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DLN: 93493313014455

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 private foundations)

▶ Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2014

Open to Public Inspection

A Fo	r the	2014 ca	lendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014				
B Ch	eck ıf a	pplicable	C Name of organization AMERICAN PSYCHOLOGICAL ASSOCIATION INC		D Emplo	yer ide	ntification number
☐ Ad	dress cl	hange	GROUP RETURN		54-1	572590	ס
Г№	me cha	inge	Doing business as		-		
┌ Ini	ial retu	ım			F Telenh	one num	her
Fir			Number and street (or P O box if mail is not delivered to street address) Room/suite 750 FIRST STREET NE				
		mınated			(202	218-3	984
_	iended plicatioi	return n pending	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20002		G Gross	receipts	9,858,109
			F Name and address of principal officer	H(a) Ist	■ his a group	raturn	for
			ARCHIE L TURNER		ordinates?		✓ Yes 厂 No
			750 FIRST STREET NE WASHINGTON, DC 20002	U(b) A			
			, and the second		all subord uded?	inates	✓ Yes 「No
I Ta	x-exen	npt statu	s	If"l	No," attach	n a list	(see instructions)
J W	ebsite	e:► W	WW APA ORG	H(c) Gro	up exemp	tion nur	mber ► 3263
K For	n of or	ganızatıo	n 🔽 Corporation ☐ Trust ☐ Association ☐ Other ►	L Year of t	formation	М	State of legal domicile
Pa	rt I	Sur	mmary				
			describe the organization's mission or most significant activities				
		SEE SC	CHEDULE O				
<u>ڪ</u>							
屋							
Governance	2	Check	this box $lacktriangledown$ if the organization discontinued its operations or disposed of	more than	25% of its	net as	sets
উ		NI la a	or of control or control of the Cont			1 -	
Activities &	I		r of voting members of the governing body (Part VI, line 1a) r of independent voting members of the governing body (Part VI, line 1b)			4	630 630
¥	I		umber of individuals employed in calendar year 2014 (Part V, line 2a)			5	030
C.			umber of individuals employed in calendar year 2014 (Fait V, line 2a) . umber of volunteers (estimate if necessary)			6	667
đ			nrelated business revenue from Part VIII, column (C), line 12			7a	4,191
	1		related business taxable income from Form 990-T, line 34			7b	0
			·		or Year		Current Year
	8	Cont	ributions and grants (Part VIII, line 1h)		2,725,	394	2,201,603
를	9	Progi	ram service revenue (Part VIII, line 2g)		981,		1,130,370
Revenue	10	Inve	stment income (Part VIII, column (A), lines 3, 4, and 7d)	243,446		973,797	
立	11		r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,071,	992	2,732,403
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		7,021,	926	7,038,173
-	13		ts and similar amounts paid (Part IX, column (A), lines 1–3)		123,		182,827
	14		fits paid to or for members (Part IX, column (A), line 4)			0	0
	15		ries, other compensation, employee benefits (Part IX, column (A), lines			0	0
\$		5-10	•				
Expenses	16a		essional fundraising fees (Part IX, column (A), line 11e)			0	0
ਡੋ	Ь	Total 1	fundraising expenses (Part IX, column (D), line 25) ▶ 0				
	17	Othe	r expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,378,	403	5,395,065
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		5,501,	967	5,577,892
	19	Reve	nue less expenses Subtract line 18 from line 12		1,519,		1,460,281
Not Assets or Fund Balances					ng of Curre Year	nt	End of Year
900	20	Tota	l assets (Part X, line 16)		20,721,	768	22,479,184
A A	21		l liabilities (Part X, line 26)		1,265,		1,429,209
žÏ	22		assets or fund balances Subtract line 21 from line 20		19,456,	179	21,049,975
Pa	rt II	Sig	nature Block			•	
my k	nowle	dge and	f perjury, I declare that I have examined this return, including accompanyi I belief, it is true, correct, and complete Declaration of preparer (other than knowledge				
		h ***	***].	2015-11-09		
Sigr	,	I -	nature of officer		Date		
Her			CHIE L TURNER CHIEF FINANCIAL OFFICER				
		Тур	pe or print name and title				
			Print/Type preparer's name Preparer's signature Date J SCOTT DENLINGER J SCOTT DENLINGER		neck if	PTIN P00740)770
Pai		ŀ	Firm's name CHERRY BEKAERT LLP		lf-employed m's EIN 🟲 5		
	pare	r					
Use	On	ly	Firm's address 3 BETHESDA METRO CENTER SUITE 600		one no (30:	r) abt-36	JJU
			BETHESDA, MD 20814				

✓ Yes ☐ No

Form	1990 (2014)					Page
Par			vice Accomplishme			
	Check if Sch	nedule O contains a res	ponse or note to any line	in this Part III .		
1	Briefly describe th	e organization's missio	n			
SEE	SCHEDULE O					
2		n undertake any signifi or 990-EZ?	cant program services du	ring the year which	were not listed on	
	If "Yes," describe t	these new services on :	Schedule O			
3	Did the organizatio	n cease conducting, or	make significant change	s in how it conducts	s, any program	
	If "Yes," describe t	hese changes on Sche	dule O			
4	expenses Section	501(c)(3) and 501(c)(ce accomplishments for of 4) organizations are required to the contract of the	ired to report the a		•
4a	(Code) (Expenses \$	1,736,828 including	grants of \$) (Revenue \$	1,116,437)
	AS WELL AS, VARIOUS		KSHOPS, CONTINUING EDUCAT			AT THE ANNUAL CONVENTION, COVERING VARIOUS
4b	(Code) (Expenses \$	1,126,565 including	grants of \$) (Revenue \$	792,789)
			- THE PREPARATION AND DIS SYCHOLOGY PROFESSIONALS			VARIOUS PSYCHOLOGY
4c	(Code) (Expenses \$	547,730 including	grants of \$	182,827) (Revenue \$)
	AWARDS AND GRANTS	S - VARIOUS AWARD PRESE	ITATIONS AND GRANTS TO FU	ND VARIOUS RESEARCH	PROJECTS IN PSYCHOLOG	Y
	See Additional Da	ta				
4d	Other program se	rvices (Describe in Scl	nedule O)			
	(Expenses \$	304,877 in	cluding grants of \$) ((Revenue \$	13,933)
4e	Total program ser	vice expenses 🟲	3,716,000			

Part IV Checklist of Required Schedule
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			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^{2}	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
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^{\bullet}	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? <i>If "Yes,"</i> 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^{\square}	9		No
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 $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
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		No
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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	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 $11e^{2}$ 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? <i>If "Yes," complete Schedule G, Part II</i>	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		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government 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 or other assistance to or for domestic individuals 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? <i>If "Yes," complete Schedule J</i>	23		No
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 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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 $2 \cdot$	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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 or note to any line in this Part V		 -	<u> </u>
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 349 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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			
b	by this return	2b		
-		2-	V	
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b	Yes Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a	103	No
	account)?	-14		NO
b	If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		140
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e 7f		N c
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	/1		INC
y	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		
3	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
а	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			
L	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
_	In which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand		 	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		Νo

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

check if beheating of contains a response of note to any fine in this fait vi	Check if Schedule O	contains a response or note to any line in this P	art V I .													.[▽
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36	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
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	Yes	
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			
а	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a			Yes	
10a b	Did the organization have local chapters, branches, or affiliates?	10a	Yes Yes	
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No No No

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 Vipon request Other (explain in Schedule O)
- 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
- State the name, address, and telephone number of the person who possesses the organization's books and records ►APA FINANCIAL SERVICE OFFICE

750 FIRST STREET NE

WASHINGTON, DC 20002 (202) 218-3984

Form 990 (2014)	
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Check if Schedule O contains a response or note to any line 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) A verage hours per week (list any hours	(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-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form **990** (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th persoi and a	ion (nan d n is l	ne b ooth	oox, an	unless officer	1	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

.b	Sub-Total	•			
C	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	Þ	8,000	0	1,500

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

			Yes	No			
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	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						
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 No			

Section B. Independent Contractors

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

(B) Description of services	(C) Compensation
	199,265
ADMINISTRATIVE	135,623
MANAGEMENT FEES	105,318

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 ►3

Other Revenue Contributions, Giffs, Grants and Other Similar Amounts and Other Similar Amounts and Other Similar Amounts		
Gabbccdd Aasa bbccdd Aasa bbccd Aasa	Contributions, Gifts, Grants and Other Similar Amounts	
Other Revenue Other	Program Service Revenue	2a b c d e f
b c 10a	venu	4 5 6a b c d 7a b
b	Œ	b c 9a b c
		b c

Form 99		-						Page 9
Part V	<u>/ † † †</u>	Statement o Check if Schedu	f Revenue ule O contains a respons	se or note to any lin	e in this Part VIII			
			·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated cam	paigns 1a					
Grants mounts	ь	Membership du	es 1b	1,960,463				
و ق	С	Fundraising eve	ents 1c	4,355				
Giffs, iilar A	d	Related organiz	ations 1d	4,000				
E :	e	Government grants	s (contributions) 1e					
ons Sil	f f	All other contribution	ons, gifts, grants, and 1f	232,785				
Contributions, Giffs, Grants and Other Similar Amounts		sımılar amounts no	ot included above					
r di	g	1a-1f \$	ons included in lines					
ē Č	h	Total. Add lines	s 1a-1f	· · · •	2,201,603			
<u> </u>				Business Code				
Кеп	2a	WORKSHOPS/CE F	EES	900099	1,059,724	1,059,724		
Program Serwoe Revenue	b	FAST FOWARD COI		900099	31,890	31,890		
	C	SPPAC-NATIONAL (900099	24,298	24,298		
Š	d e	TAX FORCE SUPPO SALES		900099	7,100 6,833	7,100 6,833		
ran	f		m service revenue	900099	525	525		
% ∆								
	g 3		s 2a-2f		1,130,370			
		and other simila	aramounts)	•	528,408			528,408
	4		tment of tax-exempt bond p	roceeds .	1,917,636			1,917,636
	5	Royalties	(ı) Real	(II) Personal	1,517,030			1,517,030
	6a	Gross rents	(1) 11021	(, : 5.55				
	ь	Less rental expenses						
	С	Rental income or (loss)						
	d	, ,	me or (loss)					
	_	C	(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	3,259,020					
	Ь	Less cost or other basis and	2,813,631					
	c	sales expenses Gaın or (loss)	445,389					
	d	Net gain or (los	s)		445,389			445,389
Other Revenue	8a	Ψ	luding ,355					
ě		See Part IV, lin	reported on line 1c)					
<u>.</u>			a	5,965				
	b c		penses b [loss) from fundraising e	6,305	-340			-340
_			rom gaming activities	venes : : p				
		See Part IV, lin						
	Ь	less directex	a penses b					
	c		loss) from gaming activ	ities				
	10a	Gross sales of returns and allo						
	b	Less cost of a	oods sold b					
	С	Net income or ((loss) from sales of inve					
		Miscellaneous		Business Code	442 702	442 702		
	11a			541900 900099	413,782 257,490	413,782 257,490		
	b	JOURNAL LICE		900099	121,517	121,517		
	c d	OFFICE SUPPO	ue	300033	22,318	18,127	4,191	
	e	Total. Add lines	L	🕨		·	·	
	12		See Instructions		815,107			
				· P*	7,038,173	1,941,286	4,191	2,891,093

		Statement of Functional Expenses				
ectio		L(c)(3) and $501(c)(4)$ organizations must complete all columns All				
		Check if Schedule O contains a response or note to any line in this f	Part IX			<u></u>
		ude amounts reported on lines 6b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1		ts and other assistance to domestic organizations and estic governments See Part IV, line 21	158,177	158,177		
		ts and other assistance to domestic iduals. See Part IV, line 22	24,650	24,650		
	gove	ts and other assistance to foreign organizations, foreign rnments, and foreign individuals See Part IV, lines 15	24,630	24,030		
		fits paid to or for members				
		pensation of current officers, directors, trustees, and employees				
	Comp (as d	pensation not included above, to disqualified persons efined under section 4958(f)(1)) and persons ribed in section 4958(c)(3)(B)				
7	Othe	r salaries and wages				
		ion plan accruals and contributions (include section 401(k)				
		r employee benefits				
10	Payro	oll taxes				
11	Fees	for services (non-employees)				
а	Mana	gement	317,126		317,126	
		· 				
С	Acco	unting	1,590		1,590	
d		yıng			,	
		ssional fundraising services See Part IV, line 17				
		stment management fees	40,526		40,526	
	Othe	r (If line 11g amount exceeds 10% of line 25, column (A)	858,795	363,270	495,525	
12		rtising and promotion	28,023	18,751	9,272	
		e expenses	723,694	538,668	185,026	
		mation technology	62,084	42,723	19,361	
15	Roya	lties			·	
	•	ipancy	998		998	
		el	647,968	295,766	352,202	
18	Paym	nents of travel or entertainment expenses for any federal,	210,722			
		erences, conventions, and meetings	1,640,779	1,402,919	237,860	
		est	1,305	•	1,305	
	Paym	nents to affiliates				
	·-·	eciation, depletion, and amortization				
	•	rance	500		500	
	misc	r expenses Itemize expenses not covered above (List ellaneous expenses in line 24e If line 24e amount exceeds 10% e 25, column (A) amount, list line 24e expenses on Schedule O)				
а	ном	ORARIUMS/STIPEND	496,635	437,974	58,661	
b	A WA	RDS	320,247	314,258	5,989	
c	CON	TRIB/DUES/MEMB FEES	191,412	73,952	117,460	
d	WO R	KSHOPS/MISCELLANEOUS	49,114	31,623	17,491	
e	Allot	her expenses	14,269	13,269	1,000	
25	Total	functional expenses. Add lines 1 through 24e	5,577,892	3,716,000	1,861,892	(
26	Joint repor	costs. Complete this line only if the organization ted in column (B) joint costs from a combined ational campaign and fundraising solicitation. Check	. , =		. , =	

Form 990 (2014)

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in this	Part X			
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		Beginning of year	1	Lilu oi yeai
	2	Savings and temporary cash investments		10,392,896		10,886,052
	3	Pledges and grants receivable, net		13,232,232	3	, ,
	4	Accounts receivable, net		532,306	4	400,113
	5	Loans and other receivables from current and former officers, directly designed by the compensated employees. Complete P. Schedule L	tors, trustees,	602,600	5	100,110
Assets	6	Loans and other receivables from other disqualified persons (as desection 4958(f)(1)), persons described in section 4958(c)(3)(B), employers and sponsoring organizations of section 501(c)(9) volubeneficiary organizations (see instructions) Complete Part II of Section 501	and contributing ntary employees		6	
\$\$ (7	Notes and loans receivable, net			7	
₹	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		254,076	9	166,551
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D				
	ь	Less accumulated depreciation	10b		10 c	
	11	Investments—publicly traded securities	9,508,490	11	10,990,968	
	12	Investments—other securities See Part IV, line 11		12		
	13	Investments—program-related See Part IV, line 11	•	34,000	13	34,000
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	1,500
	16	Total assets. Add lines 1 through 15 (must equal line 34)		20,721,768	16	22,479,184
	17	Accounts payable and accrued expenses		260,714	17	216,436
	18	Grants payable			18	
	19	Deferred revenue		952,368	19	1,157,545
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability Complete Part IV of Schedu		21		
Liabilitie	22	Loans and other payables to current and former officers, directors key employees, highest compensated employees, and disqualified				
iak		persons Complete Part II of Schedule L			22	
-	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties .			24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part X D		52,507	25	55,228
	26	Total liabilities. Add lines 17 through 25		1,265,589	26	1,429,209
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 a lines 27 through 29, and lines 33 and 34.	nd complete			
lan	27	Unrestricted net assets		17,810,963	27	19,094,828
Ba	28	Temporarily restricted net assets		1,645,216	28	1,955,147
7	29	Permanently restricted net assets		29		
or Fui		Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.	►			
2	30	Capital stock or trust principal, or current funds			30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund .			31	
As	32	Retained earnings, endowment, accumulated income, or other fund	s		32	
Net	33	Total net assets or fund balances		19,456,179	33	21,049,975
	34	Total liabilities and net assets/fund balances	· · ·	20,721,768	34	22,479,184
						Form 990 (2014)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7.0	38,173
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1				
_		3		1,4	160,281
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		19,4	156,179
5	Net unrealized gains (losses) on investments	5			84,728
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			48,787
9	Other changes in net assets or fund balances (explain in Schedule O)			0	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		21,0	049,975
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
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 review a separate basis, consolidated basis, or both	wed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	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 oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	it of th	ne 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	า			
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?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Additional Data

Software ID:

Software Version:

EIN: 54-1572590

Name: AMERICAN PSYCHOLOGICAL ASSOCIATION INC

GROUP RETURN

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 304,877 including grants of \$) (Revenue \$ 13,933)
OTHER PROGRAM SERVICES INCLUDE VARIOUS TASK FORCES AND COMMITTEES WORKING ON PROGRAMMATIC ISSUES

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th persoi and a	ion (d nan o n is b	ne booth a	ox, u an of trus	inless fficer tee)		(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	
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,2333 11333,	2,2000	related organizations	
(1) WADE E PICKREN	1 00	x		Х				0	0	0	
D01-PAST PRESIDENT 08/13-07/14 (1) JANET A SIGAL PHD											
D01-PAST PRESIDENT 08/14-07/15 / PRESIDENT 08/13-0	1 00	х		х				0	0	0	
(2) JOAN C CHRISLER	5 00	,,		,							
D01-PRESIDENT 08/14-07/15 / PRESIDENT-ELECT 08/13-		X		Х				0	0	0	
(3) NANCY L BAKER PHD	5 00	x		х				0	0	0	
D01-PRESIDENT-ELECT 08/14-07/15 (4) GINA M BRELSFORD PHD	1 00							-	-		
D01-SECRETARY 04/12-08/14		x		х				0	0	0	
(5) ANITA M WELLS	1 00	x		х				0	0	0	
D01-SECRETARY 08/14-07/17 (6) DEBORAH F JOHNSON	1 00							0	0		
D01-TREASURER 09/14-09/16		×		х				0	0	0	
(7) EMILIO C ULLOA	1 00	х		х				0	0	0	
D01-TREASURER 10/13-07/14								Ů	0		
(8) JOSEPHINE TAN D01-MEMBER-AT-LARGE 07/11-08/14 / AWARDS CHAIR	1 00	x						0	0	0	
08/ (9) GORDON M BURGHARDT PHD	1 00	.,									
D01-MEMBER-AT-LARGE 08/12-07/14		Х						0	0	0	
(10) RICHARD S VELAYO PHDD01-MEMBER-AT-LARGE 08/13-07/16	1 00	x						o	0	О	
(11) MINDY J ERCHULL PHD	1 00	х						0	0	0	
D01-MEMBER-AT-LARGE 08/14-07/17 (12) LISA OSBECK PHD	1 00										
D01-MEMBER-AT-LARGE 08/15-07/18		X						0	0	0	
(13) JOCELYN O TURNER-MUSA	1 00	x						0	0	0	
D01-AWARDS CHAIR 08/14-07/15 (14) ROSIE P BINGHAM PHD	1 00										
D01-COUNCIL REPRESENTATIVE 01/12-12/14		Х						0	0	0	
(15) CLARE K PORAC PHDD01-COUNCIL REPRESENTATIVE 01/15-12/17	1 00	×						0	0	0	
(16) DONALD A DEWSBURY	1 00	x						0	0	0	
D01-HISTORIAN 01/12-01/15	1.00	_ ^						0	0	0	
(17) GERIANNE M ALEXANDER PHD D01-JOURNAL EDITOR 08/13-07/16	1 00	×						0	0	0	
(18) ALICIA M TROTMAN PHD	1 00	,,									
D01-NEWSLETTER EDITOR 08/13-07/16 (19) R ERIC LANDRUM	20 00	X						0	0	0	
D02-PRESIDENT		x		х				8,000	0	0	
(20) SCOTT BATES	10 00	x		х				0	0	0	
D02-SECRETARY (21) DAVID KREINER	10 00	,									
D02-TREASURER		X		Х				0	0	0	
(22) SUZANNE C BAKER	10 00	х		Х				0	0	0	
D02-PRESIDENT-ELECT (23) SUE FRANTZ	10 00										
D02-VP FOR RESOURCES		Х						0	0	0	
(24) JANIE WILSON	10 00	х						0	0	0	
D02-VP FOR PROGRAMMING											

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the			
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee			Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations	
(26) DIANE FINLEY	10 00	х						0	0	0	
002-VP FOR MEMBERSHIP (1) BETH SCHWARTZ	10 00	X						0	0	0	
D02-VP FOR RECOGNITION AND AWARDS (2) SUSAN NOLAN	10 00							_			
D02-VP FOR DIVERSITY		Х						0	0	0	
(3) VICTOR BENASSID02-PAST PRESIDENT	10 00	x		х				0	0	О	
(4) NANCY DESS	5 00			х					0		
D03-PAST PRESIDENT 14-15 (5) DAVID WASHBURN	5 00	X		<u> </u>				0	0	0	
D03-PRESIDENT 14-15		×		Х				0	0	0	
(6) LEAH LIGHT D03-PRESIDENT ELECT 14-15	5 00	х		Х				0	0	0	
(7) EMILY ELLIOTTD03-SECRETARY-TREASURER 14-17	5 00	x		х				0	0	0	
(8) FRANK FARLEY	1 00	х						0	0	0	
D03-AT LARGE 12-15 (9) JONATHAN CRYSTAL	1 00	×						0	0	0	
D03-AT LARGE 12-15 (10) JEFFREY KATZ	1 00							0	0	0	
D03-AT LARGE 13-16 (11) CLARE PORAC	1 00	X						0	0	<u> </u>	
D03-AT LARGE 13-16 (12) PATRICIA STOKES	1.00	Х						0	0	0	
D03-AT LARGE 14-17	1 00	х						0	0	0	
(13) MICHAEL BERAN D03-AT LARGE 14-17	1 00	×						0	0	0	
(14) KAREN HOLLIS	1 00	х						0	0	0	
D03-COUNCIL REP 13-15 (15) BRUCE OVERMIER	1 00	X						0	0	0	
D03-COUNCIL REP 14-16 (16) ALEXANDRIA ZAKRZEWSKI	1 00										
D03-GRADUATE REP 14-16 (17) JESSIE PEISSIG	1 00	×						0	0	0	
D03-EARLY CAREER REP 14-15		х						0	0	0	
(18) SHALEIGH KWOK D03-EDITOR 14-16	5 00	x						0	0	0	
(19) NATHAN HOLTZ D03-WEBMASTER	5 00	x						0	0	0	
(20) RANDALL ENGLE	2 00	х						0	0	0	
D03-AWARDS 14-15 (21) AKIRA MIYAKE	1 00	x						0	0	0	
D03-FELLOWS 14-15 (22) WILLIAM HOCKLEY	5 00	^							0		
D03-PROGRAM 14-15 (23) STEPHEN WEST	2 00	Х						0	0	0	
D05-PAST-PRESIDENT-JAN 1-AUG 10, 2014	2 00	х		х				0	0	0	
(24) KEITH WIDAMAN D05-PAST-PRESIDENT-AUG 11-DEC 31, 2014,	2 00	х		х				0	0	0	
PRESIDENT-											

(A) Name and Title A verage hours per week (list any hours for related		Posit more th person and a	ion (nan o n is b	ne b	ox, u an of	nless ficer	ï	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(51) ABIGAIL PANTER D05-PRESIDENT-AUG 11-DEC 31, 2014, PRESIDENT-ELECT	5 00	х		х				0	0	0
(1) SCOTT HOFER D05-PRESIDENT-ELECT-AUG 11-DEC 31, 2014 (2) JAMES BOVAIRD	2 00	х		х				0	0	0
D05-COORDINATING OFFICER/SECRETARY-JAN 1-DEC 31, 2	3 00	x		х				0	0	0
(3) JODI CASABIANCA D05-FINANCIAL OFFICER-JAN 1-AUG 10, 2014 (4) RACHEL FOULADI	3 00	х		х				0	0	0
D05-FINANCIAL OFFICER-AUG 11-DEC 31, 2014 (5) DAVID HERZBERG	2 00	x		х				0	0	0
D05-ASSESSMENT SECTION REP-JAN 1-DEC 31, 2014 (6) DAVID MACKINNON	2 00	×						0	0	0
D05-EMS SECTION REP-JAN 1-DEC 31, 2014 (7) FREDERICK WERTZ D05-SOIP SECTION REP-JAN 1-DEC 31, 2014	2 00	х						0	0	0
(8) DEBBI BANDALOS D05-APA COUNCIL REP-JAN 1-DEC 31, 2014	2 00	х						0	0	0
(9) SUSANA URBINA D05-APA COUNCIL REP-JAN 1-DEC 31, 2014 (10) AMY SCHMIDT	3 00	х						0	0	0
D05-MEMBER AT LARGE-JAN 1-AUG 10, 2014 (11) MARK DANIEL	2 00	Х						0	0	0
D05-MEMBER AT LARGE-JAN 1-DEC 31, 2014 (12) BARBARA BYRNE	2 00	×						0	0	0
D05-MEMBER AT LARGE-JAN 1-DEC 31, 2014 (13) CAROLYN ANDERSON	2 00	×						0	0	0
D05-MEMBER AT LARGE-AUG 11-DEC 31, 2014 (14) LISA SAVAGE D06-PRESIDENT	3 00	х		х				0	0	0
(15) DAVID WASHBURN D06-PRESIDENT-ELECT	3 00	х		х				0	0	0
(16) R NICOLLE MATTHEWS D06-SECRETARY	2 00	х		х				0	0	0
(17) MICHAEL DOMJAN D06-APA COUNCIL REPRESENTATIVE (18) JESSE PURDY	2 00	х						0	0	0
D06-TREASURER (19) CHANA AKINS	1 00	X		X				0	0	0
D06-PAST-PRESIDENT (20) BRIAN CUSATO	1 00	×		X				0	0	0
D06-AWARDS COMMITTEE CHAIR (21) MARK KRAUSE	1 00	x						0	0	0
D06-MEMBER-AT-LARGE (22) MICHAEL BERAN D06-MEMBER-AT-LARGE	1 00	х						0	0	0
(23) NANCY DESS D06-FELLOWS COMMITTEE CHAIR	2 00	х						0	0	0
(24) KARYN FRICK D06-FELLOWS COMMITTEE	2 00	х						0	0	0

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours	(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-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the			
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations	
(76) MATT LATTAL	3 00	х						0	0	0	
D06-PROGRAM COMMITTEE CHAIR (1) JASON FUCHS	1 00	х						0	0	0	
D06-STUDENT REPRESENTATIVE (2) MEREDITH BASHAW D06-EARLY CAREER PSYCHOLOGIST REPRESENTATIVE	1 00	х						0	0	0	
(3) ALAN DANIEL	2 00	x						0	0	0	
D06-NEWSLETTER EDITOR (4) JAQUELINE ECCLES PHD	10 00									<u> </u>	
D07-PRESIDENT		x		Х				0	0	0	
(5) MICHAEL LAMB PHD D07-PRESIDENT-ELECT	10 00	х		х				0	0	0	
(6) KALI TRZESNIEWSKI PHD D07-SECRETARY	10 00	х		х				0	0	0	
(7) ANDREA GREENHOOT PHD	10 00	x		х				0	0	0	
D07-TREASURER (8) STEVEN PRITZKER	8 00										
D10-PRESIDENT, PRESIDENT-ELECT AND PROGRAM CHAIR		х		Х				0	0	0	
(9) PAUL SILVIA D10-PRESIDENT-ELECT AND PROGRAM CO-CHAIR	8 00	x		х				0	0	0	
(10) JAMES KAUFMAN	8 00	х		х				0	0	0	
D10-PAST-PRESIDENT, PRESIDENT (11) LISA SMITH	8 00	х		х				0	0	0	
D10-PAST-PRESIDENT (12) RONI REITER-PALMON	8 00	x		x				0	0	0	
D10-SECRETARY (13) HEATHER T SNYDER	8 00										
D10-TREASURER (14) MARIE FORGEARD	8 00	X		Х				0	0	0	
D10-PAST-GRADUATE STUDENT REP		Х						0	0	0	
(15) DANIEL HARRIS D10-GRADUATE STUDENT REP	8 00	x						0	0	0	
(16) ANNABEL COHEN D10-COUNCIL REP	8 00	х						0	0	0	
(17) THALIA GOLDSTEIN	8 00	х						0	0	0	
D10-PAST MEMBER-AT-LARGE (18) JONATHAN PLUCKER	8 00	х						0	0	0	
D10-PAST MEMBER-AT-LARGE (19) RUTH RICHARDS	8 00	x						0	0	0	
D10-MEMBER-AT-LARGE (20) SCOTT BARRY KAUFMAN	8 00										
D10-MEMBER-AT-LARGE (21) DANNY WEDDING	8 00	X						0	0	0	
D10-MEMBER-AT-LARGE (22) PAUL SOWDEN	8 00	Х						0	0	0	
D10-INTERNATIONAL REP		Х						0	0	0	
(23) DAVID TOLIN PHD D12-PRESIDENT	10 00	х		х				0	0	0	
(24) MARK SOBELL PHD	1 00	х		х				0	0	0	
D12-PAST PRESIDENT					1				<u> </u>	<u> </u>	

Compensated Employees, and Inde	pendent Cor	ntracto	rs			•	-		ı	
(A) Name and Title	(B) Average hours per week (list any hours	Posit more th person and a	ion (e nan o n is b	ne b	ox, ι an o	ınless fficer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(101) TERRENCE KEANE PHD	5 00	l x		×				0	0	0
D12-PRESIDENT ELECT	1.00									
(1) BARBARA CUBIC PHD	1 00	x		х				0	0	0
D12-TREASURER (2) JOHN LINTON PHD	1 00									
D12-SECRETARY		x		х				0	0	0
(3) DAVID A SMITH PHD	1 00									
D12-APA COUNCIL REP		X						0	0	0
(4) DANNY WEDDING PHD	1 00	V						0	0	0
D12-APA COUNCIL REP		Х						U	U	U
(5) GUILLERMO BERNAL PHD	1 00	l x						0	0	0
D12-APA COUNCIL REP								, and the second		
(6) MICHELE KAREL PHD	1 00	x						0	0	0
D12-SECTION 2 REP (7) DOUGLASS MENNIN PHD	1 00									
		×						0	0	0
D12-SECTION 3 REP (8) ELAINE BURKE PSYD	1 00									
D12-SECTION 4 REP	ļ	×						0	0	0
(9) FREDERICK LEONG PHD	1 00									
D12-SECTION 6 REP	ļ	×						0	0	0
(10) MARC HILLBRAND PHD	1 00	V						0	0	0
D12-SECTION 7 REP		Х						U	0	0
(11) SHARON BERRY PHD	1 00	l x						0	0	0
D12-SECTION 8 REP								-	-	
(12) PAUL ARBISI PHD	1 00	×						0	0	0
D12-SECTION 9 REP (13) NATALIA POTAPOVA	1 00									
		×						0	0	0
D12-SECTION 10 REP (14) CHERYL BOYCE PHD	1 00									
D12-MEMBER AT LARGE	ļ	×						0	0	0
(15) VICKI V VANDAVEER	20 00									
D13-PRESIDENT (2/14-2/15) / PRES-ELECT (2/13-2/14)	ļ	×		X				0	0	0
(16) JOHN P FENNIG	5 00	V		х				0	0	0
D13-PRESIDENT-ELECT (2/14-2/15)		Х						0	0	0
(17) LYNE B DESORMEAUX	5 00	l x		l _x				0	0	0
D13-PAST PRESIDENT (2/14-2/15)/ PRESIDENT (2/13-2/								-	-	
(18) AMY O NIEBERDING PHD	5 00	×		х				0	0	0
D13-PAST PRESIDENT (2/13-2/14) (19) CAROLYN F HUMPHREY PHD										
D13-SECRETARY (2/14-2/17), DOMAIN LEADER	5 00	x		х				o	0	0
(20) KAREN Y WILSON-STARKS	5 00									
		×		Х				0	0	0
D13-SECRETARY (12/10-2/14) (21) ADAM C BANDELLI PHD	10 00									
D13-TREASURER (2/12-2/15)		×		Х				0	0	0
(22) STEWART E COOPER PHD	5 00									
D13-COUNCIL REPRESENTATIVE (1/13-1/15)		Х			L			0	0	0
(23) RANDALL P WHITE PHD	5 00	x						0	0	0
D13-COUNCIL REPRESENTATIVE (1/12-1/14)								U	U	
(24) REBECCA A TURNER	5 00	x						0	0	0
D13-DOMAIN LEADER EXTERNAL RELAT (2/12-2/15)										

Compensated Employees, and Inde	1		rs			, .	,	ıp.oyees, i.i.g.		
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th persoi and a	ion (d nan o n is b	ne b oth ctor/	ox, u an of trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033 14130)	2/1033 14130)	related organizations
(126) KAREN E STEADMAN	5 00	х						0	0	0
D13-DOMAIN LEADER COMMUNITY (2/13-2/16) (1) MELANIE KINSER PHD	5 00									
D13-DOMAIN LEADER EDUCATION (2/14-2/17)		Х						0	0	0
(2) RODNEY L LOWMAN PHD D13-DOMAIN LEADER RESEARCH (7/11-2/17)	5 00	х						0	0	0
(3) THERESA THORKILDSEN	15 00	×		х				0	0	0
D15-PAST-PRESIDENT (2014-2015) (4) KAREN HARRIS	15 00			.,						
D15-PRESIDENT (2014-15) (5) NANCY PERRY	2 00	X		X				0	0	0
D15-INCOMING PRESIDENT (2014-15) (6) HELENROSE FIVES	5 00	X		X				0	0	0
D15-SECRETARY (2011-2014) (7) JI HONG	6 00	X		X				0	0	0
D15-CURRENT SECRETARY (2014-17) (8) MICHELE GILL	7 00	X		Х				0	0	0
D15-TREASURER (2013-16) (9) TIMOTHY CURBY	2 00	Х		х				0	0	0
D15-REP TO APA COUNCIL (2013-16)		×						0	0	0
(10) HEATHER DAVIS D15-MEMBER AT LARGE (2013-15)	1 00	х						0	0	0
(11) DIONNE CROSS D15-MEMBER AT LARGE (2012-15)	1 00	х						0	0	0
(12) ROB KLASSEN D15-MEMBER AT LARGE (2014-17)	1 00	х						0	0	0
(13) ANASTASIA KITSANTIS D15-PAST MEMBER AT LARGE (2011-14)	2 00	х						0	0	0
(14) ELIZABETH J DOLL D16-COUNCIL REPRESENTATIVE	5 00	х						0	0	0
(15) FRANK C WORRELL PHD D16-COUNCIL REPRESENTATIVE	5 00	х						0	0	0
(16) TAMMY L HUGHES PHD D16-COUNCIL REPRESENTATIVE	5 00	х						0	0	0
(17) JESSICA A HOFFMAN PHD D16-VICEPRES, MEMBERSHIP	5 00	х						0	0	0
(18) VINCENT C ALFONSO PHD D16-PAST PRESIDENT	5 00	х		х				0	0	0
(19) LINDA A REDDY D16-PRESIDENT	5 00	х		х				0	0	0
(20) JAMES C DIPERNA PHD D16-PRESIDENT-ELECT	5 00	х		х				0	0	0
(21) AMANDA SULLIVAN PHD	5 00	х		х				0	0	0
D16-SECRETARY (22) MARK D TERJESEN	5 00	х		х				0	0	0
D16-TREASURER (23) SCOTT A METHE PHD	5 00	.,						_	_	_
D16-VICEPRES CONV&PR (JAN DUE LATE 2014) (24) CATHERINE A FIORELLO PHD	5 00	X						0	0	0
D16-VICEPRES E&T&SCIAFFRS		X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors (A) (C) (D) (E) (F) Name and Title Reportable Average Position (do not check Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation organization (Worganizations (Wany hours and a director/trustee) from the 2/1099-MISC) 2/1099-MISC) organization and for related Individual to or director Highest employe Office Former organizations institutional related below organizations emplo)ee dotted line) t compensated .ee trustae l Trustee (151) AMANDA M VANDERHEYDEN PHD 5 00 Х 0 0 0 D16-VICEPRES SOC, ETHICAL & EMA (1) MELISSA PEARROW 5 00 Χ 0 0 0 D16-VICE PRESIDENT PUB&COMM (2) ROBIN CODDING 5 00 Х 0 0 0 D16-VICEPRES CONV&PR (LATE 2014 TO DEC 2014) 5.00 (3) AMANDA B CLINTON PHD Χ 0 0 0 D16-VICEPRES PROFESSIONAL AFRS (4) SHARON BOWMAN 15 00 Χ Х 0 0 0 D17-PAST PRESIDENT / 8-9-14 TO 12-31-14, PRESIDENT (5) MICHAEL MOBLEY 20 00 Χ 0 0 0 Χ D17-PRESIDENT / 8-9-14 TO 12-31-14, PRESIDENT ELEC (6) ANDY HORNE 15 00 Х Χ 0 0 0 D17-PAST PRESIDENT / 1-1-14 TO 8-9-14 (7) JIM LICHTENBERG 15 00 Х Х 0 0 0 D17-PRESIDENT ELECT / 8-9-14 TO 12-31-14 (8) KRISTIN PERRONE-MCGOVERN 10 00 Χ Х 0 0 0 D17-SECRETARY / 1-1-14 TO 8-9-14 (9) SUZANNE LEASE 10 00 Χ 0 Х 0 0 D17-SECRETARY / 8-9-14 TO 12-31-14 10 00 (10) STEPHEN COOK Χ Х 0 0 0 D17-TREASURER / 1-1-14 TO 12-31-14 (11) KATHARINE HAHN OH 10 00 Χ 0 0 0 D17-VP COMMUNICATION / 1-1-14 TO 12-31-14 (12) LISA SPANIERMAN 10 00 Χ 0 0 0 D17-VP SCIENTIFIC AFFAIRS / 1-1-14 TO 12-31-14 (13) MARIE MIVILLE 10 00 Χ 0 0 0 D17-VP EDUCATION/TRAINING / 1-1-14 TO 12-31-14 (14) TRACI CALLANDRILLO 10 00 0 Χ 0 0 D17-VP PROFESSIONAL PRACTICE / 1-1-14 TO 12-31-14 (15) MICHELE C BOYER 10 00 Χ 0 0 0 D17-VP DIVERSITY/PUBLIC INTEREST / 1-1-14 TO 8-9-1 (16) ANNELIESE SINGH 10 00 0 0 0 Х D17-VP DIVERSITY/PUBLIC INTEREST / 8-9-14 TO 12-31 10 00 (17) JAMES LICHTENBERG Χ 0 0 0 D17-COUNCIL REPRESENTATIVE / 1-1-14 TO 8-9-14 (18) CHANGMING DUAN 10 00 Χ 0 0 0 D17-COUNCIL REPRESENTATIVE / 8-9-14 TO 12-31-14 (19) BARRY CHUNG 10 00 Χ 0 0 0 D17-COUNCIL REPRESENTATIVE / 1-1-14 TO 12-31-14 (20) ROBERTA NUTT 10 00 Χ 0 0 0 D17-COUNCIL REPRESENTATIVE / 1-1-14 TO 12-31-14 (21) BRITTAN DAVIS 10 00 0 0 0 Х D17-SAS REPRESENTATIVE / 1-1-14 TO 12-31-14 (22) SNEHA PEITRE 10 00 Χ 0 0 0 D17-SAS REPRESENTATIVE / 1-1-14 TO 8-9-14 (23) ASHLEY OLIVER 10 00 0 0 Х 0 D17-SAS REPRESENTATIVE / 8-9-14 TO 12-31-14 5 00 (24) ANNE KLEE Χ Χ 0 0

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D18-PAST PRESIDENT (8/14-12/14), PRESIDENT (1/14-7

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Inde				II u	SIC	cs, r	(C)	Linployees, riigi	lest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (d nan o n is b	ne booth a	ox, u an of trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Office	Ke, emplojee	Highest compensated employee	Former	2/1099-1413C)	2/1099-11130)	related organizations
(176) FEMINA VARGHESE	5 00	х		Х				0	0	0
D18-PRESIDENT (8/14-12/14), PRESIDENT ELECT (1/14-(1) JACQUELINE WALL	5 00									
D18-PAST PRESIDENT (1/14-7/14)		X		Х				0	0	0
(2) TIM CARMODY D18-PRESIDENT ELECT (8/14-12/14), VA (1/14-7/14)	5 00	х		х				0	0	0
(3) MARY LU BUSHNELL D18-SEC/TREASURER (1/14-12/14)	5 00	x		х				0	0	0
(4) JOHN MARRELLI	5 00	x						0	0	0
D18-COMMUNITY & STATE (5) WILL NEWBILL	5 00									
D18-COMMUNITY & STATE		Х						0	0	0
(6) SHEILA BRANDT D18-CRIMINAL JUSTICE (1/14-12/14)	5 00	х						0	0	0
(7) VIRGINIA HAYES D18-POLICE & PUBLIC	5 00	х						0	0	0
(8) MICHAEL TILUS	5 00	х						0	0	0
D18-PSYCHOLOGISTS IN INDIAN (9) HOWARD STEINBERG	5 00							_		
D18-VA (8/14-12/14) (10) SHIRLEY GLYNN	5 00	X						0	0	0
D18-SMI/SED (1/14-12/14)		X						0	0	0
(11) DOLLY SADOW D18-COUNCIL REP (1/14-12/14)	5 00	х						0	0	0
(12) LORRAINE GREENE	5 00	x						0	0	0
(13) THOMAS WILLIAMS	3 00	x		x				0	0	0
D19-PRESIDENT (14) ANN LANDES	2 00	x		x				0	0	0
D19-PRESIDENT-ELECT (15) KATHRYN LINDSEY	3 00			<u> </u>				0	0	0
D19-PAST PRESIDENT	3 00	х		х				0	0	0
(16) ERIC SURFACED19-SECRETARY	3 00	x		х				0	0	0
(17) SCOTT JOHNSTON	3 00	х		х				0	0	0
D19-TREASURER (18) JOEL DUBENITZ	1 00	X						0	0	0
D19-MEMBER AT LARGE (19) NATHAN AINSPAN	2 00							_		
D19-MEMBER AT LARGE (20) CHRISTOPHER MURPHY	1 00	X						0	0	0
D19-MEMBER AT LARGE (21) LARRY JAMES	3 00	Х						0	0	0
D19-COUNCIL REPRESENTATIVE		х						0	0	0
(22) SARA J CZAJA D20-PRESIDENT	3 00	х		х				0	0	0
(23) HARVEY STERNS	2 00	х		х				0	0	0
D20-PRESIDENT-ELECT (24) WILLIAM E HALEY	2 00	X		x				0	0	0
D20-PAST PRESIDENT		_ ^							0	

Compensated Employees, and Inde					3.0	C3, I	·c y	ı inproyecs, riigi	ı	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th persol and a	ion (d nan o n is b	ne booth a	ox, u an of trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke, emplo,ee	Highest compensated employee	Former	2/1099 MISC)	2/1033 14130)	related organizations
(201) JOANN MONTEPARE	2 00	x		Х				0	0	0
D20-SECRETARY (1) JOSEPH E GAUGLER	3 00									
D20-TREASURER		x		х				0	0	0
(2) K WARNER SCHAIE	1 00	l ,						0	0	0
D20-COUNCIL REPRESENTATIVE		X						U	0	0
(3) SUSAN WHITBOURNE	1 00	x						0	0	0
D20-COUNCIL REPRESENTATIVE (4) PATRICIA A PARMALEE	1 00									
D20-COUNCIL REPRESENTATIVE		х						0	0	0
(5) KATHERINE L FIORI	1 00	x						0	0	0
D20-MEMBER AT LARGE								Ů	0	
(6) ANN M PEARMAN	1 00	x						0	0	0
D20-MEMBER AT LARGE (7) JANE M BERRY	1 00									
D20-MEMBER AT LARGE		X						0	0	0
(8) JENNIFER MOYE	1 00	x						0	0	0
D20-MEMBER AT LARGE								Ů	•	
(9) DAVID CHIRIBOGA	1 00	x						0	0	0
D20-MEMBER AT LARGE (10) ADAM DAVEY	1 00									
D20-MEMBER AT LARGE		X						0	0	0
(11) KAREN F KOPERA-FRYE	1 00	x						0	0	0
D20-MEMBER AT LARGE								Ů		
(12) A LYNN SNOW	1 00	x						0	0	0
D20-MEMBER AT LARGE (13) ERICKA ROVIRA	2 00									
D21-PRESIDENT (AUG - DEC 2014), PRESIDENT ELECT	2 00	х		Х				0	0	0
(14) FRANK DREWS	2 00			,				0		
D21-PAST PRESIDENT (AUG - DEC 2014), PRESIDENT (JA		×		Х					0	0
(15) DOUGLAS WIEGMANN	2 00	x		х				0	0	0
D21-PRESIDENT ELECT (AUG - DEC 2014)								Ů		
(16) BETH BLICKENSDERFER	3 00	х		х				0	0	О
D21-SECRETARY - TREASURER (17) ANNE MCLAUGHLIN	1 00									
D21-MEMBER-AT-LARGE		X						0	0	0
(18) RICHARD CHONG PAK	1 00	х						0	0	0
D21-MEMBER-AT-LARGE								Ů		
(19) ROBERT PROCTOR	1 00	х						0	0	0
D21-MEMBER-AT-LARGE (20) DAN MORROW	1 00									
D21-PAST PRESIDENT (JAN - AUG 2014)		X		Х				0	0	0
(21) GITENDRA USWATTE	2 00									
D22-PRESIDENT AUG-DEC 2014 / PRES-ELECT JAN-JUL 20		X		X				0	0	0
(22) MARY G BROWNSBERGER	1 00									
D22-PAST PRESIDENT AUG-DEC 2014 / PRESIDENT JAN-		x		х				0	0	0
(23) TESSA HART	1 00				-					
D22-PAST PRESIDENT JAN-JUL 2014		×		х				0	0	0
(24) KATHLEEN BROWN	1 00	x		х				0	0	0
D22-PRESIDENT ELECT AUG-DEC 2014										<u> </u>

Compensated Employees, and Inde	ependent Cor	itracto	ors		310	cs, r	ce y		ı	
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th perso and a	ion (d nan o n is b	ne b oth	ox, ι an o	ınless fficer	S	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(226) AARON TURNER	2 00	x		Х				0	0	0
D22-TREASURER JAN-DEC 2014 (1) JOSEPH RATH	1 00									
D22-SECRETARY AUG-DEC 2014		x		х				0	0	0
(2) LISA BRENNER D22-SECRETARY JAN-JUL 2014	1 00	х		х				0	0	0
(3) GLENN CURTIS	1 00	,,								
D22-MEMBER AT LARGE JAN-DEC 2014		X						0	0	0
(4) NATALIE DONG D22-MEMBER AT LARGE JAN-DEC 2014	1 00	х						0	0	0
(5) EUN-JEONG LEE	1 00	х						0	0	0
(6) NANCY MERBITZ D22-MEMBER AT LARGE AUG-DEC 2014	1 00	х						0	0	0
(7) STEPHANIE REID-ARNDT D22-MEMBER AT LARGE AUG-DEC 2014	1 00	х						0	0	0
(8) BETH RUSH	1 00	V						0		0
D22-MEMBER AT LARGE JAN-DEC 2014 (9) SUSANNE BRUYERE	1 00	X							0	0
D22-MEMBER AT LARGE JAN-AUG 2014 (10) PAMELA FITZPATRICK	1 00	X						0	0	0
D22-MEMBER AT LARGE JAN-AUG 2014 (11) KIMBERLY GORGENS	1 00	X						0	0	0
D22-COUNCIL REPRESENTATIVE JAN-DEC 2014		х						0	0	0
(12) LINDA MONA D22-COUNCIL REPRESENTATIVE JAN-DEC 2014	1 00	х						0	0	0
(13) KRYSTAL DRAKE D22-ECP REPRESENTATIVE JAN-DEC 2014	1 00	х						0	0	0
(14) ABBEY HUGHES	1 00	х						0	0	0
D22-STUDENT REPRESENTATIVE JAN-DEC 2014 (15) MARK FREEMAN	10 00	х		Х				0	0	0
D24-PRESIDENT (16) AMY FISHER SMITH	5 00	X		X				0	0	0
D24-TREASURER (17) CHRISTOPHER RAMEY	5 00									
D24-SECRETARY		х		Х				0	0	0
(18) LISA OSBECKD24-COUNCIL REP	5 00	x		х				0	0	0
(19) R STEVE HARRIST D24-PRESIDENT ELECT	5 00	х		Х				0	0	0
(20) SARAH HICKINBOTTOM	5 00	х						0	0	0
D24-MEMBER AT LARGE (21) DAVID GOODMAN	5 00	X						0	0	0
D24-MEMBER AT LARGE (22) NAOMI LEE	5 00									
D24-MEMBER AT LARGE		X						0	0	0
(23) GREGG HENRUIQUES D24-MEMBERSHIP CHAIR	5 00	х						0	0	0
(24) SAMUEL DOWNS	5 00	Х						0	0	0
D24-HISTORIAN	1							<u> </u>		<u> </u>

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors (D) (E) (F) (A) (B) Name and Title Average Position (do not check Reportable Reportable Estimated amount more than one box, unless hours per compensation compensation of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations (Wfrom the 2/1099-MISC) 2/1099-MISC) organization and for related Former Highest compensated employee Individual is or director <u>9</u> 20 100 organizations Institutional Trustee related below emplo) ee organizations dotted line) trustae (251) BRADY WIGGINS 5 00 Χ 0 D24-EARLY CAREER REP 5 00 (1) FRANK RICHARDSON 0 0 Х D24-ELDER AT LARGE (2) THOMAS TEO 10.00 Х 0 0 1,500 D24-EDITOR, JOURNAL JTPP (3) TYLER LEFEVOR 5 00 D24-STUDENT REP 0 0 Х 0 (4) JEFF REBER 5 00 Χ Χ 0 0 0 D24-PAST PRESIDENT (5) AMY ODUM 8 00 Χ 0 Χ D25-PRESIDENT (6) MARK REILLY 8 00 Χ Χ 0 0 0 D25-PRESIDENT ELECT (7) ERIC A JACOBS 8 00 Х Х 0 0 0 D25-SECRETARY TREASURER / PAST PRESIDENT (8) LARRY ALFERINK 8 00 D25-COUNCIL REP Χ 0 0 0 (9) CYNTHIA ANDERSON 8 00 Χ 0 0 0 D25-EC MEMBER AT LARGE (10) BRUCE THYER 8 00 Χ 0 0 D25-EC MEMBER AT LARGE (11) DEBRA SUE PATE 5 00 Х 0 Х 0 0 D26-PRESIDENT (12) HENDERIKUS STAM 2 00 Х Χ 0 0 0 D26-PRESIDENT-ELECT (13) ALEXANDRA RUTHERFORD 3 00 Χ 0 0 0 Х D26-PAST PRESIDENT (14) VINCENT W HEVERN 5 00 Χ Χ 0 0 0 D26-SECRETARY-TREASURER (15) DEBORAH JOHNSON 6 00 0 Χ D26-APA COUNCIL REPRESENTATIVE & PROGRAM CHAIR (16) WADE PICKREN 10 00 Χ 0 0 0 D26-JOURNAL OFFICER/EDITOR (17) DONALD DEWSBURY 3 00 Х 0 0 0 D26-ARCHIVIST (18) RUSS KOSITS 2 00 Х O 0 0 D26-MEMBERSHIP CHAIR (19) ARLIE BELLIVEAU 2 00 Χ 0 0 0 D26-STUDENT REPRESENTATIVE (20) C JAMES GOODWIN 1 00 Χ 0 0 0 D26-FELLOWS CHAIR (21) INGRID FERRERAS 2 00 0 Χ 0 0 D26-ELECTRONIC COMMUNICATIONS EDITOR (22) ELLEN WALKER PHD 6 00 Х Χ 0 0 0 D28-PRESIDENT (23) ANTHONY LIGOURI PHD 2 00 D28-PAST PRESIDENT Χ 0 0 Х 0 (24) WILLIAM STOOPS PHD 3 00 D28-PRESIDENT ELECT Х Χ 0 0

Compensated Employees, and Inde						, -	,	ıp.oyees, i.i.g.		
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne b oth ctor/	ox, u an of trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former			related organizations
(276) JOHN GRABOWSKI PHD	1 00	x						0	0	0
D28-COUNCIL REPRESENTATIVE (1) MATTHEW JOHNSON PHD								_	_	
	2 00	х						0	0	О
D28-MEMBER-AT-LARGE (2) CYNTHIA CRAWFORD PHD	1 00									
D28-MEMBER-AT-LARGE		X						0	0	0
(3) KATIE SAULSGIVER PHD	1 00	x						0	0	0
D28-MEMBER-AT-LARGE								0	Ů.	
(4) KELLY DUNN PHD	2 00	x		x				0	0	0
D28-SECRETARY (5) JANE B ACRI PHD	1 00									
D28-TREASURER		х		х				0	0	0
(6) RAYMOND DIGIUSEPPE D29-PRESIDENT	2 00	х		х				0	0	0
(7) WILLIAM STILES	1 00	х		х				0	0	0
D29-PAST PRESIDENT				ļ				_		
(8) BARRY FARBER	1 00	х		х				0	0	0
D29-SECRETARY (9) JEFFREY ZIMMERMAN	2 00									
D29-TREASURER		Х		Х				0	0	0
(10) RODNEY GOODYEAR D29-PRESIDENT-ELECT	1 00	х		х				0	0	0
(11) ARMAND CERBONE	1 00	x						0	0	0
D29-DIRECTOR (12) JESSE OWEN	1 00									
D29-DIRECTOR		х						0	0	0
(13) BEVERLY GREENE	1 00							_		
D29-DIRECTOR		X						0	0	0
(14) JAIRO FUERTES	1 00	x						0	0	0
D29-DIRECTOR (15) BARBARA THOMPSON	1 00									
D29-DIRECTOR		х						0	0	0
(16) SUSAN WOODHOUSE	1 00							0		
D29-DIRECTOR		X						0	0	0
(17) ANN JUDGE	1 00	x						0	0	0
D29-DIRECTOR (18) RAYNA MARKIN	1 00									
D29-DIRECTOR		х						0	0	0
(19) MARGARET TOBIAS	1 00							_		
D29-STUDENT REPRESENTATIVE		Х						0	0	0
(20) JOHN NORCROSS	1 00	x						0	0	0
D29-COUNCIL REPRESENTATIVE (21) JEAN CARTER	1 00									
D29-COUNCIL REPRESENTATIVE		х						0	0	0
(22) ARREED BARABASZ	2 00									
D30-PAST PRESIDENT		Х	L	Х				0	0	0
(23) GARY ELKINS	2 00	x		х				0	0	0
D30-PRESIDENT (24) STEFFANIE SCHILDER		ļ	_	Ë			_			
	2 00	x		×				0	0	0
D30-PRESIDENT-ELECT	1	<u>I</u>				1		<u> </u>	I	<u> </u>

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors (D) (E) (F) (A) Name and Title Average Position (do not check Reportable Reportable Estimated amount more than one box, unless hours per compensation compensation of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations (Wfrom the 2/1099-MISC) 2/1099-MISC) organization and for related Highest employe Former Individual is or director <u>9</u> 20 100 organizations related nstitutional below emplo) ee organizations dotted line) t compensated ee trustee Trustee (301) JOE GREEN 2 00 Χ 0 D30-AWARDS CHAIR (PAST PAST PRESIDENT) 2 00 (1) DONALD MOSS Х 0 0 0 Х D30-APA COUNCIL REPRESENTATIVE (PAST TREASURER) (2) ZOLTAN KEKECS 2 00 _____ Х Χ 0 0 0 D30-TREASURER (3) CIARA CHRISTENSEN 2 00 Х 0 0 0 Х D30-SECRETARY (4) GUY MONTGOMERY 2 00 Χ 0 0 0 D30-MEMBER AT LARGE (5) JIM COUNCIL 2 00 Χ D30-MEMBER AT LARGE (6) LEN MILLING 2 00 Χ 0 0 0 D30-MEMBER AT LARGE (7) DR ANGELA O HERZOG 5.00 Х Χ 0 0 0 D31-PRESIDENT (8) DR CATHY MCDANIELS-WILSON 5 00 D31-PRESIDENT-ELECT Χ Χ 0 0 0 (9) DR SALLIE E HILDEBRANDT 5 00 Χ Χ 0 0 0 D31-PAST-PRESIDENT (10) DR ERICA WISE 2 00 Χ Х 0 0 D31-SECRETARY (11) DR NANCI C KLEIN 5 00 Х 0 Х 0 0 D31-TREASURER (12) DR MERA KACHGAL 2 00 Х 0 0 0 D31-MEMBER-AT-LARGE (13) DR LESLIE RILEY 2 00 0 0 0 Х D31-MEMBER-AT-LARGE (14) DR LISA GROSSMAN 2 00 Χ 0 0 0 D31-APA COUNCIL REPRESENTATIVE (15) DIANNE FITZGERALD-VERBONITZ 2 00 0 Χ D31-CESPPA REPRESENTATIVE (16) BRENT ROBINS 5 00 Χ Χ 0 0 0 D32-PRESIDENT (1 YR) (17) LOUIS HOFFMAN 3 00 Х Χ 0 0 0 D32-PAST-PRESIDENT (1 YR) (18) KRISHNA KUMAR 3 00 Х Χ O 0 0 D32-PRESIDENT ELECT_(1 YR) (19) RICH BARGDILL 3 00 Χ Χ 0 0 0 D32-SECRETARY (3 YRS) (20) KEVIN KEENAN 3 00 Χ Χ 0 0 0 D32-TREASURER (3 YRS) (21) FRANK FARLEY 2 00 0 Χ 0 0 D32-COUNCIL REPRESENTATIVE (1 YR) (22) SCOTT CHURCHILL 2.00 Х 0 0 0 D32-COUNCIL REPRESENTATIVE (1 YR) (23) DIANE BLAU 1 00 0 0 Х 0 D32-MEMBER AT LARGE (3 YRS) (24) LISA COSGROVE 1 00 Χ 0 0 D32-MEMBER AT LARGE (3 YRS)

Compensated Employees, and Inde					S.C.	C3, I	c y	ı inproyecs, riigi	ı	
(A) Name and Title	(B) Average hours per week (list any hours	Posit more th persor	ion (d nan o n is b	ne b oth	ox, ι an o	ınless fficer	S	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Ke) emplojee		Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(326) DAVID LUKOFF	1 00	х						0	0	0
D32-MEMBER AT LARGE (3 YRS) (1) SHAWN RUBIN D32-MEMBER AT LARGE (3 YRS)	1 00	х						0	0	0
(2) DONNA ROCKWELL	1 00	х						0	0	0
D32-MEMBER AT LARGE (3 YRS) (3) MAURENE O'HARA	1 00	X						0	0	0
D32-MEMBER AT LARGE (3 YRS) (4) LAURA LEE MCINTYRE PHD	5 00	X						0	0	0
D33-PRESIDENT (5) ANNA ESBENSEN PHD	1 00			Х				0	0	0
D33-PRESIDENT-ELECT (6) SHARON KRINSKY-MCHALE PHD		Х		Х				0	0	0
D33-PRESIDENT-ELECT DESIGNATE, SECRETARY-	1 00	x		х				0	0	0
TREASURER (7) JASON BAKER PHD	1 00	×						0	0	0
D33-MEMBER-AT-LARGE (8) SIGAN HARTLEY PHD	1 00									
D33-MEMBER-AT-LARGE (9) JAMES MULICK PHD	1 00	X						0	0	0
D33-REP TO APA COUNCIL		х						0	0	0
(10) HILARY HURST BUSH D33-STUDENT REPRESENTATIVE	1 00	х						0	0	0
(11) GEOVANNA RODRIQUEZ D33-STUDENT REPRESENTATIVE	1 00	×						0	0	0
(12) CAMERON NEECE PHD	2 00	х						0	0	0
D33-NEWSLETTER CO-EDITOR (13) DAVID MICHALEC PHD	2 00	Х						0	0	0
D33-NEWSLETTER CO-EDITOR (14) BRUCE BAKER PHD	1 00	X						0	0	0
D33-FELLOWS CHAIR (15) ERIC BUTTER PHD	5 00									
D33-MEMBERSHIP CHAIR (16) KATY MEZHER PHD	4 00	×						0	0	0
D33-ASSOCIATE MEMBERSHIP CHAIR		х						0	0	0
(17) JAN BLACHER PHD D33-PAST PRESIDENT/ELECTIONS CHAIR	1 00	×		х				0	0	0
(18) THOMAS DOHERTY D34-PRESIDENT JAN-JUL 2014, PAST PRES AUG - DEC 20	10 00	х		х				0	0	0
(19) BRITAIN SCOTT D34-PRES-ELECT JAN-JULY 2014, PRESIDENT AUG-DEC	10 00	х		х				0	0	0
(20) ELISE AMEL	8 00	×		×				0	0	0
D34-PRESIDENT-ELECT AUG-DEC 2014 (21) SUSAN CLAYTON	7 00			.,				_		
D34-APA COUNCIL REP 2014 (22) JOHN FRASER	7 00	X						0	0	0
D34-SECRETARY AUG-DEC 2014 (23) JOSEPH JUHAZ	7 00	Х		Х				0	0	0
D34-SECRETARY JAN-JULY 2014		х		х				0	0	0
(24) BETH KARLIN D34-TREASURER 2014	5 00	x		х				0	0	0
	1				-	1		1	I	<u> </u>

Compensated Employees, and Inde	pendent Cor	tracto	rs			•	-		I	1
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne b oth ctor/	ox, u an of trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former			related organizations
(351) EZRA MARKOWITZ	5 00	х						0	0	0
D34-MEMBER AT LARGE 2014								Ů	Ů	
(1) NANCY A PIOTROWSKI	5 00	x						0	0	0
D34-MEMBER AT LARGE 2014 (2) JOSEPH AMENDAREZ	7 00									
D34-STUDENT COMMITTEE CHAIR JAN-JULY 2014		Х						0	0	0
(3) MARY BETH MANNARIO	7 00	x						0	0	0
D34-MEMBERSHIP CHAIR, 2014 (4) DERRICK SEBREE	7 00									
D34-STUDENT COMMITTEE CHAIR, AUG-DEC 2014		х						0	0	0
(5) PAM REMER	4 00	X		x				0	0	0
D35-PAST PRESIDENT/JAN -AUG, PAST PAST PRES/AUG - (6) LYNN COLLINS	5 00									
D35-PRESIDENT/JAN-AUG, PAST PRES AUG-DEC (7) MAUREEN MCHUGH	5 00	X		X				0	0	0
D35-PRESIDENT ELECT/JAN-AUG, PRESIDENT/AUG-DEC		х		Х				0	0	0
(8) MONIQUE CLINTON-SHERROD D35-SECRETARY/JAN-DEC	5 00	×		х				0	0	0
(9) MARGARET SIGNORELLA	5 00	х		х				0	0	0
D35-TREASURER/JAN-DEC (10) BRAVADA GARRETT-AKINSANYA	3 00	X		×				0	0	0
D35-PRESIDENT ELECT/AUG-DEC (11) NATALIE PORTER	5 00	_ ^ 							•	
D35-COUNCIL REPRESENTATIVE/JAN-DEC (12) MARTHA BANKS	5 00	×						0	0	0
D35-COUNCIL REPRESENTATIVE/JAN-DEC	3 00	х						0	0	0
(13) LAUREN MIZOCK D35-PROFESSIONAL REPRESENTATIVE/JAN-DEC	1 00	×						0	0	0
(14) JESSICA JOSEPH	1 00	x						0	0	0
D35-STUDENT REPRESENTATIVE/JAN-DEC (15) LULA BEATTY	1 00									
D35-PARLIAMENTARIAN/JAN-DEC		х						0	0	0
(16) WENDI WILLIAMS D35-SECTION 1 PRESIDENT/JAN-DEC	3 00	×						0	0	0
(17) YVETTE FLORES	3 00	х						0	0	0
D35-SECTION 3 PRESIDENT/JAN-DEC (18) JENNIFER VENCIL	3 00	x						0	0	0
D35-SECTION 4 PRESIDENT/JAN-DEC (19) YUYING TSONG	3 00									
D35-SECTION 5 PRESIDENT/JAN-DEC (20) WENDY PETERS	3 00	×						0	0	0
D35-SECTION 6 PRESIDENT/JAN-DEC	3 00	х						0	0	0
(21) KEVIN LADD D36-PRESIDENT ELECT/PRESIDENT	2 00	х		х				0	0	0
(22) MICHAEL NIELSEN	2 00	х		х				0	0	0
D36-PRESIDENT ELECT (23) ELIZABETH HALL	1 00									
D36-PRESIDENT/PAST PRESIDENT		Х		Х				0	0	0
(24) GINA MAGYAR-RUSSELL D36-SECRETARY	1 00	x		x				0	0	0

Compensated Employees, and Inde	pendent Coi	ntracto	rs					1	ı	ı ı
(A) Name and Title	(B) Average hours per week (list any hours	Posit more th person and a	ion (e nan o n is b	ne b oth	ox, ι an o	ınless fficer	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(376) JON WEBB	1 00					<u> </u>				
		×		Х				0	0	0
D36-TREASURER (1) JULIE EXLINE	1 00									
D36-PAST PRESIDENT (2) DAVID WANG	1 00	Х		Х				0	0	0
		×						0	0	0
D36-MEMBER-AT-LARGE/PROGRAM CHAIR (3) INNOCENT OKOZI	1 00									
D36-MEMBER-AT-LARGE		×						0	0	0
(4) CAROLYN BARRY	1 00									
D36-MEMBER-AT-LARGE		X						0	0	0
(5) WILLIAM HATHAWAY	1 00									
D36-COUNCIL MEMBER		×						0	0	0
(6) LISA MILLER	1 00									
D36-COUNCIL MEMBER		X						0	0	0
(7) CARISSA DWIWARDANI	1 00									
D36-MEMBERSHIP CHAIR		X						0	0	0
(8) THERESA TISDALE	1 00									
D36-MEMBER-AT-LARGE		X						0	0	0
(9) JOHN LOCHMAN PHD	5 00									
D37-PAST PRESIDENT		X		Х				0	0	0
(10) SHARON PORTWOOD PHD	5 00									
D37-PRESIDENT		X		Х				0	0	0
(11) MARY ANN MCCABE PHD	5 00									
D37-PRESIDENT-ELECT		X		Х				0	0	0
(12) AMY DAMASHEK PHD	5 00									
D37-SECRETARY		X		Х				0	0	0
(13) WILLIAM RAE PHD	5 00	·						_	_	_
D37-TREASURER		X		X				0	0	0
(14) ANITA THOMAS PHD	5 00									
D37-MEMBER-AT-LARGE, TASK FORCE COORDINATOR &		×						0	0	0
DIVE (15) MARGARET STEVENSON PHD										
	5 00	l x						0	0	
D37-MEMBER-AT-LARGE, COMMUNICATIONS AND TECHNOLOGY		^							ů	
(16) SANGEETA PARIKSHAK PHD	5 00							_	_	_
D37-MEMBER-AT-LARGE, ADVOCACY		X						0	0	0
(17) PAULA FITE PHD	5 00									
D37-MEMBER-AT-LARGE, EARLY CAREER PSYCHOLOGISTS		X						0	0	0
(18) SANDRA BISHOP-JOSEF PHD	5 00	.,								
D37-REPRESENTATIVE TO APA		X						0	0	0
(19) JENNIFER WYATT KAMINSKI PHD	5 00	V						0	0	
D37-PRESIDENT, SECTION ON CHILD MALTREATMENT (20) ANNETTE L STANTON	3 00	X						U	0	0
D38-PAST-PRESIDENT		×		Х				0	0	0
(21) KEVIN S MASTERS	5 00									
D38-PRESIDENT		Х		Х				0	0	0
(22) KIM DIXON	3 00									
D38-PRESIDENT-ELECT		×		Х				0	0	0
(23) MARK A LUMLEY	3 00									
D38-TREASURER-SECRETARY (24) MARTITA LOPEZ	1 00	Х		Х				0	0	0
		x						0	0	0
D38-MEMBER-AT-LARGE	<u> </u>				<u> </u>	<u> </u>	<u> </u>			<u> </u>

Compensated Employees, and Inde						, .	,	ıp.oyees, mg.		
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th perso and a	ion (d nan o n is b	ne b oth ctor/	ox, ι an o ⁄trus	ınless fficer tee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2,1033 11307	2/1033 11130)	related organizations
(401) JUSTIN NASH	1 00	x						0	0	0
D38-MEMBER-AT-LARGE	1.00							Ů	, and the second	
(1) ROBERT KERNS	1 00	x						0	0	0
D38-MEMBER-AT-LARGE (2) ELIZABETH KLONOFF	1 00									
D38-COUNCIL REPRESENTATIVE		X						0	0	0
(3) HELEN COONS	1 00	V							_	0
D38-COUNCIL REPRESENTATIVE		X						0	0	0
(4) FRANK SUMMERS	10 00	x		х				0	0	0
D39-PRESIDENT (1/13-12/31/14) (5) WILLIAM MACGILLIVRAY	5 00									
D39-PAST PRESIDENT (1/13-12/31/14)		х		х				0	0	0
(6) MARILYN CHARLES	5 00									
D39-PRESIDENT-ELECT (1/14-12/31/14)		Х		Х				0	0	0
(7) DANA CHARATAN	10 00	l x		x				0	0	0
D39-SECRETARY (1/13-12/31/15) (8) ARLENE LU STEINBERG										
	10 00	х		х				0	0	0
D39-TREASURER (1/12-12/31/14) (9) NORMAN ABELES	1 00									
D39-COUNCIL REP (1/12-12/31/14)		X						0	0	0
(10) LAURA BARBANEL	1 00	x						0	0	0
D39-COUNCIL REP (1/12-12/31/14)								Ů	Ů	
(11) LEILANI CRANE	1 00	x						0	0	0
D39-COUNCIL REP (1/14-12/31/15) (12) MARY BETH CRESCI	1 00									
D39-COUNCIL REP (1/14-12/31/16)		x						0	0	0
(13) DAVID DOWNING	1 00									
D39-COUNCIL REP (1/12-12/31/14)		X						0	0	0
(14) MARSHA MCCARY	1 00	X						0	0	0
D39-COUNCIL REP (1/14-12/31/16)										
(15) JILL BELLINSON	1 00	х						0	0	0
D39-MEMBER AT LARGE (1/13-12/31/15) (16) JAINE DARWIN	1 00									
D39-MEMBER AT LARGE (1/12-12/31/14)		X						0	0	0
(17) DENNIS DEBIAK	1 00	х						0	0	0
D39-MEMBER AT LARGE (1/13-12/31/15)								Ů	Ů	
(18) DIANA DIAMOND	1 00	x						0	0	0
D39-MEMBER AT LARGE (1/12-12/31/14) (19) DEVON KING	1 00									
D39-MEMBER AT LARGE (1/14-12/31/16)		x						0	0	0
(20) ERNESTO MUJICA	1 00							_	_	
D39-MEMBER AT LARGE (1/12-12/31/14)		X						0	0	0
(21) SCOTT PYTLUCK	1 00	x						0	0	0
D39-MEMBER AT LARGE (1/14/12/31/16)								Ů	Ů	
(22) KRIS YI	1 00	x						0	0	0
D39-MEMBER AT LARGE (1/14-12/31/15) (23) USHA TUMMALA NARRA	1 00									
D39-MEMBER AT LARGE (1/14-12/31/16)		×						0	0	0
(24) WILLIAM FRIED	1 00	,						0	0	0
D39-SECTION 1 REP		X								

Compensated Employees, and Inde	pendent Cor	ntracto	rs					1	1	1
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne b ooth ctor/	ox, ι an o ⁄trus	ınless fficer tee)		(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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,1033 1130)	2,1033 1130)	related organizations
(426) TONI HEINEMAN	1 00	х						0	0	0
D39-SECTION 2 REP								Ů	Ů	
(1) MARILYN METZL	1 00	X						0	0	0
D39-SECTION 3 REP (2) JOSEPH SCHALLER	1 00									
		Х						0	0	0
D39-SECTION 4 REP (3) BARRY DAUPHIN	1 00									
D39-SECTION 5 REP		Х						0	0	0
(4) MAURINE KELLY	1 00	,,								
D39-SECTION 8 REP		Х						0	0	0
(5) ELIZABETH GOREN	1 00	x						0	0	0
D39-SECTION 9 REP										
(6) LAUREL BASS WAGNER	1 00	X						0	0	0
D39-PARLIAMENTARIAN (7) CELIANE REY-CASSERLY	1 00									
		х						0	0	0
D40-COUNCIL REPRESENTATIVE / 2014 - 2016 (8) CYNTHIA KUBU	2 00									
D40-MEMBER AT LARGE / 2013 - 2016		X						0	0	0
(9) HEATHER BELANGER	4 00									
D40-SECRETARY / 2012 - 2015		X		X				0	0	0
(10) JOANNE FESTA	1 00	х						0	0	0
D40-MEMBER AT LARGE / 2014-2017		_ ^						Ů	Ů	<u> </u>
(11) KEVIN DUFF	4 00	X		x				0	0	0
D40-TREASURER/ 2012 - 2015 (12) NEIL PLISKIN	8 00									
		Х		х				0	0	0
D40-PRESIDENT / 2014 - 2015 (13) PAUL CRAIG	1 00									
D40-COUNCIL REPRESENTATIVE / 2012-2015		Х						0	0	0
(14) ROBB MAPOU	1 00									
D40-COUNCIL REPRESENTATIVE / 2015 - 2017		X						0	0	0
(15) C MUNRO CULLUM	2 00	х		х				0	0	0
D40-PAST-PRESIDENT / 2013 - 2014		^		<u> </u>				Ů	<u> </u>	
(16) PAULA SHEAR	3 00	X		x				0	0	0
D40-PRESIDENT / 2013 - 2014, PAST-PRESENT / 2014 - (17) JENNIFER VASTERLING	2 00									
		х		x				0	0	0
D40-PRESIDENT ELECT / 2014 - 2015 (18) BRADLEY AXELROD	2 00									
D40-MEMBER AT LARGE / 2011 - 2014		Х						0	0	0
(19) MONICA RIVERA MINDT	2 00	, , , , , , , , , , , , , , , , , , ,								
D40-MEMBER AT LARGE / 2009 - 2015		X						0	0	0
(20) CORWIN BOAKE	2 00	x						0	0	0
D40-COUNCIL REPRESENTATIVE / 2011 - 2015										
(21) KENNETH ADAMS	3 00	X						0	0	0
D40-COUNCIL REPRESENTATIVE / 2014 - 2016 (22) BILL FOOTE PHD	2 00									
		х		х				0	0	0
D41-PAST PRESIDENT (23) JENNIFER SKEEM PHD	2 00	-								
D41-PRESIDENT		х		х				0	0	0
(24) PATRICIA ZAPF PHD	2 00	\ ,,		 				_		_
D41-PRESIDENT ELECT		X		Х				0	0	0
	·							·		

Compensated Employees, and Ind	ependent Cor	ntracto	rs					I	1	l I
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (e nan o n is b	ne b oth ctor/	ox, ι an o ⁄trus	ınless fficer tee)	_	(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099 (1130)	2,1033 11130)	related organizations
(451) JENNIFER GROSCUP JD PHD	2 00	l x		l _x				0	0	0
D41-SECRETARY										
(1) EVE BRANK JD PHD	5 00	x		х				0	0	0
D41-TREASURER (2) BRIAN CUTLER PHD	1 00									
D41-COUNCIL REPRESENTATIVE		х						0	0	0
(3) DAVID DEMATTEO JD PHD	1 00									
D41-COUNCIL REPRESENTATIVE		X						0	0	0
(4) DAN KRAUSS JD PHD	1 00	V						0	0	0
D41-MEMBER-AT-LARGE		Х						0	0	0
(5) JENNIFER ENU LOUDEN PHD	1 00	l x						0	0	0
D41-MEMBER-AT-LARGE								_		
(6) LORA LEVETT PHD	1 00	х						0	0	0
D41-MEMBER-AT-LARGE (7) CASEY LADUKE	1 00									
D41-STUDENT REPRESENTATIVE		х						0	0	0
(8) GORDON HERZ	15 00									
D42-PRESIDENT		×		Х				0	0	0
(9) JUNE WJ CHING	10 00									
D42-PRESIDENT-ELECT		X		Х				0	0	0
(10) STEVEN WALFISH	10 00	х		x				0	0	0
D42-PAST PRESIDENT		_ ^		<u> </u>				Ů		
(11) MICHAEL E SCHWARTZ	10 00	l x		x				0	0	0
D42-SECRETARY (12) GERALD KOOCHER	10 00									
		×		х				0	0	0
D42-TREASURER (13) ARMAND CERBONE	3 00									
D42-MEMBERS-AT-LARGE		×						0	0	0
(14) ELAINE DUCHARME	3 00									
D42-MEMBERS-AT-LARGE		X						0	0	0
(15) I BRUCE FRUMKIN	3 00	v						0	0	0
D42-MEMBERS-AT-LARGE		Х						U	0	0
(16) MICHI FU	3 00	l x						0	0	0
D42-MEMBERS-AT-LARGE										
(17) KRISTINA ROBERTS	3 00	×						0	0	0
D42-MEMBERS-AT-LARGE (18) DAVID SHAPIRO	3 00									
		×						0	0	0
D42-MEMBERS-AT-LARGE (19) RACHEL SMOOK	3 00									
D42-MEMBERS-AT-LARGE		×						0	0	0
(20) DEREK PHILLIPS	3 00									
D42-MEMBERS-AT-LARGE		Х						0	0	0
(21) DOUG HALDEMAN	3 00	x						0	0	0
D42-APA COUNCIL								Ů		
(22) NANCY MOLITOR	3 00	l x						0	0	0
D42-APA COUNCIL			_				_			
(23) ROBERT J RESNICK	3 00	х						0	0	0
D42-APA COUNCIL (24) LENORE WALKER	3 00	-	_				_			
D42-APA COUNCIL		х						0	0	0
J.Z. M. N. COONGIL	1	1		<u> </u>	1	1	<u> </u>	<u> </u>	I	<u> </u>

Compensated Employees, and Inde	Compensated Employees, and Independent Contractors									
(A) Name and Title	(B) A verage hours per week (list any hours (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					ınless fficer tee)		(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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	omer			related organizations
(476) ROBERT WOODY	3 00	x						0	0	0
D42-APA COUNCIL (1) JEFFREY YOUNGGREN	3 00									
		х						0	0	0
D42-APA COUNCIL (2) ERIKA LAWRENCE PHD	5 00									
D43-PRESIDENT, 01/14-12/14		X		Х				0	0	0
(3) KRISTINA C GORDON PHD	5 00	x		x				0	0	0
D43-PRESIDENT-ELECT, 01/14-12/14								Ŭ.		
(4) BARBARA H FIESE	5 00	x		х				0	0	0
D43-PAST PRESIDENT, 01/14-12/14 (5) CAROLINE S CLAUSS-EHLERS	3 00									
D43-SECRETARY, 01/14-12/16		Х		Х				0	0	0
(6) ROBERT K WELSH PHD D43-TREASURER, 01/13-12/14	3 00	х		х				0	0	0
(7) MICHELE HARWAY PHD	3 00	x						0	0	0
D43-COUNCIL REPRESENTATIVE, 01/11-12/16		^						Ů	0	
(8) KATIE WISCHKAEMPER	3 00	х						0	0	0
D43-STUDENT/APAGS REP/CHAIR, 08/13-12/14 (9) SUSAN J REGAS PHD	3 00	х						0	0	0
D43-VICE PRESIDENT FOR EDUCATION, 01/13-12/14 (10) JOSEPH M CERVANTES PHD	3 00									
D43-VICEPRES PUBINT&DIVERSITY, 01/12-12/15		Х						0	0	0
(11) CORINNE C DATCHI PHD	3 00	х						0	0	0
D43-VICE PRESIDENT FOR PRACTICE, 01/14-12/15 (12) GALENA K RHOADES PHD	3 00									
D43-VICE PRESIDENT FOR SCIENCE, 02/12-12/15		Х						0	0	0
(13) BEVERLY GREENE D44-COUNCIL REPRESENTATIVE, 01/10-12/15	5 00	x						0	0	О
(14) BONNIE R STRICKLAND PHD	5 00	x						0	0	0
D44-COUNCIL REPRESENTATIVE, 01/14-12/16								Ů		
(15) EDUARDO S MORALES PHD D44-COUNCIL REPRESENTATIVE, 01/14-12/16	5 00	х						0	0	0
(16) LORE M DICKEY PHD	5 00	x						0	0	0
D44-MEMBER-AT-LARGE, 08/12-07/15 (17) MICHELLE D VAUGHAN PHD	5 00									
D44-MEMBER-AT-LARGE, 08/13-07/16 (18) NATHAN G SMITH PHD	5 00	Х						0	0	0
D44-MEMBER-AT-LARGE, 08/14-07/17		х						0	0	0
(19) ARLENE NORIEGA PHD	10 00	х		Х				0	0	0
D44-PAST PRESIDENT, 08/13-07/14 (20) MICHAEL L HENDRICKS PHD	10 00	X		X				0	0	0
D44-PAST PRESIDENT, 08/14-07/15 / PRESIDENT, 08/13 (21) CONSTANCE MATTHEWS	10 00									
D44-PRESIDENT, 08/14-07/15 / PRESIDENT-ELECT, 08/1 (22) ALLEN M OMOTO	10 00	X		X				0	0	0
D44-PRESIDENT-ELECT, 08/14-07/15		×		X				0	0	0
(23) LINDA A TRAVIS PSYD D44-SECRETARY, 08/13-07/16	5 00	х		Х				0	0	0
(24) A C DOWNS PHD 	5 00	х		х				0	0	0

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours	(B) A verage hours per week (list any hours (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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1033 11130)	2/1033 14130)	related organizations
(501) ERIN L DENEKE PHD D44-TREASURER, 08/14-07/17 / MEMBER-AT-LARGE, 08/1	5 00	х		х				0	0	0
(1) STAN SUE	5 00	х		х				0	0	0
D45-PRESIDENT (2) BILL CROSS	5 00	х		х				0	0	0
D45-PAST PRESIDENT (3) JACQUELINE GRAY D45-PRESIDENT ELECT	5 00	х		х				0	0	0
(4) CATHY MCDANIELS WILSON D45-SECRETARY	5 00	х		х				0	0	0
(5) JOSEPH HORVAT D45-TREASURER	5 00	х		х				0	0	0
(6) ELAINE JONES D45-MEMBER AT LARGE	5 00	х						0	0	0
(7) CASEY MCDOUGAL D45-NATIVE AMERICAN SLATE	5 00	х						0	0	0
(8) CONSUELO ARBONA D45-LATINA SLATE	5 00	х						0	0	0
(9) BERTHA HOLLIDAY D45-AFRICAN AMERICAN SLATE	5 00	х						0	0	0
(10) ALVIN ALVAREZ D45-ASIAN AMERICAN SLATE	5 00	х						0	0	0
(11) LUIS VAZQUEX D45-COUNCIL REP	5 00	х						0	0	0
(12) JEAN LAU CHIN D45-COUNCIL REP	5 00	х						0	0	0
(13) JASMIN LLAMAS D45-WEB PAGE LIAISON	5 00	х						0	0	0
(14) BERNARD J LUSKIN PHD D46-PRESIDENT	10 00	х		х				0	0	0
(15) JERRI LYNN HOGG PHD D46-PRESIDENT-ELECT	5 00	х		х				0	0	0
(16) MARY K ALVORD PHD D46-PAST PRESIDENT	5 00	х		х				0	0	0
(17) KATHRYN E STAMOULIS PHD D46-SECRETARY	5 00	х		х				0	0	0
(18) MARY B GREGERSON PHD D46-TREASURER	5 00	х		х				0	0	0
(19) ROCHELLE M BALTER PHD D46-MEMBER-AT-LARGE	5 00	х						0	0	0
(20) JOANNE BRODER SUMERSON PHD D46-MEMBER-AT-LARGE	5 00	х						0	0	0
(21) FRANK FARLEY PHD D46-MEMBER-AT-LARGE	5 00	х						0	0	0
(22) PAMELA B RUTLEDGE PHD D46-MEMBER-AT-LARGE	5 00	х						0	0	0
(23) JUNE WILSON PHD D46-MEMBER-AT-LARGE	5 00	х						0	0	0
(24) GREGORY F ZEROVNIK PHD D46-MEMBER-AT-LARGE	5 00	х						0	0	0
						•				

hours per more than one box, unless compensation compensation week (list person is both an officer any hours and a director/trustee) organization (W-organizations (W-for related for rela	(F) stimated amount of other compensation from the organization and related organizations
for related 2/1000-MISC) 2/1000-MISC) 0	organization and related
organizations below dotted line) Office Office Institutional Trustee Office Institutional Trustee	
(526) ELIZABETH K CARLL PHD 1 00 X 0 0	0
D46-COUNCIL REPRESENTATIVE	
(1) JOHN HEIL	0
D47-PRESIDENT / PRESIDENT-ELECT 4 00 0	0
D47-PRESIDENT-ELECT / MEMBER-AT-LARGE (3) CHRISTINE SELBY 4 00	
0 0 0 D47-PAST-PRESIDENT / PRESIDENT	0
(4) CRISTINA FINK 2 00	
X X 0 0 0 0 0 0 0 0	0
D47-MEMBER AT LARGE	0
(6) SCOTT GOLDMAN 2 00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0
(7) KATE HAYS	0
(8) TRENT A PETRIE 4 00	
X X X 0 0 0 0 0 0 0 0 0 0 0 0	0
(9) REBEKAH PHILLIPS DEZALIA 4 00 X X X X 0 0 0	0
D48-PRESIDENT 2 00 0 (10) FRANK FARLEY 2 00 0	0
D48-PRESIDENT-ELECT 2 00 (11) BRADLEY OLSON 2 00	
	0
0 0 0 D48-SECRETARY	0
(13) JUVIA P HEUCHERT 2 00	
X X X 0 0 0 D48-TREASURER (14) EDUARDO I DIAZ 2 00	0
X	0
(15) JEAN MARIA ARRIGO 2 00 X 0 0	0
D48-COUNCIL REP (16) GIL REYES 2 00 0 <t< td=""><td>0</td></t<>	0
D48-MEMBER AT LARGE 2 00 2 00 2 00 2 00 0 0 0 0 0 0 0 0 0	
D48-MEMBER AT LARGE	0
(18) SERDAR DEGIRMENCIOGLU 2 00	0
(19) HENRIETTE WARFIELD 2 00 X 0 0	0
D48-MEMBERSHIP (20) DENNIS M KIVLIGHAN JR PHD 10 00 0	0
X X 0 0 0 0 0 0 0 0	
X X X 0 0 0 0 0 0 0 0 0 0	0
(22) H L LEE GILLIS PHD 5 00 X X X 0 0 0 D49-PAST PRESIDENT	0
(23) JENNIFER ALONSO PHD 2 00 X X X 0 0	0
D49-SECRETARY 3 00 (24) AMY NITZA PHD X X X X	0
X X X 0 0 0 0 0 0 0 0 0 0 0 0 0 0	

Compensated Employees, and Independent Contractors							·c y	i	ı	
(A) Name and Title	(B) A verage hours per week (list any hours	(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-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(551) LEANN TERRY DIEDERICH PHD	2 00	х						0	0	0
D49-MEMBER AT LARGE		^						Ŭ		
(1) REX A STOCKTON PHD	2 00	x						0	0	0
D49-MEMBER AT LARGE (2) JILL PAQUIN PHD	2 00									
D49-MEMBER AT LARGE		х						0	0	0
(3) JOSEPH POWERS PHD	2 00	x						0	0	0
D49-MEMBER AT LARGE		_ ^						0	0	
(4) ROSAMOND J SMITH MS	2 00	x						0	0	0
D49-STUDENT REPRESENTATIVE (5) SALLY BARLOW PHD	2 00	X						0	0	0
D49-APA COUNCIL REPRESENTATIVE (6) ALAN BUDNEY PHD	10 00	X		X				0	0	0
D50-PRESIDENT (7) SHERRY MCKEE	5 00							0		
D50-PRESIDENT-ELECT		X		X				U	0	0
(8) JOHN KELLY PHD	3 00	x		x				0	0	0
D50-PAST PRESIDENT (9) BRANDON BERGMAN PHD	2 00									
D50-SECRETARY		Х		Х				0	0	0
(10) JENNIFER BUCKMAN PHD D50-TREASURER	2 00	х		х				0	0	0
(11) LINDA SOBELL PHD	1 00	х						0	0	0
D50-COUNCIL REPRESENTATIVE (SCIENCE) (12) JAMES BRAY PHD	1 00	х						0	0	0
D50-COUNCIL REPRESENTATIVE (PRACTICE) (13) JOEL GRUBE	1 00									
D50-MEMBER-AT-LARGE (PUBLIC INTEREST) (14) KRISTA LISDAHL	1 00	Х						0	0	0
D50-MEMBER-AT-LARGE (SCIENCE)		х						0	0	0
(15) MARK SCHENKER PHD D50-MEMBER-AT-LARGE (PRACTICE)	1 00	х						0	0	0
(16) LAUREN HOFFMAN	1 00	х						0	0	0
D50-STUDENT REPRESENTATIVE (17) DAVID SHEPARD	3 00	X		×				0	0	0
D51-PRESIDENT (18) JONATHAN SCHWARTZ	2 00									
D51-PAST-PRESIDENT	1.00	×		X				0	0	0
D51-PRESIDENT-ELECT	1 00	х		Х				0	0	0
(20) RANDA REMER D51-TREASURER	2 00	×		х				0	0	0
(21) RYON MCDERMOTT D51-SECRETARY	1 00	х		х				0	0	0
(22) KATE RICHMOND	1 00	х						0	0	0
D51-MEMBER-AT-LARGE WOMEN'S SLATE (23) WILLIAM ELDER	1 00	X						0	0	0
D51-MEMBER-AT-LARGE SEXUAL MINORITY SLATE (24) GARY BROOKS	1 00									
D51-MEMBER-AT-LARGE OPEN SLATE		X						0	0	0

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours	(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-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the				
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(576) BRYANA FRENCH	1 00	,,								
D51-MEMBER AT-LARGE EARLY CAREER PROFESSIONAL SLA		×						0	0	0
(1) EMILY SMITH	1 00	х						0	0	0
D51-MEMBER AT-LARGE STUDENT SLATE (2) RON LEVANT	1 00									
D51-APA COUNCIL REPRESENTATIVE, APA POLICY ADVISOR		х						0	0	0
(3) RYAN MCKELLEY	1 00	Х						0	0	0
D51-WEBMASTER (4) BRIAN COLE	1 00									
D51-MEMBERSHIP AND RECRUITMENT CO-CHAIR		x						0	0	0
(5) DANIEL SINGLEY	1 00	х						0	0	0
D51-MEMBERSHIP AND RECRUITMENT CO-CHAIR (6) ANDREW SMILER	1 00									
D51-DIRECTOR OF COMMUNICATION AND MEDIA (7) GLEEN GOOD	1 00	X						0	0	0
D51-FINANCE COMMITTEE CHAIR- MEN AND HEALTH TASK F		х						0	0	0
(8) MARINA EPSTEIN	1 00	х						0	0	0
D51-PROGRAM CO-CHAIR (9) MATTHEW SYZDEK	1 00									
D51-PROGRAM CO-CHAIR (10) TALEB KHAIRALLAH	1 00	Х						0	0	0
D51-LEGISLATIVE ADVOCACY COORDINATOR (11) JAMES MAHALIK		Х						0	0	0
D51-REP TO THE APA INTERDIVISIONAL COALITION FOR P	1 00	х						0	0	0
(12) EMILY SMITH D51-LIST SERVE MODERATOR	1 00	х						0	0	0
(13) GERRY CRETE	1 00	x						0	0	0
D51-ASSISTANT LISTSERVE MODERATOR (14) MARK TERJESEN	8 00							0	0	<u> </u>
D52-PRESIDENT		х		х				0	0	0
(15) SENEL POYRAZLI	6 00	x		х				0	0	0
D52-PAST PRESIDENT (16) SAYAKAWA MACHIZAWA	6 00	х		Х				0	0	0
D52-SECRETARY (17) MARTHA ANN CAREY	6 00	х		х				0	0	0
D52-TREASURER (18) JEAN CHIN	6 00	x		X				0	0	0
D52-PRESIDENT ELECT (19) SUZANA ADAMS	4 00							_		
D52-MEMBER AT LARGE		X						0	0	0
(20) CIDNA VALENTIN D52-MEMBER AT LARGE	4 00	×						0	0	0
(21) BRIGETTE KHOURY	4 00	х						0	0	0
D52-MEMBER AT LARGE (22) JANET SIGAL	4 00	.,								
D52-MEMBER AT LARGE	4.00	×						0	0	0
(23) RICHARD VELAYO D52-MEMBER AT LARGE	4 00	х						0	0	0
(24) MERCEDES MCCORMICK	4 00	х						0	0	0
D52-MEMBER AT LARGE	I	<u> </u>	1					l		<u> </u>

Compensated Employees, and Inde					-	, .	,			
(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			į	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the		
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee		Key employee		Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(601) JOAN ASARNOW	6 00	x		Х				0	0	0
D53-PRESIDENT								, in the second	, in the second	
(1) JOHN PIACENTINI	4 00	X		х				0	0	0
D53-PRESIDENT ELECT (2) MARC ATKINS	4 00									
D53-PAST PRESIDENT		Х		Х				0	0	0
(3) JONATHAN COMER	4 00	x		х				0	0	0
D53-SECRETARY		_ ^						0	U	
(4) RICHARD ABIDIN	10 00	x		х				0	0	0
D53-TREASURER (5) MARY FRISTAD	4 00									
D53-APA COUNCIL REP		х						0	0	0
(6) ALI MATTU	4 00	<u></u>								
D53-APA COUNCIL REP		Х						0	0	0
(7) ERIC YOUNGSTROM	4 00	X						0	0	0
D53-MEMBER AT LARGE (8) YO JACKSON	4 00									
	4 00	х						0	0	0
D53-MEMBER AT LARGE (9) AMANDA JENSEN-DOSS	4 00									
D53-MEMBER AT LARGE		X						0	0	0
(10) ELISSA JELALIAN PHD	5 00	х		х				0	0	0
D54-PRESIDENT								,	, and the second	
(11) TIM WYSOCKI PHD ABPP	5 00	х		х				0	0	0
D54-PAST PRESIDENT (12) SHARON BERRY PHD ABPP	5 00									
D54-PRESIDENT ELECT		X		Х				0	0	0
(13) AVANI MODI PHD	5 00	х		Х				0	0	0
D54-SECRETARY		_ ^						, in the second	Ů	
(14) DAVID ELKIN PHD	5 00	х		х				0	0	0
D54-TREASURER (15) DAVID JANICKE PHD	5 00									
D54-MEMBER AT LARGE		Х						0	0	0
(16) ANNA MARIA PATINO-FERNANDEZ PHD	5 00	x						0	0	0
D54-MEMBER AT LARGE								Ů	Ů	
(17) JENNIFER V SCHURMAN PHD	5 00	х						0	0	0
D54-MEMBER AT LARGE (18) MICHAEL C ROBERTS PHD ABPP	5 00									_
D54-APA COUNCIL REPRESENTATIVE		х						0	0	0
(19) WENDY WARD PHD ABPP	5 00									
D54-MEMBER AT LARGE		Х						0	0	0
(20) JAMES BRAY	5 00	l x		x				0	0	0
D55-PRESIDENT (21) MICHAEL TILUS	5 00						_		_	
		х		х				0	0	0
D55-PRESIDENT-ELECT (22) GILBERT SANDERS	5 00									
D55-PAST-PRESIDENT		Х		Χ		L		0	0	0
(23) KATHLEEN MCNAMARA	5 00	x		Х				0	0	0
D55-TREASURER								ľ	ı .	
(24) CHRISTINA VENTO	5 00	x		Х				0	0	0
D55-SECRETARY	1	<u>I</u>			<u> </u>		<u> </u>			

Compensated Employees, and Inde							,			
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (d nan o n is b	ne b oth ctor,	ox, ι an o /trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
(626) SUSAN PATTON	5 00	х						0	0	0
D55-MEMBER-AT-LARGE (1) JEFF MATRANGA	5 00									
D55-MEMBER-AT-LARGE		X						0	0	0
(2) MORGAN SAMMONS	5 00	x						0	0	0
D55-MEMBER-AT-LARGE (3) GREG WILSON	5 00							_	-	
D55-APAGS REP		x						0	0	0
(4) ROBERT MCGRATH	5 00	x						0	0	0
D55-COUNCIL REP								Ů		
(5) KATHLEEN KENDALL-TACKETT D56-PRESIDENT, EDITOR ELECT, SOCIAL MEDIA COMMITTE	10 00	х		х				0	0	0
(6) BETH ROM-RYMER	5 00									
D56-PRESIDENT-ELECT, CAPITAL CAMPAIGN TASK FORCE (7) CONSTANCE DALENBERG		X		Х				0	0	0
D56-PAST-PRESIDENT, NOMINATIONS AND ELECTION COMMI	5 00	x		х				0	0	0
(8) AMBER DOUGLAS	5 00	х		х				0	0	0
D56- SECRETARY (9) LISA ROCCHIO	5 00				-					
D56-TREASURER, FINANCE COMMITTEE		х		х				0	0	0
(10) CHRISTINE DUNNING	5 00	х						0	0	0
D56- MEMBER-AT-LARGE (11) DAWN HUGHES	5 00									
D56- MEMBER-AT-LARGE		Х						0	0	0
(12) LESIA RUGLASS D56-MEMBER-AT-LARGE, DIVERSITY AND MULTICULTURAL C	5 00	×						0	0	o
(13) JOAN COOK	5 00									
D56- COUNCIL REPRESENTATIVE (14) TYSON BAILEY	5 00	X						0	0	0
D56-EARLY CAREER PSYCHOLOGIST REPRESENTATIVE, EARL		х						0	0	0
(15) STEVEN GOLD D56-JOURNAL EDITOR	20 00	х						0	0	0
(16) DIANE CASTILLO D56-ASSOCIATE EDITOR-ELECT, DIVERSITY AND	5 00	х						0	0	0
MULTICUL (17) SYLVIA MAROTTA	5 00	х						0	0	0
D56-ASSOCIATE EDITOR-ELECT (18) SANDRA MATTAR	5 00									
D56-ASSOCIATE EDITOR-ELECT (19) ZHEN CONG	5 00	X						0	0	0
D56-ASSOCIATE EDITOR-ELECT (20) DAN GRECH	5 00	Х						0	0	0
D56-PROFESSIONAL AFFILIATE REPRESENTATIVE		х						0	0	0
(21) CHRISTINE VALDEZ D56-STUDENT REPRESENTATIVE, STUDENT AFFAIRS	5 00	x						0	0	0
COMMIT (22) CHARLES FIGLEY	5 00	х						0	0	0
D56-AWARDS COMMITTEE (23) GILBERT REYES	5 00						-			
D56-DISASTER RELIEF COMMITTEE		х						0	0	0
(24) GEORGE RHOADES D56-EDUCATION AND TRAINING COMMITTEE	5 00	x						0	0	0
230 EDUCATION AND TRAINING COMPILITEE	1	<u> </u>			1	1		l	<u> </u>	<u> </u>

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Position a period a la period	ion (i ian o n is b	ne bo oth a ctor/	ox, u an of trus	nless ficer	(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
(651) LAURIE ANN PEARLMAN D56-FELLOWS COMMITTEE	5 00	х					0	0	0
(1) ELIZABETH CARLL D56-INTERNATIONAL COMMITTEE	5 00	х					0	0	0
(2) REBECCA RANDEL D56-LIAISON COMMITTEE	5 00	х					0	0	0
(3) JESSICA PUNZO D56-MEMBERSHIP COMMITTEE	5 00	х					0	0	0
(4) DIANE ELMORE D56-POLICY COMMITTEE	5 00	Х					0	0	0
(5) BETHANY BRAND D56-PRACTICE COMMITTEE	5 00	Х					0	0	0
(6) CARLOS CUEVAS D56-PROGRAM COMMITTEE	5 00	х					0	0	0
(7) WALKER KARRAA D56-PROGRAM COMMITTEE	5 00	х					0	0	0
(8) NNAMDI POLE D56-PROGRAM COMMITTEE	5 00	х					0	0	0
(9) DENISE SLOAN D56-PUBLICATIONS COMMITTEE	5 00	х					0	0	0
(10) BRIAN MARX D56-SCIENCE COMMITTEE	5 00	х					0	0	0
(11) STACEY SEIBEL D56-SPECIAL INTEREST GROUPS	5 00	Х					0	0	0
(12) RENU ALDRICH D56-NEWSLETTER EDITOR	5 00	Х					0	0	0
(13) M ROSE BARLOW D56-LISTSERV MANAGER	5 00	х					0	0	0
(14) TERRY KEANE D56-CAPITAL CAMPAIGN TASK FORCE	5 00	х					0	0	0
(15) JUDITH ARMSTRONG D56-TASK FORCE ON THE ASSESSMENT OF TRAUMA SEQUELA	5 00	Х					0	0	0
(16) CHRISTINE COURTOIS D56-COMPLEX TRAUMA TASK FORCE	5 00	Х					0	0	0

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As Filed Data -

DLN: 93493313014455

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	ican Ps P retu	SYCHOLOGICAL ASSOCIATION IRN	INC				E4 1573500			
	rt I		c Charity S	Status (All organiza	54-1572590	nc				
		zation is not a private for						7115.		
1	,, ga	A church, convention								
	<u>'</u>					ii section 170(L))(±)(A)(I).			
2	<u> </u>	A school described in				.: 470(1)(4)	(A)("")			
3	<u> </u>	A hospital or a cooper		-						
4	ļ	A medical research or		erated in conjunction v	vith a hospital c	lescribed in sec	tion 170(b)(1)(A)(iii). Enter the		
_	_	hospital's name, city, An organization opera		afit of a college or uni	waraitu aumad a	r anaratad bu s	a accommental control	a a sub a d un		
5	ı	=		-	versity owned t	or operated by a	governmentar unit u	escribed in		
_	_	section 170(b)(1)(A)		·						
6	<u> </u>	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public								
7	▽	An organization that n described in section 1	•	•	• •	om a governme	ntal unit or from the <u>c</u>	general public		
8	Г	A community trust de				tII)				
9		An organization that n					butions, membership	fees, and gross		
		receipts from activitie	s related to its	s exempt functions—s	ubject to certai	n exceptions, a	nd (2) no more than 3	331/3% of		
		ıts support from gross	ınvestment ır	ncome and unrelated b	usıness taxable	e income (less	section 511 tax) from	n businesses		
		acquired by the organ	ızatıon after Ju	ine 30, 1975 See sec	tion 509(a)(2).	(Complete Par	tIII)			
10	Γ	An organization organ	ized and opera	ated exclusively to tes	t for public safe	ty See section	n 509(a)(4).			
11	\sqcap	An organization organ								
		one or more publicly s								
_	_	the box in lines 11a th								
а	ı	Type I. A supporting of supported organization								
		organization You mus				ty of the unecto	ors or trustees or the	supporting		
b	Г	Type II. A supporting				with its suppo	rted organization(s), l	ov having control or		
	•	management of the su								
		must complete Part I	V, Sections A a	and C.						
C	Г	Type III functionally						grated with, its		
	_	supported organization								
d	ļ	Type III non-function not functionally integr								
		(see instructions) Yo					sment and an accentiv	eness requirement		
е	Г	Check this box if the o					s a Type I, Type II, T	ype III functionally		
		integrated, or Type III								
f		Enter the number of s	upported organ	nizations						
g		Provide the following i	nformation abo	out the supported orga	ınızatıon(s)					
					.					
		ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org		(v) A mount of	(vi) A mount of		
		organization		organization	listed in your		monetary support	other support (see		
				(described on lines 1-9 above or IRC	docume	int	(see instructions)	instructions)		
	section (see									
				instructions))						
					Yes	No				
Tota	<u> </u>									
····a				i	i e			i		

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.)

-54	ection A. Public Support	ation rails to qu	amy ander the	tests listed belo	W, picase com	piete i di t 11	1.,	
	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f)	Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,350,760	2,843,748	2,231,798	2,725,394	2,201,6	03	12,353,303
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							
4 5	to the organization without charge Total. Add lines 1 through 3 The portion of total contributions	2,350,760	2,843,748	2,231,798	2,725,394	2,201,6	03	12,353,303
	by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the							236,045
6	amount shown on line 11, column (f) Public support. Subtract line 5							
	from line 4							12,117,258
	ection B. Total Support							
Cale	endar year (or fiscal year beginning in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014		Total
7	Amounts from line 4	2,350,760	2,843,748	2,231,798	2,725,394	2,201,6	03	12,353,303
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,993,831	1,631,858	2,122,257	2,326,619	2,446,0	44	10,520,609
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 VI)	680,633	937,848	851,880	984,195	815,1	07	4,269,663
11	Total support Add lines 7 through 10							27,143,575
12	Gross receipts from related activit	es, etc (see inst	ructions)	-	-	12	6,	693,374
13	First five years. If the Form 990 is organization, check this box and st	op here	<u> </u>					▶┌
	ection C. Computation of Pul			4.4 (6)		1 1		
14	Public support percentage for 2014	•	•	11, column (f))		14		4 640 %
15	Public support percentage for 2013	-	•			15		9 320 %
	33 1/3% support test—2014. If the and stop here. The organization qual 33 1/3% support test—2013. If the	alıfıes as a publıc	ly supported orga	nızatıon				► ▽
	box and stop here. The organizatio 10%-facts-and-circumstances test is 10% or more, and if the organization part VI how the organization merorganization	n qualifies as a pu — 2014. If the orga tion meets the "fa	ublicly supported anization did not d acts-and-circums	organization check a box on lin ctances" test, che	e 13, 16a, or 16t ck this box and s	o, and line 14 top here. Exp	laın	► ►
b	10%-facts-and-circumstances test 15 is 10% or more, and if the organ	nızatıon meets the	e "facts-and-cırcı	ımstances" test,	check this box ar	nd stop here.		,
18	Explain in Part VI how the organiza supported organization Private foundation. If the organiza				-	·	olicly	▶□
	instructions	ala lioc circon		, _ 5	/ D, Check this	zox and see		▶ □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 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 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. 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%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Par	t IV Supporting Organizations (continued)			
Se	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
Se	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
	sation E. Tuno III Functionally, Interpreted Comparting Openingtions			
	The organization is the parent of each of its supported organizations Complete line 3 below			
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
Ь	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI, the role played by the organization in this regard.	3b		

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year					
1 Amounts paid to supported organizations to accom						
2 Amounts paid to perform activity that directly furthexcess of income from activity	ported organizations, in					
3 Administrative expenses paid to accomplish exemp						
4 Amounts paid to acquire exempt-use assets						
5 Qualified set-aside amounts (prior IRS approval rec	nured)					
6 Other distributions (describe in Part VI) See instru	JCTIONS					
7 Total annual distributions. Add lines 1 through 6						
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide				
9 Distributable amount for 2014 from Section C, line	6					
10 Line 8 amount divided by Line 9 amount						
		(::)	(:::)			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014			
1 Distributable amount for 2014 from Section C, line 6						
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)						
3 Excess distributions carryover, if any, to 2014						
a From 2009						
b From 2010						
c From 2011						
d From 2012						
e From 2013						
f Total of lines 3a through e						
g Applied to underdistributions of prior years						
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)						
j Remainder Subtract lines 3g, 3h, and 3i from 3f						
4 Distributions for 2014 from Section D, line 7 \$						
A pplied to underdistributions of prior years						
b Applied to 2014 distributable amount						
c Remainder Subtract lines 4a and 4b from 4						
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)						
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)						
7 Excess distributions carryover to 2015. Add lines 3j and 4c						
8 Breakdown of line 7						
a From 2010						
b From 2011						
c From 2012						
d From 2013						

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493313014455

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Political Campaign and Lobbying Activities

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

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

- 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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** AMERICAN PSYCHOLOGICAL ASSOCIATION INC GROUP RETURN 54-1572590 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? ┌ Yes If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 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 (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

Cat No 50084S

Schedule C (Form 990 or 990-EZ) 2014

section 4911 tax for this year?

┌ Yes ┌ No

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

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 E (The term "expenditures" means a		(a) Filing organization's totals	(b) Affiliated group totals
a	Total lobbying expenditures to influence public of	opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl			
c	Total lobbying expenditures (add lines 1a and 1			
d	Other exempt purpose expenditures	5,577,892		
e	Total exempt purpose expenditures (add lines 1	c and 1d)	5,577,892	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	428,895	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	107,224	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -	0	
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -	0	
j	If there is an amount other than zero on either li	ne 1h or line 1i, did the organization file Form 4720	O reportina	

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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) Total beginning in) 412,961 402,852 424,985 428,895 1,669,693 Lobbying nontaxable amount Lobbying ceiling amount 2,504,540 (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount 103,240 100,713 106,246 107,224 417,423 Grassroots ceiling amount 626,135 (150% of line 2d, column (e)) Grassroots lobbying expenditures

(b) Amount	No
Amount	No
-	
-	
or section)(5), o
Yes	
1	
2	
3	
or section	
Part III-	R (b)
[-A, lines 1 a	Part II
I	Part I

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493313014455

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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.

Open to Public Inspection

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** AMERICAN PSYCHOLOGICAL ASSOCIATION INC GROUP RETURN 54-1572590 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year 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? 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? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Γ Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the tax year 🟲 Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 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)? 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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 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) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

	TITE Organizations Maintaining Co	nections of Art,	ПІЗ	LUII	cai iic	<u>asui</u>	es, or or	liei	Sillillai As	3C (3	(continuea)
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other record	ls, ch	neck	any of th	ie follo	wing that a	re a	sıgnıfıcant use	e of its	
а	Public exhibition		d	Γ	Loan o	rexcha	ange progra	ams			
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	llections and explai	n hov	w the	y further	the or	ganızatıon'	s ex	empt purpose	ın	
5	During the year, did the organization solicit o								lar	- .,	
Dai	assets to be sold to raise funds rather than to rt IV Escrow and Custodial Arrange								se" to Form 9	୮ Ye	s No
	Part IV, line 9, or reported an am						answered		23 (0 101111)	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	dıary	for c	ontribut	ions or	other asse	ets n	ot	┌ Ye	s No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving	able						
							_	_	1A	nount	
С	Beginning balance							1c			
d	Additions during the year						-	1d			
e	Distributions during the year						-	1e			
f	Ending balance						<u> </u>	1f			
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21,	for e	scrow or	custo	dial accoun	it lial	bility?	┌ Ye	s
_ь	If "Yes," explain the arrangement in Part XII										<u> </u>
Pa	rt V Endowment Funds. Complete r	<u>f the organization</u> I	ans	wer	ed "Yes		orm 990, Two years	Т	•	1	
		(a)Current year	(b)Prioi	year	<i>D</i> (C	back	(d)	Three years back	(e) Fo	ur years back
1 a	Beginning of year balance	2,516,448			2,116,429			<u> </u>			
b	Contributions	400,000						$oxed{igspace}$			
C	Net investment earnings, gains, and losses	69,536			400,019						
d	Grants or scholarships				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			T			
e	Other expenditures for facilities and programs										
f	Administrative expenses	33,129									
g	End of year balance	2,952,855			2,516,448						
2	Provide the estimated percentage of the curr	ent year end balanc	e (lın	e 1g	, column	(a)) he	eld as				
а	Board designated or quasi-endowment 🕨 🏻 1	00 000 %									
b	Permanent endowment ►										
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%									
3a	Are there endowment funds not in the posses	sion of the organiza	tion	that	are held	and ad	mınıstered	for t	:he		
	organization by								-		es No
	(i) unrelated organizations							•	3a		No No
Ь	(ii) related organizations							• •	3		110
4	Describe in Part XIII the intended uses of th							•			
Pai	tt VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1		he o						orm 990, Pa		
	Description of property				a) Cost or asis (inves		(b)Cost or obasis (oth		(c) Accumulat depreciation		d) Book value
1a	Land			\top							
b	Buildings										
С	Leasehold improvements										
d	Equipment										
	Other										
Tota	II. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part X	, colu	ımn (B) line 1	O(c)					0

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related.	Complete if the organization	n answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
T. 1 (0.1 (1) 1 15 000 B 1 1 1/B) 1 10.1	<u> </u>	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organizate	Ion answered 'Yes' to Form 990) Part IV line 11d See Form 990 Part X line 15
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organizat (a) Des	ion answered 'Yes' to Form 990), Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990 cription	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990 cription	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990 cription	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des (a) Des Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990 cription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. 1 (a) Description of liability	ion answered 'Yes' to Form 990 cription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	ion answered 'Yes' to Form 990 cription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	ion answered 'Yes' to Form 990 cription 15.1) 15.1) 15.2) 16.1) 17.2 18.3 19.4 19.5 19.6 19.	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	ion answered 'Yes' to Form 990 cription 15.1) 15.1) 15.2) 16.1) 17.2 18.3 19.4 19.5 19.6 19.	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	ion answered 'Yes' to Form 990 cription 15.1) 15.1) 15.2) 16.1) 17.2 18.3 19.4 19.5 19.6 19.	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	ion answered 'Yes' to Form 990 cription 15.1) 15.1) 15.2) 16.1) 17.2 18.3 19.4 19.5 19.6 19.	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	ion answered 'Yes' to Form 990 cription 15.1) 15.1) 15.2) 16.1) 17.2 18.3 19.4 19.5 19.6 19.	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25.	ion answered 'Yes' to Form 990 cription 15.1) 15.1) 15.2) 16.1) 17.2 18.3 19.4 19.5 19.6 19.	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	ion answered 'Yes' to Form 990 cription 15.1) 15.1) 15.2) 16.1) 17.2 18.3 19.4 19.5 19.6 19.	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	ion answered 'Yes' to Form 990 cription 15.1) 15.1) 15.2) 16.1) 17.2 18.3 19.4 19.5 19.6 19.	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	ion answered 'Yes' to Form 990 cription 15.1) 15.1) 15.2) 16.1) 17.2 18.3 19.4 19.5 19.6 19.	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	ion answered 'Yes' to Form 990 cription 15.1) 15.1) 15.2) 16.1) 17.2 18.3 19.4 19.5 19.6 19.	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	ion answered 'Yes' to Form 990 cription 15.1) 15.1) 15.2) 16.1) 17.2 18.3 19.4 19.5 19.	(b) Book value
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Par		evenue per Audited Financial Star ered 'Yes' to Form 990, Part IV, line 1		ts Wit	th Re	venue	per R	eturn Complete If
1	<u> </u>	support per audited financial statements					1	
2	Amounts included on line 1 but	not on Form 990, Part VIII, line 12						
а	Net unrealized gains (losses) o	n investments	2a					
b	Donated services and use of fa	cilities	2b					
C	Recoveries of prior year grants		2c					
d	Other (Describe in Part XIII)		2d					
e	Add lines 2a through 2d .						2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.						3	
4	Amounts included on Form 990), Part VIII, line 12, but not on line 1						
а	Investment expenses not inclu	ided on Form 990, Part VIII, line 7b .	4a					
b	Other (Describe in Part XIII)		4b					
C	Add lines 4a and 4b						4c	
5		4c. (This must equal Form 990, Part I, line					5	
Part		spenses per Audited Financial Sta swered 'Yes' to Form 990, Part IV, line		nts W	ith Ex	kpense	s per	Return. Complete
1	Total expenses and losses per	audited financial statements					1	
2	Amounts included on line 1 but	not on Form 990, Part IX, line 25	_					
а	Donated services and use of fa	cilities	2a					
b	Prior year adjustments		2b					
C	Other losses		2c					
d	Other (Describe in Part XIII)		2d					
e	Add lines 2a through 2d						2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.						3	
4	Amounts included on Form 990), Part IX, line 25, but not on line 1:						
а	Investment expenses not inclu	ded on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIII)		4b					
C	Add lines 4a and 4b						4c	
5		d 4c. (This must equal Form 990, Part I, lir	ne 18)				5	
Par	Supplemental Info	ormation						
Part		Part II, lines 3, 5, and 9, Part III, lines 1a lines 2d and 4b, and Part XII, lines 2d and						de any additional
	Return Reference	Explanation						
PART	V, LINE 4	DIVISION 53 USES THESE FUNDS TO S	SUPPOF	RT STU	DENT	DISSER	ΙΟΙΤΑΤ	N RESEARCH

Jenedale 2 (1 31111 33 3) 23 13		i age S
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Schedule I (Form 990)

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

OMB No 1545-0047

54-1572590

2014

DLN: 93493313014455

Den to Public

Department of the Treasury Internal Revenue Service Name of the organization

GROUP RETURN

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

Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Inspection
Employer identification number

Part I General Inform	ation on Grants	and Assistance				<u> </u>	
 Does the organization main the selection criteria used Describe in Part IV the org 	to award the grants	orassistance?					⊮ Yes
					s. Complete if the orgonial organization		"Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AMERICAN PSYCHOLOGICAL FOUNDATION 750 FISRT STREET NE 9TH FLOOR WASHINGTON, DC 20002	52-6051733	501 (C)(3)	10,000				SCP RESEARCH
(2) VIRGINIA COMMONWEALTH UNIVERSITY PO BOX 843039 RICHMOND,VA 23284	54-6001758	501 (C)(3)	7,500				EARLY CAREER RESEARCH GRANT
(3) BOSTON UNIVERSITY RESEARCH ACCOUNTING PO BOX 55058 BOSTON,MA 02205	04-2103547	501 (C)(3)	7,500				EARLY CAREER RESEARCH GRANT
(4) THE UNIVERSITY OF AKRON OFFICE OF RESERACH ADMINISTRATION AKRON,OH 44325	34-6002924	501 (C)(3)	6,951				EARLY CAREER RESEARCH GRANT
(5) THE RESEARCH FOUNDATION FOR SUNY PO BOX 9 ALBANY,NY 12201	14-1368361	501 (C)(3)	10,000				RESEARCH OF DR JAMES BOSWELL
(6) UNIVERSITY OF FLORIDA 219 GRINTER HALL GAINESVILLE, FL 32611	59-6002052		11,000				RESEARCH GRANT
(7) UNIVERSITY OF CALIFORNIA - LOS ANGELES 11000 KINROSS AVENUE LOS ANGELES,CA 90095	95-6006143	501 (C)(3)	11,000				RESEARCH GRANT
(8) THE FLORIDA INTERNATIONAL UNIVERSITY BOARD OF TRUSTEES 11200 SW 8TH STREET MARC 430 MIAMI,FL 33199	65-0177616		10,000				EVANS ECP

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

Part III Grants and Other Assistance to Domestic Individuals. 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) A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) DIVISION 12 - SECTION 3 GRANTS	20	11,250			
(2) DIVISION 54 - MARION DONALD ROUTH GRANT	2	6,000			

Part IV Supplemental	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.							
Return Reference	Explanation							
PART I, LINE 2	DIVISION 12 BEFORE ANY CONTRIBUTION IS MADE, A COMPLETE OUTLINE OF THE PROJECT MUST BE SUBMITTED BY THE ENTITY REQUESTING FUNDS THE OUTLINE MUST INCLUDE INFORMATION ON HOW FUNDS WILL BE USED, THE ADMINISTRATOR OF FUNDS AND OTHER SALIENT INFORMATION THE SECTION THEN FOLLOWS UP WITH THE ADMINISTRATOR AS THE PROJECT PROGRESSES DIVISION 13 WE MAINTAIN RECORDS OF ALL OUR RESEARCH GRANT AWARDEES AWARDEES ARE EXPECTED TO CONDUCT THEIR RESEARCH AND PRODUCE AN ARTICLE THAT WILL BE SUBMITTED TO THE SCP JOURNAL OR WMC THE FOLLOWING YEAR DIVISION 15 INITIAL BUDGETS AND MAJOR CHANGES ARE APPROVED BY EXEC COMMITTEE, SPENDING IS MONITORED BY INSTITUTION, FINAL REPORTS ARE PROVIDED TO TREASURER/EXEC COMM DIVISION 29 GRANTS OFFERED ARE UNRESTRICTED GRANTS CALLS FOR GRANT PROPOSALS ARE DISTRIBUTED ANNUALLY, OUTLINING ELIGIBILITY GOALS, SUBMISSION REQUIREMENTS, AND EVALUATION CRITERIA DISTRIBUTION IS VIA PROFESSIONAL LISTSERVS, ON THE ASSOCIATION WEBSITE, AND IN THE OFFICIAL PUBLICATION GRANT APPLICATIONS ARE BLIND-REVIEWED, AND GRANT RECIPIENTS ARE REQUIRED TO SUPPLY A FINAL REPORT AT THE RESEARCH'S CONCLUSION DIVISION 40 AT THE END OF THE GRANT PERIOD, THE RECIPIENT ORGANIZATION MUST PROVIDE A REPORT THAT DETAILS ALL THE ACTIVITIES THAT TOOK PLACE IN THE CONTEXT OF THIS GRANT, ALONG WITH A DETAILED ACCOUNT OF EXPENDITURES AND RETURN OF ANY UNUSED FUNDS COPIES OF CONFERENCE PRESENTATIONS AND JOURNAL PUBLICATIONS OF RESEARCH THAT WAS CONDUCTED WITH GRANT SUPPORT MUST ALSO BE PROVIDED AT THAT TIME THE OVERALL PURPOSE OF THE GRANT IS TO (A) SUPPORT EARLY CAREER NEUROPSYCHOLOGISTS IN THEIR RESEARCH AND (B) TO SOCIALIZE THEM INTO THE DIVISION BY HAVING THEM SERVE ON DIVISIONAL COMMITTEES DIVISION 41 DIV 41 REQUIRES THAT ALL RESEARCH-RELATED GRANTEES PROVIDE DOCUMENTATION THAT THE PROJECT HAS BEEN APPROVED BY THE INSTITUTION'S INTERNAL REVIEW BOARD (IRB) TO ENSURE PROTECTION OF HUMAN SUBJECTS WE REQUIRE THAT THE INSTITUTION'S GRANT OFFICE PROVIDES QUARTERLY EXPENSE REPORTS FOR ALL EXPENSES UNTIL ALL FUNDS ARE SPENT THE CALL FUNDS. SMA							

Additional Data

Software ID:

Software Version:

EIN: 54-1572590

Name: AMERICAN PSYCHOLOGICAL ASSOCIATION INC

GROUP RETURN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN PSYCHOLOGICAL FOUNDATION750 FISRT STREET NE 9TH FLOOR WASHINGTON,DC 20002	52-6051733	501 (C)(3)	10,000				SCP RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGINIA COMMONWEALTH UNIVERSITYPO BOX 843039 RICHMOND,VA 23284	54-6001758	501 (C)(3)	7,500				EARLY CAREER RESEARCH GRANT

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
BOSTON UNIVERSITY RESEARCH ACCOUNTING PO BOX 55058 BOSTON,MA 02205	04-2103547	501 (C)(3)	7,500				EARLY CAREER RESEARCH GRANT	

<u>Form 990,Schedule I, Par</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
THE UNIVERSITY OF AKRONOFFICE OF RESERACH ADMINISTRATION AKRON,OH 44325	34-6002924	501 (C)(3)	6,951				EARLY CAREER RESEARCH GRANT	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE RESEARCH FOUNDATION FOR SUNYPO BOX 9 ALBANY,NY 12201	14-1368361	501 (C)(3)	10,000				RESEARCH OF DR JAMES BOSWELL

<u> Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
UNIVERSITY OF FLORIDA 219 GRINTER HALL GAINESVILLE,FL 32611	59-6002052		11,000				RESEARCH GRANT	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
UNIVERSITY OF CALIFORNIA - LOS ANGELES11000 KINROSS AVENUE LOS ANGELES,CA 90095	95-6006143	501 (C)(3)	11,000				RESEARCH GRANT	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE FLORIDA INTERNATIONAL UNIVERSITY BOARD OF TRUSTEES11200 SW 8TH STREET MARC 430 MIAMI,FL 33199	65-0177616		10,000				EVANS ECP

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 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493313014455

2014

Open to Public Inspection

Name of the organization	Employer identification number
AMERICAN PSYCHOLOGICAL ASSOCIATION INC	
GROUP RETURN	54-1572590

Return Reference	Explanation
PART III, LINE 1, ORGANIZATIONS MISSION	
FORM 990, PART 1 LINE 6	THIS NUMBER REPRESENTS THE ELECTED MEMBERS OF THE GOVERNING BODIES OF THE VARIOUS DIVISION S THIS NUMBER IS NOT REPRESENTATIVE OF ALL VOLUNTEERS AS IT DOES NOT INCLUDE VOLUNTEERS W HO MAY HAVE SERVED THE DIVISIONS IN OTHER WAYS
FORM 990, PART VI, SECTION A, LINE 2	JASON BAKER AND BRUCE BAKER WITH DIVISION 33 HAVE A FAMILY RELATIONSHIP
FORM 990, PART VI, SECTION A, LINE 3	DIVISIONS 12, 13, 29, 55, AND 17 ARE THE ONLY DIVISIONS THAT DELEGATED CONTROL OVER MANAGE MENT DUTIES CUSTOMARILY PERFORMED BY OR UNDER THE DIRECT SUPERVISION OF OFFICERS, DIRECTOR S OR TRUSTEES, OR KEY EMPLOYEES TO A MANAGEMENT COMPANY OR OTHER PERSON
FORM 990, PART VI, SECTION A, LINE 6	THE DIVISIONS ARE MEMBERSHIP ORGANIZATIONS WHOSE MEMBERS ELECT THE GOVERNING BODIES
FORM 990, PART VI, SECTION A, LINE 7A	THE DIVISIONS ARE MEMBERSHIP ORGANIZATIONS WHOSE MEMBERS ELECT THE GOVERNING BODIES
FORM 990, PART VI, SECTION A, LINE 7B	THE DIVISIONS ARE MEMBERSHIP ORGANIZATIONS WHOSE MEMBERS ELECT THE GOVERNING BODIES
FORM 990, PART VI, SECTION B, LINE 11	APA MANAGEMENT PERFORMS A THOROUGH REVIEW OF A DRAFT OF THE 990 BOARDS OF THE DIVISIONS W ERE REQUESTED TO DELEGATE THE POWER TO RECEIVE THE 990 TO THE PRESIDENT, AND A FINAL COPY OF THE 990 WAS PROVIDED TO THE PRESIDENT OF EACH DIVISION INCLUDED IN THIS CONSOLIDATED RE TURN AND TO THE APA BOARD OF DIRECTORS PRIOR TO ITS BEING FILED WITH THE IRS
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO ALL DIVISIONS AND OFFICERS ARE REQUIRED, ON A MEETING BY MEETING BASIS, TO RECUSE THEMSELVES FROM ANY CONFLICT IN VIOLATION OF THI S POLICY
FORM 990, PART VI, SECTION B, LINE 15	THE ORGANIZATION'S TOP MANAGEMENT OFFICIALS, OFFICERS, AND KEY EMPLOYEES ARE NOT COMPENSATED
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPO N REQUEST AT THE OFFICES OF THE AMERICAN PSY CHOLOGICAL ASSOCIATION
FORM 990, PART IX, LINE 11G	ADMINISTRATIVE SERVICES PROGRAM SERVICE EXPENSES 4,508 MANAGEMENT AND GENERAL EXPENSES 1 76,309 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 180,817 EDITORIAL SERVICES PROGRAM SERVIC E EXPENSES 105,238 MANAGEMENT AND GENERAL EXPENSES 5,540 FUNDRAISING EXPENSES 0 TOTAL E XPENSES 110,778 MEMBERSHIP SERVICES PROGRAM SERVICE EXPENSES 11,296 MANAGEMENT AND GENE RAL EXPENSES 68,283 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 79,579 OTHER PROGRAM SERVICE EXPENSES 228,961 MANAGEMENT AND GENERAL EXPENSES 240,737 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 469,698 PERFORMERS PROGRAM SERVICE EXPENSES 1,105 MANAGEMENT AND GENERAL EXPEN SES 730 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,835 PHOTOGRAPHY/VIDEO SERVICES PROGRAM SERVICE EXPENSES 7,159 MANAGEMENT AND GENERAL EXPENSES 3,926 FUNDRAISING EXPENSES 0 TO TO TO TAL EXPENSES 11,085 RESEARCH SERVICES PROGRAM SERVICE EXPENSES 5,003 MANAGEMENT AND GENERAL EXPENSES 1,105 MANAGEMENT AND GENERAL EXPENSES 5,003
PART VI, SECTION A, LINES 1A AND 1B	EACH DIVISION HAS A GOVERNING BODY OF 8 TO 25 MEMBERS, ALL OF WHOM ARE INDEPENDENT AND ELECTED BY THE MEMBERS OF THE DIVISION