORMATION	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 DOES NOT FACTOR IN ASSIGNING GRANTS

Additional Data

Return to Form

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

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Archives of the History of American PsychologyThe University of Akron Polsky Building LL10A Akron, OH 443254302	34-6002924	501c(3)	60,000				general support
Asian American Psychological Association 3003 N Central Avenue Phoenix, AZ 85012	93-1103996	501c(3)	13,000				CEMRRAT GRANT
City College City University 138th Street and Convent Avenue New York, NY 10031	13-3850823	501c(3)	6,500				ProDIGs Grant
Virginia Commonwealth University700 West Grace Street Richmond, VA 23284	54-0757884	501c(3)	7,500				ProDIGs Grant
Morehouse College830 Westview Drive Atlanta, GA 30314	58-0566205	501c(3)	6,500				ProDIGs Grant
Tougaloo College500 West County Line Road Tougaloo, MS 39174	64-0303093	501c(3)	6,500				ProDIGs Grant
University of South Dakota Foundation1110 N Dakota PO Box 5555 Vermillion, SD 57069	46-6018891	501c(3)	10,000				general support
Adelphi University1 South Avenue Garden City, NY 11530	11-1630741	501 c(3)	23,900				Seed Funding Grant
Aspenpointe Inc220 Ruskin Drive Colorado springs, CO 80910	90-0528134	501 c(3)	10,650				Seed Funding Grant
Behavioral Health Network IncPO Box 2738 Springfield, MA 01101	04-2103756	501 c(3)	20,000				Seed Funding Grant

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Chestnut Hill College9601 Germantown Avenue Philadelphia, PA 19118	23-1352626	501 c(3)	20,000				Seed Funding Grant
Children's Hospital & Research Center Foundation 2201 Broadway Suite 600 Oakland, CA 94612	94-1657474	501 c(3)	23,400				Seed Funding Grant
COUNTY OF MARIN3501 Civic Center Drive San Rafael, CA 94903	94-6000519	DHHS	20,000				Seed Funding Grant
Holcomb Behavioral Health Systems467 Creamery Way Exton, PA 19341	23-2093566	501 c(3)	12,900				Seed Funding Grant
Inland Behavioral & Hlth 1963 North E Street San Bernardino, CA 92405	95-3246624	501 c(3)	20,000				Seed Funding Grant
Kaiser Foundation Hospit1 Kaiser Plaza 15L Oakland, CA 94612	94-1105628	501 c(3)	19,996				Seed Funding Grant
Kentucky River Community Care Inc115 Rockwood Lane Hazard, KY 41701	31-0965230	501 c(3)	20,000				Seed Funding Grant
Kern County Mental Healt 345 Chester Ave Bakersfield, CA 93301	95-2021112	501 c(3)	20,000				Seed Funding Grant
Madison County Community 1547 Ohio Avenue Anderson, IN 46016	35-2098820	501 c(3)	20,000				Seed Funding Grant
New York City Health & Hospitals Corporation160 Water Street Suite 635 New York, NY 10038	13-2655001	501 c(3)	20,000				Seed Funding Grant

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Pennyroyal Regional Mental HealthPO Box 614 Hopkinsville, KY 42241	61-0662739	501 c(3)	12,800				Seed Funding Grant
Philadelphia College of Osteopathic Medicine Found 4190 City Avenue Philadelphia, PA 19131	22-2691757	501 c(3)	10,000				Seed Funding Grant
New Mexico State University FoundationPO Box 3590 Las Cruces, NM 88003	85-0170157	501 c(3)	5,650				Seed Funding Grant
Rogers Memorial Hospital 34700 Valley Rd Oconomowoc, WI 53066	39-1363507	501 c(3)	21,000				Seed Funding Grant
Southwest Behavioral Health Services IN3450 N 3rd Street Phoenix, AZ 85012	86-0290033	501 c(3)	18,500				Seed Funding Grant
St Charles Health Council INC602 W Morgan Avenue Pennington Gap, VA 24277	23-7319768	501 c(3)	20,000				Seed Funding Grant
St Vincent Hospital & Health Care Center Inc2001 West 86th St Indianapolis, IN 46260	35-0869066	501 c(3)	19,590				Seed Funding Grant
Starr Commonwealth13725 Starr Commonwealth RD Albion, MI 49224	38-1359593	501 c(3)	20,000				Seed Funding Grant
Summit Pointe140 W Michigan Ave Battle Creek, MI 49017	38-3318175	501 c(3)	20,000				Seed Funding Grant
Sutter West Bay Hospitals 633 Folson St San Francisco, CA 94107	94-0562680	501 c(3)	20,000				Seed Funding Grant

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Talbert House Inc2600 Victory Pkwy Cincinnati, OH 45206	31-0713350	501 c(3)	20,000				Seed Funding Grant
Univ of Central Arkansas Foundation535 Research Center Boulevard Fayetteville, AR 72701	71-6056774	501 c(3)	19,858				Seed Funding Grant
Univ of Connecticut Foundation2390 Alumni DR Storrs, CT 06269	06-6070722	501 c(3)	11,650				Seed Funding Grant
Univ of New Hampshire Foundation Inc9 Edgewood Road Durham, NH 03824	02-0437506	501 c(3)	17,000				PFF Psychology Grant
Univ of Northern Colorada Foundation inc1620 Resvoir Road Greeley, CO 80631	84-6044833	501 c(3)	20,000				Seed Funding Grant
Univ of San Francisco2130 Fulton Street San Francisco, CA 94117	94-1156628	501 c(3)	25,036				Seed Funding Grant
Univ of Vermont85 So Prospect Street Burlington, VT 05405	03-0179440	501 c(3)	20,000				Seed Funding Grant
Waianae Coast Comprehensive Health & Hospital Boar86-260 Farrington Hwy Waianae, HI 96792	99-0148164	501 c(3)	20,000				Seed Funding Grant
Will County Health Department501 Ella Ave Joilet, IL 60433	36-6006672	Will CTY HEALTH	19,850				Seed Funding Grant
Ponce School of MedicinePO Box 7004 Ponce, PR 00732	66-0379122	501 c(3)	18,950				Seed Funding Grant

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Give an Hour5137 Westpath Way Bethesda, MD 20816	61-1493378	501 c(3)	10,000				general support

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493319011563

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

Part I Questions Regarding Compensation

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation reported as deferred in prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
See Additional Data Table								

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Identifier	Return Reference	Explanation
COMPENSATION REPORTED IN PRIOR YEAR	FORM 990, SCHEDULE J, PART II, COLUMN F	NORMAN B ANDERSON, PHD elected to exercise HIS option to liquidate A TOTAL OF $204,931 in accrued Executive Supplemental Compensation during 2012 HE received HIS PORTION OF THE $204,931 in 2012, however, it was reported as deferred compensation on prior year returns
EXPLANATION OF CHECKED ITEM	FORM 990, SCHEDULE J, PART I, LINE 1A	THE CEO'S HEALTH CLUB DUES ARE PAID BY THE ORGANIZATION

Additional Data

Return to Form

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
NORMAN B ANDERSON PHD	(i)	491,835	282,931	15,515	74,490	20,193	884,964	204,931
	(ii)	0	0	0	0	0	0	0
ARCHIE L TURNER	(i)	345,685	0	3,180	15,000	25,482	389,347	
	(ii)	0	0	0	0	0	0	
TONY F HABASH DSC	(i)	369,163	0	477	15,000	25,385	410,025	
	(ii)	0	0	0	0	0	0	
MICHAEL HONAKER PHD	(i)	319,198	0	3,207	15,000	18,919	356,324	
	(ii)	0	0	0	0	0	0	
KATHERINE C NORDAL PHD	(i)	284,554	0	5,010	15,000	10,080	314,644	
	(ii)	0	0	0	0	0	0	
GWENDOLYN P KEITA PHD	(i)	258,241	0	3,332	15,000	18,509	295,082	
	(ii)	0	0	0	0	0	0	
CYNTHIA D BELAR PHD	(i)	287,768	0	5,062	15,000	18,642	326,472	
	(ii)	0	0	0	0	0	0	
RHEA K FARBERMAN	(i)	330,743	0	3,018	15,000	25,393	374,154	
	(ii)	0	0	0	0	0	0	
STEVEN J BRECKLER PHD	(i)	259,066	0	1,321	15,000	5,590	280,977	
	(ii)	0	0	0	0	0	0	
NATHALIE P GILFOYLE JD	(i)	384,947	0	3,210	15,000	10,557	413,714	
	(ii)	0	0	0	0	0	0	
GARY R VANDENBOS PHD	(i)	347,248	0	5,063	15,000	25,462	392,773	
	(ii)	0	0	0	0	0	0	
NANCY MOORE	(i)	248,374	0	1,373	14,955	9,812	274,514	
	(ii)	0	0	0	0	0	0	
MARILYN S RICHMOND JD	(i)	222,591	0	3,437	13,704	9,668	249,400	
	(ii)	0	0	0	0	0	0	
STEPHEN BEHNKE JD PHD	(i)	218,706	0	690	13,494	9,644	242,534	
	(ii)	0	0	0	0	0	0	
ELISABETH R STRAUS	(i)	214,885	0	1,445	13,200	10,770	240,300	
	(ii)	0	0	0	0	0	0	
ELLEN GARRISON	(i)	208,023	0	2,570	11,409	5,179	227,181	
	(ii)	0	0	0	0	0	0	

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

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 Part VI.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased Yes	(g) Defeased No	(h) On behalf of issuer Yes	(h) On behalf of issuer No	(i) Pool financing Yes	(i) Pool financing No
A	DISTRICT OF COLUMBIA	53-6001131	254839E66	03-20-2003	21,100,000	LOAN REFINANCING		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	0			
2	Amount of bonds legally defeased	0			
3	Total proceeds of issue	21,100,000			
4	Gross proceeds in reserve funds	0			
5	Capitalized interest from proceeds	0			
6	Proceeds in refunding escrows	0			
7	Issuance costs from proceeds	422,000			
8	Credit enhancement from proceeds	0			
9	Working capital expenditures from proceeds	506,629			
10	Capital expenditures from proceeds	20,171,371			
11	Other spent proceeds	0			
12	Other unspent proceeds	0			
13	Year of substantial completion	2003			

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	X							
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						

Part III Private Business Use *(Continued)*

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	X							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X							
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 %		%		%		%	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 %		%		%		%	
6	Total of lines 4 and 5	0 %		%		%		%	
7	Does the bond issue meet the private security or payment test?	X							
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		X						
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?		X						

Part IV Arbitrage

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1	Has the issuer filed Form 8038-T?		X						
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?								
b	Exception to rebate?	X							
c	No rebate due?								
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	X							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b	Name of provider	0							
c	Term of hedge								
d	Was the hedge superintegrated?		X						
e	Was a hedge terminated?								

Part IV Arbitrage *(Continued)*

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?								
b	Name of provider	0							
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X						
7	Has the organization established written procedures to monitor the requirements of section 148?		X						

Part V Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		X						

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

Identifier	Return Reference	Explanation

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, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

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

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

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
(1) NORMAN ANDERSON PHD	Officer	MORTGAGE LOAN		X	300,000	202,000		No	Yes		Yes	
Total			▶ $			202,000						

Part III Grants or Assistance Benefitting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

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

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

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

Identifier	Return Reference	Explanation
LOANS TO AND/OR FROM INTERESTED PERSONS	FORM 990, SCHEDULE L, PART II	BORROWER NORMAN B ANDERSON, PHD ORIGINAL AMOUNT 300,000 INTEREST RATE 1 025 (IMPUTED INTEREST CALCULATED) DATE OF NOTE 01/09/2004 MATURITY DATE 12/31/2017 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 01/01/12 BEGINNING BALANCE 208,500 12/31/12 ENDING BALANCE 202,000

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

Identifier	Return Reference	Explanation
CONFLICTS OF INTEREST	FORM 990, PART VI, LINE 12C	THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY GOVERNING ITS COUNCIL OF REPRESENTATIVES AND BOARD OF DIRECTORS EACH YEAR NEW APA COUNCIL AND BOARD MEMBERS RECEIVE TRAINING FROM APA LEGAL COUNSEL REGARDING APA'S CONFLICT OF INTEREST POLICY, HOW TO IDENTIFY A CONFLICT OF INTEREST AND HOW TO HANDLE POSSIBLE CONFLICTS OF INTEREST WHEN THEY ARISE IN ADDITION EACH YEAR ALL GOVERNANCE MEMBERS RECEIVE AN EDUCATIVE SET OF MATERIALS REGARDING CONFLICTS OF INTEREST AND SELF EVALUATION WORKSHEETS TO TEST AWARENESS EACH GOVERNANCE MEMBER IS REQUIRED TO COMPLETE A WRITTEN CONFIRMATION THAT SHE OR HE WILL ABIDE BY THE CONFLICT OF INTEREST POLICY AND TO DISCLOSE INTEREST OR RELATIONSHIPS THAT MAY POSE CONFLICTS AT EACH MEETING OF THE COUNCIL, ALL MEMBERS ARE REMINDED THAT THEY ARE SUBJECT TO THE CONFLICT OF INTEREST POLICY, WHICH IS PRINTED IN THE ASSOCIATION RULES AND POSTED ON APA'S WEBSITE ALL APA EMPLOYEES ARE REQUIRED TO SIGN A FINANCIAL CONFLICT OF INTEREST CERTIFICATE ANNUALLY

Identifier	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

Identifier	Return Reference	Explanation
DETERMINING COMPENSATION	FORM 990, PART VI, LINES 15A AND 15B	APA IS GOVERNED BY A COUNCIL OF REPRESENTATIVES COMPRISED OF 173 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

Identifier	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.

Identifier	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 (142 GRANTS IN 2012), 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 COURSES, MORE THAN 100 PARTICIPANTS ATTENDING IN 2012), AND ARCHIVING INFORMATION IMPORTANT TO THE DISCIPLINE (OVER 2000 NEW ITEMS ADDED, OVER 500 REQUESTS SATISFIED IN 2012) 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 2012 THE DIRECTORATE MANAGED MORE THAN $2 5 MILLION IN FEDERAL AND FOUNDATION GRANTS ADDRESSING VIOLENCE PREVENTION AND CHILD MALTREATMENT, HIV/AIDS RESEARCH, PREVENTION, AND CARE, SES-RELATED CANCER DISPARITIES, RECOVERY TO PRACTICE, WOMEN'S HEALTH, WOMEN'S LEADERSHIP; INTERNATIONAL LESBIAN, GAY, BISEXUAL, AND TRANSGENDER ISSUES, ETHNIC MINORITY TRAINING, AND WORK, STRESS, AND HEALTH AMONG NUMEROUS 2012 APA-FUNDED PROGRAMS AND ACTIVITIES WERE ADVOCACY RELATED TO PUBLIC INTEREST ISSUES, AND ACTIVITIES ADDRESSING PSYCHOLOGICAL ISSUES RELATED TO WOMEN, LESBIAN, GAY, BISEXUAL, AND TRANSGENDER CONCERNS, RACIAL AND ETHNIC MINORITIES, AIDS, SOCIOECONOMIC STATUS, VIOLENCE PREVENTION, DISABILITY, AGING, WORK, STRESS, AND HEALTH, HEALTH DISPARITIES, AND HUMAN RIGHTS 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 CLINICAL PRACTICE AND PROFESSIONAL PRACTICE, A PUBLIC EDUCATION CAMPAIGN FOCUSING ON MIND/BODY HEALTH AND THE CONNECTION BETWEEN PSYCHOLOGICAL AND PHYSICAL HEALTH, THE PUBLIC EDUCATION CAMPAIGN NETWORK, THE ANNUAL STRESS IN AMERICA SURVEY, THE APA HELP CENTER, A WEB-BASED PLATFORM FOR CONSUMER INFORMATION, EDUCATIONAL AND PROFESSIONAL DEVELOPMENT MATERIALS FOR PRACTITIONERS, AND, A DISASTER RESPONSE NETWORK IN COOPERATION WITH THE AMERICAN RED CROSS

Identifier	Return Reference	Explanation
VOTING MEMBERS	FORM 990, PART VI, LINE 1A	APA IS GOVERNED BY A COUNCIL OF REPRESENTATIVES COMPRISED OF 173 MEMBERS WHICH MEETS TWICE A YEAR, AND ITS SMALLER BOARD OF DIRECTORS WHICH IS COMPRISED OF APA'S FIVE OFFICERS, PLUS SEVEN AT-LARGE-MEMBERS WHO ARE ALSO COUNCIL MEMBERS THE BOARD OF DIRECTORS MEETS AT LEAST SIX, AND OFTEN AS MANY AS TEN TIMES A YEAR IN PERSON, IN ADDITION TO BI-MONTHLY MEETINGS BY CONFERENCE CALL 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

Identifier	Return Reference	Explanation
FAMILY/BUSINESS RELATIONSHIPS	FORM 990, PART VI, LINE 2	AS AN ASSOCIATION OF PSYCHOLOGISTS, OUR MEMBERS ROUTINELY DO BUSINESS WITH EACH OTHER, INCLUDING COUNCIL MEMBERS DOING BUSINESS WITH EACH OTHER

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

Identifier	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

Identifier	Return Reference	Explanation
OTHER CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	UNREALIZED HOLDING GAIN ON INTEREST RATE SWAPS 442,068 REVENUE ON FORM 990 NOT ON FINANCIAL STATEMENTS (1,712,618) AFFILIATE (TEN G) TRANSFER OF NET ASSETS (7,743,958) AFFILIATE (TEN G) INCOME FROM PERIOD AS DISREGARDED ENTITY 3,074,845 ------------ Total 913,069

Identifier	Return Reference	Explanation
OTHER FEES FOR SERVICES FOR NON-EMPLOYEES	FORM 990 PART IX LINE 11G	DESCRIPTION CONSULTING AND CONTRACTUAL TOTAL FEES 13448715

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) APA 750 LLC 750 1ST STREET NE WASHINGTON, DC 20002 53-0205890	RE RENTAL	DC	15,779,101	59,481,084	NA
(2) APA TEN G LLC 750 1ST STREET NE washington, DC 20002 52-1890269	RE RENTAL	DC	2,779,478	1,770,338	NA

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

(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 entity? Yes	No
(1) APA PRACTICE ORGANIZATION 750 1ST STREET NE WASHINGTON, DC 20002 52-2262136	MEMBERSHIP	DC	501(C)(6)		NA		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1) APA TEN G LLC 750 FIRST STREET NE WASHINGTON, DC 20002 52-1890269	RE RENTAL	DC	NA	unrelated	9,225,682	0		No		Yes		99 000 %

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to 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	(i) Section 512 (b)(13) controlled entity? Yes	(i) No
(1) APA G STREET CORPORATION 750 FIRST STREET NE WASHINGTON, DC 20002 47-0909591	HOLDING COMPAny	DE	na	C CORPORATION	207,980	0	100 000 %	Yes	

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

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

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

(a) Name of other organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1) APA PRACTICE ORGANIZATION	n	938,317	FMV
(2) APA PRACTICE ORGANIZATION	o	1,412,711	FMV
(3) APA PRACTICE ORGANIZATION	q	1,412,711	FMV
(4) APA TEN G LLC	s	3,500,000	FMV

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation

Additional Data

Return to Form

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

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