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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except 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 [www.irs.gov/form990](#)

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 01-01-2015, and ending 12-31-2015

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

AMERICAN PSYCHOLOGICAL ASSOCIATION INC

% NANCY PINA

Doing business as

Number and street (or P O box if mail is not delivered to street address)

750 FIRST STREET NE

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

WASHINGTON, DC 20002

F Name and address of principal officer

NORMAN ANDERSON

750 FIRST STREET NE

WASHINGTON, DC 20002

H(a) Is this a group return for subordinates?

No

☐ Yes

☒ No

H(b) Are all subordinates included?

☐ Yes

☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☒ 501(c)(3)

☐ 501(c) () ◀(insert no)

☐ 4947(a)(1) or

☐ 527

J Website: ▶

WWW APA ORG

K Form of organization

☒ Corporation

☐ Trust

☐ Association

☐ Other ▶

L Year of formation

1925

M State of legal domicile

DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities

THE AMERICAN PSYCHOLOGICAL ASSOCIATION IS A NATIONAL MEMBERSHIP A NATIONAL MEMBERSHIP ORGANIZATION CREATED TO ADVANCE PSYCHOLOGY AS A MEANS OF PROMOTING HEALTH, EDUCATION AND HUMAN WELFARE

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	173
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	171
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	715
6	Total number of volunteers (estimate if necessary)	6	161
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	5,105,248
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	2,069,096

Revenue

8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9	Program service revenue (Part VIII, line 2g)	1,798,443	1,948,661
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	109,444,386	108,065,276
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	9,163,228	-1,314,889
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,996,233	9,119,690
		130,402,290	117,818,738

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,222,135	2,347,016
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	62,047,028	62,557,552
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	63,242,141	65,102,317
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	127,511,304	130,006,885
19	Revenue less expenses Subtract line 18 from line 12	2,890,986	-12,188,147

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	260,756,298	230,421,517
21	Total liabilities (Part X, line 26)	201,074,569	188,332,242
22	Net assets or fund balances Subtract line 21 from line 20	59,681,729	42,089,275

Part II Signature Block

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

Sign Here

Signature of officer

ARCHIE L TURNER CFO

Type or print name and title

2016-10-17

Date

Paid Preparer Use Only

Print/Type preparer's name

Jeffrey J Schragg

Preparer's signature

Jeffrey J Schragg

Date

Check ☐ if self-employed

PTIN P00234543

Firm's name ▶

BDO USA LLP

Firm's EIN ▶

Firm's address ▶

8401 GREENSBORO DRIVE 8TH FLOOR

MCLEAN, VA 22102

Phone no (703) 893-0600

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

☒ Yes

☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990(2015)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

☒

1

Briefly describe the organization’s mission

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

2

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

☐ Yes ☒ No

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

3

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

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

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

4a	(Code) (Expenses \$ 40,866,405 including grants of \$) (Revenue \$ 88,966,909)
The APA Publications and Databases Office is responsible for the dissemination of psychological information worldwide Information dissemination projects include 87 scholarly journals, a book and video publishing program, and seven electronic database products In 2015, the APA journals program published more than 5,000 articles in 402 journal issues Also in 2015, PsycARTICLES, the electronic database product containing full-text journal content, added eleven new titles and contained over 191,000 article records, dating back to 1894 During 2015, APA released 43 new book titles APAs self-help imprint, released the 2 new titles in 2015 Magination Press, APAs childrens book imprint, released 13 new titles, several of which won multiple awards and honors The reference division of APAs books program published the APA Dictionary of Psychology, Second Edition and several volumes in the APA Handbooks in Psychology series including the APA Handbook of Clinical Geropsychology (2-vol set), the APA Handbook of Human Systems Integration, the APA Handbook of Men and Masculinities, the APA Handbook of Psychology and Juvenile Justice, and the APA Handbook of Nonverbal Communication APA also released 67 books in Kindle editions and 18 new video titles At the end of 2015, the PsycBOOKS database contained 4,261 books and 63,835 chapters PsycINFO, the bibliographic database, reached a milestone of 4 million records in December 2015 There were 2,570 journals covered by PsycINFO at the end of 2015 PsycTESTS, the research database on psychological tests, measures, scales, surveys and other assessments, had a total of 32,750 records PsycEXTRA, the gray literature database that includes both bibliographic records and full text content, increased by 16,602 in 2015 and totaled 357,796 records In 2015, 521 new reviews were added to PsycCRITIQUES, the database of book and film reviews	
4b	(Code) (Expenses \$ 12,033,240 including grants of \$) (Revenue \$ 13,029,082)
THE APA COMMUNICATIONS DEPARTMENT COMPRISES MEDIA RELATIONS AND PUBLIC AFFAIRS, MARKETING AND ADVERTISING SALES, PUBLICATIONS EDITING AND DESIGN, AND A MEMBER MAGAZINE THE DEPARTMENT IS THE PRIMARY POINT OF CONTACT FOR MEDIA AND THE PUBLIC, AND AS SUCH, STRIVES TO ADVANCE PSYCHOLOGY AS A SCIENCE, AS A PROFESSION, AND AS A MEANS OF PROMOTING HUMAN HEALTH AND WELFARE DEPARTMENT ACTIVITIES INCLUDE THE SALE OF ADVERTISING IN ALL OFFICIAL APA MAGAZINES, JOURNALS, AND ON APA'S WEBSITE, THE SALE OF EXHIBIT SPACE AT APA'S ANNUAL CONVENTION, SOCIAL MEDIA MANAGEMENT, AND PUBLISHING TIMELY INFORMATION ON APA'S WEBSITE THE DEPARTMENT SERVES AS THE PRIMARY CONDUIT FOR INFORMATION FOR MEDIA, THE GENERAL PUBLIC, AND POLICYMAKERS ABOUT PSYCHOLOGY AND APA THROUGH NEWS STORIES IN POPULAR AND TRADE MEDIA AND THROUGH DISSEMINATION OF INFORMATION VIA WWW APA ORG AND PUBLICATION OF PAMPHLETS AND BROCHURES	
4c	(Code) (Expenses \$ 9,302,091 including grants of \$ 525,731) (Revenue \$ 4,845,480)
THE APA EDUCATION DIRECTORATE PLAYS A STRONG ROLE IN THE AREA OF QUALITY ASSURANCE FOR 1022 ACCREDITED PROGRAMS IN PROFESSIONAL PSYCHOLOGY THE CONTINUING EDUCATION COMMITTEE APPROVED 815 ORGANIZATIONS AS SPONSORS OF CONTINUING EDUCATION THE DIRECTORATE ALSO PLAYS AN IMPORTANT ROLE IN SHAPING THE EDUCATIONAL EXPERIENCE OF TOMORROW'S PSYCHOLOGISTS AND IN PROVIDING CONTINUING PROFESSIONAL EDUCATION FOR TODAY'S PRACTITIONER CONTINUING EDUCATION IF OFFERED THROUGH 263 WEB DELIVERED PROGRAMS, AND 195 BOOK-BASED AND JOURNAL ARTICLE-BASED PROGRAMS 368 CONTINUING EDUCATION OPPORTUNITIES WERE OFFERED BEFORE AND DURING THE 2015 APA CONVENTION IN DENVER, CO	
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 28,704,060 including grants of \$ 1,821,285) (Revenue \$ 2,505,744)
4e	Total program service expenses ▶ 90,905,796

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 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	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9 Yes	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or 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? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (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? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
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.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		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?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		No
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	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?		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	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.		
13b	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.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI Governance, Management, and Disclosure

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

Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a 173		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b Enter the number of voting members included in line 1a, above, who are independent	1b 171		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6 Did the organization have members or stockholders?	6	Yes	
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

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

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

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records
 ▶ NANCY PINA 750 FIRST STREET NE WASHINGTON, DC 20002 (202) 336-5827

Check if Schedule O contains a response or note to any line in this Part VII ☒

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount 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 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.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

Form **990** (2015)

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								7,098,161	0	918,444

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 132

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

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
CENVEO PUBLISHER SERVICES, PO BOX 822934 PHILADELPHIA, PA 19182	PUBLISHING	5,757,845
SIDLEY AUSTIN LLP, PO BOX 0642 CHICAGO, IL 60690	LEGAL SERVICES	4,152,431
AUTOMATED GRAPHIC SYSTEMS, 4590 GRAPHICS DRIVE WHITE PLAINS, MD 20695	MAIL & POSTAGE SVC	1,552,543
INNODATA ISOGEN INC, 3 UNIVERSITY PLAZA HACKENSACK, NJ 07601	DIGITAL CONTENT SVS	1,222,002
RANDSTAD, PO BOX 7247-6655 PHILADELPHIA, PA 19170	STAFFING AGENCY	1,088,828

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 ► 81

Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line 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		
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a						
	b	Membership dues	1b						
	c	Fundraising events	1c						
	d	Related organizations	1d						
	e	Government grants (contributions)	1e	1,749,831					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	198,830					
	g	Noncash contributions included in lines 1a-1f \$							
	h	Total. Add lines 1a-1f			1,948,661				
Program Service Revenue	2a	LICENSING FEES	Business Code 541900	66,945,168	66,945,168				
	b	JOURNAL SUBSCRIPTIONS	111000	13,068,056	10,441,497	2,626,559			
	c	MEMBERSHIP DUES	900099	9,961,703	9,961,703				
	d	PUBLICATION SALES	511120	11,725,982	11,725,982				
	e	CONVENTION AND CONFERENCE FEES	611600	2,272,089	2,272,089				
	f	All other program service revenue		4,092,278	4,092,278				
	g	Total. Add lines 2a-2f			108,065,276				
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,395,731			1,395,731	
4		Income from investment of tax-exempt bond proceeds . . .		0					
5		Royalties		639,188			639,188		
6a		Gross rents	(i) Real 26,866,521	(ii) Personal					
		b	Less rental expenses	19,773,244					
		c	Rental income or (loss)	7,093,277					0
		d	Net rental income or (loss)						7,093,277
7a		Gross amount from sales of assets other than inventory	(i) Securities 60,085,570	(ii) Other					
		b	Less cost or other basis and sales expenses	62,774,539					21,653
		c	Gain or (loss)	-2,688,969					-21,653
		d	Net gain or (loss)						-2,710,620
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a		0				
		b	Less direct expenses	b					
		c	Net income or (loss) from fundraising events . . .						
9a		Gross income from gaming activities See Part IV, line 19	a		0				
		b	Less direct expenses	b					
		c	Net income or (loss) from gaming activities						
10a		Gross sales of inventory, less returns and allowances	a		0				
		b	Less cost of goods sold	b					
		c	Net income or (loss) from sales of inventory . . .						
	Miscellaneous Revenue		Business Code						
11a	APA OTHER REVENUE	900099	1,328,084				1,328,084		
	b	MAILING LIST RENTAL	533110	59,141		59,141			
	c								
	d	All other revenue							
	e	Total. Add lines 11a-11d			1,387,225				
12	Total revenue. See Instructions			117,818,738	105,438,717	5,105,248	5,326,112		

Part IX **Statement of Functional Expenses**

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

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,161,815	1,161,815		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	1,185,201	1,185,201		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	6,084,178	4,231,657	1,852,521	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	44,688,885	31,081,940	13,606,945	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,429,995		2,429,995	
9	Other employee benefits	5,767,712		5,767,712	
10	Payroll taxes	3,586,782		3,586,782	
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	632,264	8,988	623,276	
c	Accounting	175,205		175,205	
d	Lobbying	273,543	273,543		
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	522,059		522,059	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	12,636,960	9,468,363	3,168,597	
12	Advertising and promotion	2,552,803	2,337,063	215,740	
13	Office expenses	12,071,127	11,585,424	485,703	
14	Information technology	3,558,849	233,989	3,324,860	
15	Royalties	4,943,170	4,943,170		
16	Occupancy	8,002,211	6,558	7,995,653	
17	Travel	4,138,602	2,527,838	1,610,764	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	4,368,653	1,697,546	2,671,107	
20	Interest	1,136,167		1,136,167	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,333,453		1,333,453	
23	Insurance	872,131		872,131	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	INCOME TAX EXPENSE	918,501		918,501	
b	OVERHEAD RECOVERY	-7,497,529	-2,949,265	-4,548,264	
c	ALLOCATED COSTS	3,307,588	19,919,665	-16,612,077	
d	HONORARIA/STIPENDS	2,936,144	2,621,571	314,573	
e	All other expenses	8,220,416	570,730	7,649,686	
25	Total functional expenses. Add lines 1 through 24e	130,006,885	90,905,796	39,101,089	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

				(A)		(B)	
				Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing		500	1	750	
	2	Savings and temporary cash investments		40,474,819	2	45,703,425	
	3	Pledges and grants receivable, net		0	3	0	
	4	Accounts receivable, net		24,416,479	4	19,186,705	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		187,273	5	0	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		0	6	0	
	7	Notes and loans receivable, net		0	7	0	
	8	Inventories for sale or use		4,062,713	8	4,045,314	
	9	Prepaid expenses and deferred charges		1,139,603	9	1,422,709	
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	177,529,431			
	b	Less: accumulated depreciation	10b	93,539,168	80,862,440	10c	83,990,263
	11	Investments—publicly traded securities		92,844,841	11	58,736,873	
	12	Investments—other securities. See Part IV, line 11		0	12	0	
	13	Investments—program-related. See Part IV, line 11		0	13	0	
	14	Intangible assets		0	14	0	
	15	Other assets. See Part IV, line 11		16,767,630	15	17,335,478	
16	Total assets. Add lines 1 through 15 (must equal line 34)		260,756,298	16	230,421,517		
Liabilities	17	Accounts payable and accrued expenses		22,672,543	17	18,695,509	
	18	Grants payable		0	18	0	
	19	Deferred revenue		51,550,229	19	52,233,889	
	20	Tax-exempt bond liabilities		13,750,000	20	12,950,000	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		10,274,069	21	10,037,641	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		0	22	0	
	23	Secured mortgages and notes payable to unrelated third parties		85,453,015	23	77,440,136	
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		17,374,713	25	16,975,067	
	26	Total liabilities. Add lines 17 through 25		201,074,569	26	188,332,242	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			27		
	28	Temporarily restricted net assets			28		
	29	Permanently restricted net assets			29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds		0	30	0	
	31	Paid-in or capital surplus, or land, building or equipment fund		0	31	0	
	32	Retained earnings, endowment, accumulated income, or other funds		59,681,729	32	42,089,275	
33	Total net assets or fund balances		59,681,729	33	42,089,275		
34	Total liabilities and net assets/fund balances		260,756,298	34	230,421,517		

Part XI **Reconciliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	117,818,738
2	Total expenses (must equal Part IX, column (A), line 25)	2	130,006,885
3	Revenue less expenses Subtract line 2 from line 1	3	-12,188,147
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	59,681,729
5	Net unrealized gains (losses) on investments	5	-6,226,532
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	822,225
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	42,089,275

Part XII **Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII ☐

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

EIN:

ame: AMERICAN P

(A)	(B)	(C)	(D)	(E)
-----	-----	-----	-----	-----

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Barry S Anton PhD ABPP PRESIDENT	18 0 1 0	X						40,600	0	0
Susan H McDaniel PhD PRESIDENT ELECT	11 0 1 0	X						21,653	0	0
Nadine J Kaslow PhD ABPP PAST PRESIDENT	11 0 1 0	X						29,650	0	0
Bonnie Markham PhD PsyD TREASURER	16 0 1 0	X						23,100	0	0
Jennifer F Kelly PhD ABPP SECRETARY	11 0 1 0	X						18,600	0	0
Louise A Douce PhD MEMBER AT LARGE	9 0 1 0	X						14,996	0	0
Diana L Prescott PhD MEMBER AT LARGE	9 0 1 0	X						14,600	0	0
Sandra L Shullman PhD MEMBER AT LARGE	9 0 1 0	X						14,600	0	0
William J Strickland PhD MEMBER AT LARGE	9 0 1 0	X						14,600	0	0
Richard M McGraw PhD MEMBER AT LARGE	9 0 1 0	X						14,600	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Linda F Campbell PhD MEMBER AT LARGE	9 0 1 0	X						15,600	0	0
Emily Voelkel PhD APAGS MEMBER	9 0 1 0	X						14,600	0	0
Norman Abeles PhD COR MEMBER	1 0 0 0	X						0	0	0
Kenneth M Adams PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0
Luisa Alvarez-Dominguez PhD COR MEMBER	1 0 0 0	X						0	0	0
Martin J Amenkaner PhD COR MEMBER	1 0 0 0	X						0	0	0
Marcia Andberg PhD COR MEMBER	1 0 0 0	X						0	0	0
Jean Mana Arigo PhD COR MEMBER	1 0 0 0	X						0	0	0
Martha E Banks PhD COR MEMBER	1 0 0 0	X						0	0	0
Laura H Barbanel EdD COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Sally H Barlow PhD COR MEMBER	1 0 0 0	X						0	0	0
Bernard C Beins PhD COR MEMBER	1 0 0 0	X						7,500	0	0
Stacey Lynn Benson PsyD COR MEMBER	1 0 0 0	X						0	0	0
Guillermo Bernal PhD COR MEMBER	1 0 0 0	X						0	0	0
Dina Birman PhD COR MEMBER	1 0 0 0	X						0	0	0
Sandra J Bishop-Josef PhD COR MEMBER	1 0 0 0	X						0	0	0
Judith S Blanton PhD COR MEMBER	1 0 0 0	X						0	0	0
Corwin Boake PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0
Kenneth H Bohm PhD COR MEMBER	1 0 0 0	X						0	0	0
Thomas J Boll PhD COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
James H Bray PhD COR MEMBER	1 0 0 0	X						0	0	0
Linda F Brown PhD COR MEMBER	1 0 0 0	X						0	0	0
Sarah Estes Burgamy PsyD COR MEMBER	1 0 0 0	X						0	0	0
Elizabeth K Carll PhD COR MEMBER	1 0 0 0	X						0	0	0
Jean A Carter PhD COR MEMBER	1 0 0 0	X						0	0	0
Kim A Case PhD COR MEMBER	1 0 0 0	X						0	0	0
Nicolas Luc Chevner PhD COR MEMBER	1 0 0 0	X						0	0	0
Jean Lau Chin EdD COR MEMBER	1 0 0 0	X						0	0	0
June W J Ching PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0
Y Barry Chung PhD COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Susan D Clayton PhD COR MEMBER	1 0 0 0	X						0	0	0
Annabel J Cohen PhD COR MEMBER	1 0 0 0	X						0	0	0
Regina C Colonia-Willner PhD COR MEMBER	1 0 0 0	X						0	0	0
J Travis Colwell PhD COR MEMBER	1 0 0 0	X						0	0	0
Helen L Coons PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0
Stewart E Cooper PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0
Chester D Copemann PhD COR MEMBER	1 0 0 0	X						0	0	0
Joseph J Coyne PhD COR MEMBER	1 0 0 0	X						0	0	0
Paul L Craig PhD COR MEMBER	1 0 0 0	X						0	0	0
Leilani Salvo Crane PsyD COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MaryBeth M Cresci PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0
Timothy W Curby PhD COR MEMBER	1 0 0 0	X						0	0	0
Brian L Cutler PhD COR MEMBER	1 0 0 0	X						0	0	0
Grady Dale EdD COR MEMBER	1 0 0 0	X						0	0	0
Eugene Joseph D'Angelo PhD COR MEMBER	1 0 0 0	X						0	0	0
David S DeMatteo JD PhD COR MEMBER	1 0 0 0	X						0	0	0
Eduardo I Diaz PhD COR MEMBER	1 0 0 0	X						0	0	0
Changming Duan PhD COR MEMBER	1 0 0 0	X						0	0	0
Frank Farley PhD COR MEMBER	1 0 0 0	X						0	0	0
Cathy Lee Faye PhD COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
June E Feder PhD COR MEMBER	1 0 0 0	X						0	0	0
Charles R Figley PhD COR MEMBER	1 0 0 0	X						0	0	0
Martin J Fino PhD COR MEMBER	1 0 0 0	X						0	0	0
Mary A Fnstad PhD COR MEMBER	1 0 0 0	X						0	0	0
BraVada M Garrett-Akinsanya PhD COR MEMBER	1 0 0 0	X						0	0	0
Courtney Osmus Ghormley PhD COR MEMBER	1 0 0 0	X						0	0	0
Steven Neal Gold PhD COR MEMBER	1 0 0 0	X						0	0	0
Kimberly A Gorgens PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0
Beverly Greene PhD COR MEMBER	1 0 0 0	X						832	0	0
Lorraine W Greene PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Barney Greenspan PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0
Lisa R Grossman JD PhD COR MEMBER	1 0 0 0	X						0	0	0
William B Gunn PhD COR MEMBER	1 0 0 0	X						0	0	0
Douglas C Haldeman PhD COR MEMBER	1 0 0 0	X						0	0	0
Cheryl L Hall PhD COR MEMBER	1 0 0 0	X						0	0	0
Jane K Harmon-Jacobs PhD COR MEMBER	1 0 0 0	X						0	0	0
Michele Harway PhD COR MEMBER	1 0 0 0	X						0	0	0
William L Hathaway PhD COR MEMBER	1 0 0 0	X						0	0	0
David L Hayes PhD COR MEMBER	1 0 0 0	X						0	0	0
Kate F Hays PhD COR MEMBER	1 0 0 0	X						1,129	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Angela O Herzog PhD COR MEMBER	1 0 0 0	X						0	0	0
Walter J Hillabrant PhD COR MEMBER	1 0 0 0	X						0	0	0
Karen L Hollis PhD COR MEMBER	1 0 0 0	X						0	0	0
Tammy L Hughes PhD COR MEMBER	1 0 0 0	X						1,500	0	0
Laura W Hughes PsyD COR MEMBER	1 0 0 0	X						0	0	0
Larry C James PhD COR MEMBER	1 0 0 0	X						0	0	0
Gregory Scott Jurenc PhD COR MEMBER	1 0 0 0	X						0	0	0
Lynn R Kahle PhD COR MEMBER	1 0 0 0	X						0	0	0
Peter S Kanans PhD COR MEMBER	1 0 0 0	X						0	0	0
David Byron Kazar PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mary E Kite PhD COR MEMBER	1 0 0 0	X						0	0	0
Elizabeth A Klonoff PhD COR MEMBER	1 0 0 0	X						1,250	0	0
Deirdre J Knapp PhD COR MEMBER	1 0 0 0	X						0	0	0
Linda K Knauss PhD COR MEMBER	1 0 0 0	X						0	0	0
Keely Kolmes PsyD COR MEMBER	1 0 0 0	X						0	0	0
Mark A Krause PhD COR MEMBER	1 0 0 0	X						0	0	0
Jeanne Mane LeBlanc PhD COR MEMBER	1 0 0 0	X						0	0	0
Kang Lee PhD COR MEMBER	1 0 0 0	X						0	0	0
Ronald F Levant EdD ABPP COR MEMBER	1 0 0 0	X						4,450	0	0
Anthony Liguon PhD COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Lisa Marie Linning PhD COR MEMBER	1 0 0 0	X						0	0	0
Elizabeth Linning PsyD COR MEMBER	1 0 0 0	X						0	0	0
Caleb Loring PsyD COR MEMBER	1 0 0 0	X						0	0	0
Rodney L Lowman PhD COR MEMBER	1 0 0 0	X						0	0	0
Suniya S Luthar PhD COR MEMBER	1 0 0 0	X						0	0	0
Jeffrey J Magnavita PhD COR MEMBER	1 0 0 0	X						0	0	0
Robert Lewis Mapou PhD COR MEMBER	1 0 0 0	X						0	0	0
M Jackson Marr PhD COR MEMBER	1 0 0 0	X						0	0	0
Neil A Massoth PhD COR MEMBER	1 0 0 0	X						0	0	0
Ali M Mattu PhD COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Marsha Dingle McCary PhD COR MEMBER	1 0 0 0	X						0	0	0
Nancy A McGarrah PhD COR MEMBER	1 0 0 0	X						0	0	0
Robert E McGrath PhD COR MEMBER	1 0 0 0	X						0	0	0
John G Mehm PhD COR MEMBER	1 0 0 0	X						0	0	0
Lisa J F Miller PhD COR MEMBER	1 0 0 0	X						3,000	0	0
David Harlow Mills PhD COR MEMBER	1 0 0 0	X						0	0	0
Nancy S Molitor PhD COR MEMBER	1 0 0 0	X						0	0	0
Linda R Mona PhD COR MEMBER	1 0 0 0	X						0	0	0
Eduardo S Morales PhD COR MEMBER	1 0 0 0	X						0	0	0
Donald P Moss PhD COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mandell J Much PhD COR MEMBER	1 0 0 0	X						0	0	0
James Anton Mulick PhD COR MEMBER	1 0 0 0	X						0	0	0
Darlyne G Nemeth PhD COR MEMBER	1 0 0 0	X						0	0	0
Amy Owen Nieberding PhD COR MEMBER	1 0 0 0	X						0	0	0
John C Norcross PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0
Roberta L Nutt PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0
Bruce D Nystrom PhD COR MEMBER	1 0 0 0	X						0	0	0
Patrick O'Neill PhD COR MEMBER	1 0 0 0	X						0	0	0
Lisa M Osbeck PhD COR MEMBER	1 0 0 0	X						1,000	0	0
J Bruce Overmier PhD COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Nicky Ozbek PhD COR MEMBER	1 0 0 0	X						0	0	0
Patncia A Parmelee PhD COR MEMBER	1 0 0 0	X						0	0	0
Lawrence Mark Perlman PhD COR MEMBER	1 0 0 0	X						0	0	0
Paula R Pietromonaco PhD COR MEMBER	1 0 0 0	X						3,930	0	0
Clare K Porac PhD COR MEMBER	1 0 0 0	X						0	0	0
Natalie Porter PhD COR MEMBER	1 0 0 0	X						0	0	0
Steven J Reisner PhD COR MEMBER	1 0 0 0	X						0	0	0
Robert J Resnick PhD COR MEMBER	1 0 0 0	X						0	0	0
Celiane M Rey-Casserly PhD COR MEMBER	1 0 0 0	X						0	0	0
Chen Smith Reynolds PhD COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Michael C Roberts PhD COR MEMBER	1 0 0 0	X						8,750	0	0
Michael R Rodriguez PhD COR MEMBER	1 0 0 0	X						0	0	0
Dolly C Sadow PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0
Dianne S Salter PhD JD COR MEMBER	1 0 0 0	X						0	0	0
Edward Lee Santos PhD COR MEMBER	1 0 0 0	X						0	0	0
Clifton J Saper PhD COR MEMBER	1 0 0 0	X						0	0	0
Douglas S Saunders PhD COR MEMBER	1 0 0 0	X						0	0	0
K Warner Schaie PhD ABPP COR MEMBER	1 0 0 0	X						0	0	0
Stephen D Scott PhD COR MEMBER	1 0 0 0	X						0	0	0
Kenneth J Sher PhD COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Peter L Sheras PhD COR MEMBER	1 0 0 0	X						1,225	0	0
Bruce Naim Smith PhD COR MEMBER	1 0 0 0	X						0	0	0
Linda C Sobell PhD COR MEMBER	1 0 0 0	X						0	0	0
Mark B Sobell PhD COR MEMBER	1 0 0 0	X						0	0	0
Bonnie R Strckland PhD COR MEMBER	1 0 0 0	X						0	0	0
Ten L Strong PhD COR MEMBER	1 0 0 0	X						0	0	0
David T Susman PhD COR MEMBER	1 0 0 0	X						0	0	0
Gyda Swaney PhD COR MEMBER	1 0 0 0	X						0	0	0
Harold Takooshian PhD COR MEMBER	1 0 0 0	X						0	0	0
Lori Foster Thompson PhD COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Louis Turchetta EdD COR MEMBER	1 0 0 0	X						0	0	0
Daniel L Ullman PhD COR MEMBER	1 0 0 0	X						0	0	0
Susana P Urbina PhD COR MEMBER	1 0 0 0	X						0	0	0
Luis A Vazquez PhD COR MEMBER	1 0 0 0	X						0	0	0
Lenore E Walker EdD COR MEMBER	1 0 0 0	X						0	0	0
Danny Wedding PhD COR MEMBER	1 0 0 0	X						25,235	0	0
Deborah L Whetzel PhD COR MEMBER	1 0 0 0	X						0	0	0
Ellen W Williams PhD COR MEMBER	1 0 0 0	X						0	0	0
Wendy Rose Williams PhD COR MEMBER	1 0 0 0	X						0	0	0
Robert H Woody PhD JD COR MEMBER	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Frank C Worrell PhD COR MEMBER	1 0 0 0	X						0	0	0
Jeffrey N Younggren PhD COR MEMBER	1 0 0 0	X						0	0	0
Barbara L Ziegler PhD COR MEMBER	1 0 0 0	X						0	0	0
NORMAN B ANDERSON PHD EVP/CEO	37 0 1 0			X				862,651	0	117,637
ARCHIE L TURNER CFO/COO	38 0 0 0			X				410,065	0	121,014
TONY F HABASH DSC CHIEF INFORMATION OFFICER	38 0 0 0				X			430,302	0	119,954
MICHAEL HONAKER PHD DEPUTY CEO	38 0 0 0				X			775,085	0	38,186
KATHERINE C NORDAL PHD ED, PROF PRAC & INTRM DIR, ETH	30 0 8 0				X			321,482	0	63,680
GWENDOLYN P KEITA PHD ED, PUBLIC INTEREST	38 0 0 0				X			403,622	0	72,237
JAIME DIAZ-GRANADOS PHD ED, EDUCATION	38 0 0 0				X			270,641	0	33,607

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RHEA K FARBERMAN ED, PUBLIC & MEMBER COMMUNIC	38 0 0 0				X			372,007	0	48,021
HAROLD KURTZMAN PHD ED, SCIENCE(ACTING)	38 0 0 0				X			238,879	0	23,266
NATHALIE P GILFOYLE JD GENERAL COUNSEL	38 0 0 0				X			393,117	0	28,085
GARY R VANDENBOS PHD ED, PUBS & COMM PUBLISHER	38 0 0 0				X			366,123	0	37,687
JASPER SIMONS MA ED, PUBS & COMM PUBLISHER	38 0 0 0				X			273,255	0	26,376
NANCY MOORE PHD MBA ED, GOVERNANCE AFFAIRS	38 0 0 0					X		319,326	0	62,157
PETER M GAVIORNO SENIOR DIR, SALES & MARKETING	38 0 0 0					X		236,107	0	38,820
SUSAN J A HARRIS SENIOR DIR, BUS & PLANNING	38 0 0 0					X		250,389	0	17,392
ELISABETH R STRAUS EXEC VP/EXEC DIR, APF	38 0 0 0					X		275,703	0	26,338
RANDY E PHELPS SENIOR ADVISOR, PRAC DIR	20 0 18 0					X		230,299	0	42,266

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2015

Open to Public Inspection

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.

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

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

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

☐

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

☐

A school described in **section 170(b)(1)(A)(ii).**(Attach Schedule E (Form 990 or 990-EZ))
- 3

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☒

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

☐

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

☐

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

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations
- g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years.If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage						
14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))					14	
15 Public support percentage for 2014 Schedule A, Part II, line 14					15	
16a 33 1/3% support test—2015.If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>						
b 33 1/3% support test—2014.If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>						
17a 10%-facts-and-circumstances test—2015.If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ► <input type="checkbox"/>						
b 10%-facts-and-circumstances test—2014.If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ► <input type="checkbox"/>						
18 Private foundation.If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>						

Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	3,262,611	2,785,859	2,534,834	1,798,443	1,948,661	12,330,408
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	99,052,430	99,412,066	105,117,603	107,268,961	106,077,905	516,928,965
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	102,315,041	102,197,925	107,652,437	109,067,404	108,026,566	529,259,373
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0			0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0					0
c Add lines 7a and 7b	0	0	0			0
8 Public support. (Subtract line 7c from line 6.)						529,259,373

Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
9 Amounts from line 6	102,315,041	102,197,925	107,652,437	109,067,404	108,026,566	529,259,373
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	15,306,622	5,112,911	13,927,582	7,863,264	7,214,321	49,424,700
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	2,507,232	2,663,199	2,571,189	2,356,371	2,069,096	12,167,087
c Add lines 10a and 10b	17,813,854	7,776,110	16,498,771	10,219,635	9,283,417	61,591,787
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
13 Total support. (Add lines 9, 10c, 11, and 12.)	120,128,895	109,974,035	124,151,208	119,287,039	117,309,983	590,851,160
14 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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	89.576 %
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	88.749 %

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	10.424 %
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	11.251 %
19a 33 1/3% support tests—2015. 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 <input checked="" type="checkbox"/>		
b 33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input type="checkbox"/>		

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

	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	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
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.	3c	
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)? 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? If "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	
10a 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	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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	

Part IV

Supporting Organizations (continued)

Section 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? <i>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.</i>		
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? <i>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.</i>		

Section 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)? <i>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).</i>		

Section 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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a 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? <i>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.</i>		
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? <i>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.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a 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? Provide details in Part VI.		
b 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.		

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 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-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013.			
e From 2014.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013.			
d From 2014.			
e From 2015.			

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 C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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2015
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If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

If the organization answered "Yes" on 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" on 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 AMERICAN PSYCHOLOGICAL ASSOCIATION INC	Employer identification number 53-0205890
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$ _____
3	Volunteer hours	_____

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

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$ _____
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$ _____
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV	

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$ _____
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$ _____
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$ _____
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

Part II-A

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	15,164													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	716,632													
c	Total lobbying expenditures (add lines 1a and 1b)	731,796													
d	Other exempt purpose expenditures	90,174,000													
e	Total exempt purpose expenditures (add lines 1c and 1d)	90,905,796													
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000													
<table><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
h	Subtract line 1g from line 1a If zero or less, enter -0-														
i	Subtract line 1f from line 1c If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?														

☐ Yes

☐ No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a)2012	(b)2013	(c)2014	(d)2015	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	522,368	596,037	573,836	731,796	2,424,037
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	7,192	9,297	8,209	15,164	39,862

Part II-B

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

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

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION INC	Employer identification number 53-0205890
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds 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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1	Purpose(s) of conservation easements held by the organization (check all that apply) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or education)<div><input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space</div><input type="checkbox"/> Preservation of an historically important land area <input type="checkbox"/> Preservation of a certified historic structure</div>
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►
4	Number of states where property subject to conservation easement is located ►
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4) (B)(i) and section 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
(i)	Revenue included on Form 990, Part VIII, line 1 ► \$
(ii)	Assets included in Form 990, Part X ► \$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
a	Revenue included on Form 990, Part VIII, line 1 ► \$
b	Assets included in Form 990, Part X ► \$

Part III

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

(continued)

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

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

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

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

☐ Yes

☒ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☒ Yes

☐ No

b

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

☒

Part V

Endowment Funds.

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

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

2

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

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Temporarily restricted endowment ▶

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

3a

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

(i) unrelated organizations

(ii) related organizations

3a(i)

☐

Yes

3a(ii)

☐

No

b

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

3b

☐

4

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

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a)Cost or other basis (investment)	(b)Cost or other basis (other)	Accumulated (c)depreciation	(d)Book value
1a Land		9,705,321		9,705,321
b Buildings		130,139,473	65,724,208	64,415,265
c Leasehold improvements		4,818,045	4,580,674	237,371
d Equipment		26,653,508	18,261,501	8,392,007
e Other		6,213,084	4,972,785	1,240,299
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶				83,990,263

Schedule D (Form 990) 2015

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	127,474,052
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-6,226,532
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	-3,369,338
e	Add lines 2a through 2d	2e	-9,595,870
3	Subtract line 2e from line 1	3	137,069,922
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	522,060
b	Other (Describe in Part XIII)	4b	-19,773,244
c	Add lines 4a and 4b	4c	-19,251,184
5	Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12)	5	117,818,738

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	143,951,108
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	-5,306,961
e	Add lines 2a through 2d	2e	-5,306,961
3	Subtract line 2e from line 1	3	149,258,069
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	522,060
b	Other (Describe in Part XIII)	4b	-19,773,244
c	Add lines 4a and 4b	4c	-19,251,184
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	130,006,885

Part XIII

Supplemental Information

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

Return Reference	Explanation
SCHEDULE D, PART IV, LINE 2B	APA IS AFFILIATED WITH 54 DIVISIONS THAT REPRESENT MAJOR SCIENTIFIC AND PROFESSIONAL INTERESTS. THE DIVISIONS OPERATE INDEPENDENTLY FROM APA. UPON REQUEST, APA WILL ACT AS A COLLECTION AGENT FOR DUES AND ASSESSMENTS PAID BY THE DIVISIONS' MEMBERS. AMOUNTS COLLECTED AND HELD BY APA ON BEHALF OF THE DIVISIONS ARE INCLUDED IN CURRENT ASSETS AND CURRENT LIABILITIES IN THE ACCOMPANYING CONSOLIDATED STATEMENTS OF FINANCIAL POSITION. CASH AND CASH EQUIVALENTS AND INVESTMENTS HELD ON BEHALF OF THE DIVISIONS TOTALED \$9,965,353 AND \$10,230,162 AS OF DECEMBER 31, 2015 AND 2014, RESPECTIVELY.

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation
SCHEDULE D, PART XI, LINE 2D	OTHER REVENUE ON BOOKS BUT NOT ON RETURN REVENUE OF AFFILIATES 4,430,568 INTERCOMPANY ELIMINATIONS (16,263,768) INTEREST IN LLC ADJUSTMENT 8,463,862 ---- ----- TOTAL (3,369,338)
SCHEDULE D, PART XI, LINE 4B	OTHER REVENUE ON RETURN BUT NOT ON BOOKS RENTAL EXPENSES INCLUDED IN REVENUE (19,773,244) ----- Total (19,773,244)
SCHEDULE D, PART XII, LINE 2D	OTHER EXPENSES ON BOOKS BUT NOT ON RETURN EXPENSES OF AFFILIATES 4,263,658 INTERCOMPANY ELIMINATIONS (8,748,392) UNREALIZED LOSS ON INTEREST RATE SWAPS (822,227) ----- TOTAL (5,306,961)
SCHEDULE D, PART XII, LINE 4B	OTHER EXPENSES ON RETURN BUT NOT ON BOOKS RENTAL EXPENSES INCLUDED IN REVENUE (19,773,244) ----- TOTAL (19,773,244)

2015

**Open to Public
Inspection**

53-0205890

☒ Yes ☐ No

(h) Purpose of grant or assistance

Schedule I (Form 990) 2015

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Additional Data Table					

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
SCHEDULE I, PART I, LINE 2	PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS INDIVIDUALS AND/OR ORGANIZATIONS RECEIVING DISBURSEMENTS FROM THE ORGANIZATION IN FURTHERANCE OF ITS EXEMPT PROGRAMS ARE ADEQUATELY INVESTIGATED TO ENSURE THAT THEY ARE QUALIFYING RECIPIENTS. PROCEDURES ARE FOLLOWED TO CONFIRM THAT DISCRIMINATION DOES NOT FACTOR IN ASSIGNING GRANTS. IN ADDITION, GRANTEEES ARE REQUIRED TO PROVIDE REPORTS WITH RESPECT TO THE USE OF GRANT FUNDS, AND APA REVIEWS REPORTS TO INSURE ALL GRANT FUNDS ARE USED FOR CHARITABLE PURPOSES.

Additional Data

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

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Board of County CommissionersPalm Beach 301 N OLIVE AVE 1201 West Palm Beach, FL 33401	59-6000785	PALM BEACH CTY	14,900				APA Internship Grant
Boards of Regents Nevada Sys of Higher Educ 5550 W FLAMINGO RD Las Vegas, NV 89103	88-6000024	PUBLIC SCHOOL	20,000				APA Internship Grant
Brattleboro Retreat 75 LINDEN ST Brattleboro, VT 05301	03-0107360	501(C)(3)	9,650				APA Internship 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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
County of San Mateo 555 COUNTY CENTER Redwood City, CA 94063	94-6000532	SAN MATEO CTY	20,000				APA Internship Grant
Devereux PO BOX 219 Rutland, MA 01543	23-1390618	501(C)(3)	20,000				APA Internship Grant
Frontier Health 1167 SPRATLIN PARK Johnson City, TN 37615	62-0582605	501(C)(3)	15,400				APA Internship 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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HealthPoint 200 S 2ND ST Renten, WA 98057	91-0884412	501(C)(3)	20,000				APA Internship Grant
North Philadelphia Health System 801 W GIRARD AVE Philadelphia, PA 19122	23-2610538	501(C)(3)	20,000				APA Internship Grant
Spectrum Health Primary Care Partners 2249 WEALTHY ST SE STE 110 Grand RapidS, MI 49506	38-1358164	501(C)(3)	20,000				APA Internship 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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
State of Maine 72 STATE HOUSE STATION Augusta, ME 04333	01-6000001	STATE OF MAINE	20,000				APA Internship Grant
The Childrens Assessment Ctr Foundation 2500 BOLSOVER ST Houston, TX 77005	76-0458780	501(C)(3)	20,000				APA Internship Grant
Western Carolina University 176 CENTRAL DR Cullohee, NC 28723	56-6001440	501(C)(3)	7,900				APA Internship 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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The University of Texas Health Science 7000 FANNIN Houston, TX 77054	74-1761309	501(C)(3)	24,000				APA Internship Grant/ProDIGs Grant Award
University of South Florida 7300 LAKE ELLENOR DR Orlando, FL 32886	59-3102112	501(C)(3)	7,000				CEMRRAT2 Implementation Grant
Connecticut Psychological Association 60 KINGS HWY North Haven, CT 06473	06-0919890	501(C)(3)	5,500				CEMRRAT2 Implementation Grant/Smoking Dissemination Award

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Georgia State University 33 GILMER ST Atlanta, GA 30302	58-1845423	501(C)(3)	5,500				CEMRRAT2 Implementation Grant/Smoking Dissemination Award
National Academy of Sciences 2101 CONSTITUTION AVE NW Washington, DC 20001	53-0196932	501(C)(3)	10,000				DBASSE/IOM Forum on Promoting Children's Cognitive
American Psychological Foundation 750 FIRST ST NE Washington, DC 20002	52-6051733	501(C)(3)	100,000				General Support

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Akron Center for the History of Psy 302 BUCHTEL COMMON Akron, OH 44325	34-6002924	501(C)(3)	75,000				General Support
Biola University Inc 13800 BIOLA AVENUE La Mirada, CA 90639	95-0549600	501(C)(3)	20,000				Grant For Seed Funding To Pursue APA Accreditation
Cleveland Clinic Children's Hosp for Rehab 2801 MARTIN LUTHER KING JR DR CLEVELAND, OH 44104	34-0714570	501(C)(3)	20,000				Grant For Seed Funding To Pursue APA Accreditation

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GA Southern Univ Research & Svc Foundation Inc 1332 SOUTHERN DRIVE Statesboro, GA 30460	58-2354256	501(C)(3)	9,550				Grant For Seed Funding To Pursue APA Accreditation
George Washington Univ 2121 EYE STREET NW Ashburn, VA 20147	53-0196584	501(C)(3)	20,000				Grant For Seed Funding To Pursue APA Accreditation
Hamilton-Madison House Inc 253 SOUTH ST FL 2 New York, NY 10002	13-5562412	501(C)(3)	20,000				Grant For Seed Funding To Pursue APA Accreditation

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Heart of America Psychology 3557 SOUTH AVE Springfield, MO 65807	20-0377230	501(C)(3)	20,000				Grant For Seed Funding To Pursue APA Accreditation
Lake Forest College 555 N SHERIDAN RD Lake Forest, IL 60045	36-2167770	501(C)(3)	16,050				Grant For Seed Funding To Pursue APA Accreditation
Middlesex Hospital 28 CROSS ST Middletown, CT 06457	06-0646718	501(C)(3)	7,900				Grant For Seed Funding To Pursue APA Accreditation

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Rutgers University 57 US HIGHWAY 1 New Brunswick, NJ 08901	23-7318742	501(C)(3)	20,000				Grant For Seed Funding To Pursue APA Accreditation
University Healthcare Physicians Inc 2500 FOUNDATION WAY Martinsburg, WV 25401	90-0893455	501(C)(3)	20,000				Grant For Seed Funding To Pursue APA Accreditation
University of Washington-Tacoma 1900 COMMERCE STREET Tacoma, WA 98402	91-6001537	501(C)(3)	20,000				Grant For Seed Funding To Pursue APA Accreditation

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Western Interstate Commission for Higher Education 3035 CENTER GREEN DRIVE SUITE 200 Boulder, CO 80301	84-6008945	501(C)(3)	59,881				Grant For Seed Funding To Pursue APA Accreditation
Genesys Health Foundation ONE GENESYS PKWY Grand Blanc, MI 48439	38-3591148	501(C)(3)	12,000				Integrated Care Small Grant Program
George Fox University 414 N MERIDIAN STREET Newberg, OR 97132	93-0386839	501(C)(3)	6,000				Integrated Care Small Grant Program

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Nemours Foundation 1600 ROCKLAND ROAD Wilmington, DE 19803	59-0634433	501(C)(3)	12,000				Integrated Care Small Grant Program
The Ohio State University 281 W LANE AVE Columbus, OH 43210	31-6025986	501(C)(3)	12,000				Integrated Care Small Grant Program
University of Colorado Denver 1250 14TH STREET Denver, CO 80291	84-6049811	501(C)(3)	11,970				Integrated Care Small Grant Program

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of South Florida 4202 EAST FOWLER AVE Tampa, FL 33620	59-3102112	501(C)(3)	20,000				Internship Stimulus Grant
Texas A&M International University 5201 UNIVERSITY BOULEVARD Laredo, TX 78041	74-2515406	501(C)(3)	8,200				ProDIGs Grant Award
University of Arkansas at Pine Bluff 1200 NORTH UNIVERSITY DRIVE Pine Bluff, AR 71601	71-0503764	501(C)(3)	6,200				ProDIGs Grant Award

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Massachusetts- Boston 100 MORRISSEY BLVD Boston, MA 02125	04-6013152	501(C)(3)	7,508				ProDIGs Grant Award
University of San Francisco 2130 FULTON STREET San Francisco, CA 94117	94-1156628	501(C)(3)	8,020				ProDIGs Grant Award
University of Maryland 1103 LEE BLDG College Park, MD 20742	52-6002033	501(C)(3)	6,163				ProDigs Grant Award/Smoking Dissemination Award

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Give an Hour Nonprofit Corporation 5137 WESTPATH WAY Bethesda, MD 20824	61-1493378	501(C)(3)	30,000				Sponsorship

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(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
APA STUDENT TRAVEL AWARD	100	30,000			
DOCTORAL DISSERTATION RESEARCH SUPPORT	48	51,669			
ACADEMIC ENHANCEMENT INITIATIVE FELLOWSHIP PROGRAM	41	152,558			
CEMRRAT2 STUDENT TRAVEL GRANT	10	9,063			
MINORITY FELLOWSHIP PROGRAM	73	904,144			
INTERNATIONAL CONGRESS OF PSYCHOLOGY	21	5,368			
BASIC PSYCHOLOGY SCIENCE RESEARCH GRANT	12	12,000			
APA EDUCATIONAL GRANT AWARDS	8	12,900			
APAGS DIVERSITY DISSERTATION/JR SCIENTIST FELLOW	12	7,500			

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax indemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment?	4a Yes	
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b Yes	
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c	No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?	5a Yes	
b Any related organization? If "Yes," on line 5a or 5b, describe in Part III	5b	No
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization?	6a	No
b Any related organization? If "Yes," on line 6a or 6b, describe in Part III	6b	No
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

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

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
SCHEDULE J, PART I, LINE 1A	HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES THE CEO'S HEALTH CLUB DUES ARE PAID BY THE ORGANIZATION AND TREATED AS TAXABLE INCOME TO THE CEO
SCHEDULE J, PART I, LINE 4A - SEVERANCE	\$197,743 - NORMAN B ANDERSON PHD \$425,546 - MICHAEL HONAKER PHD \$143,991 - RHEA K FARBERMAN \$363,408 - STEVEN J BRECKLER PHD
SCHEDULE J, PART I, LINE 4B - SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	APA PROVIDES AN EXECUTIVE SUPPLEMENTAL COMPENSATION AND TERMINATION BENEFIT ALLOWANCE TO ELIGIBLE EMPLOYEES \$78,407 - NORMAN B ANDERSON \$75,658 - ARCHIE L TURNER \$74,298 - TONY F HABASH \$4,466 - MICHAEL HONAKER \$36,077 - KATHERINE C NORDAL \$35,122 - GWENDOLYN P KEITA \$6,046 - RHEA K FARBERMAN \$34,621 - NANCY MOORE
SCHEDULE J, PART I, LINE 5A	COMMISSION FOR SALE OF PUBLICATION PETER GAVIORNO \$62,246

Additional Data

Software ID:

Software Version:

EIN: 53-0205890

Name: AMERICAN PSYCHOLOGICAL ASSOCIATION INC

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1NORMAN B ANDERSON PHD EVP/CEO	(i)	593,229	66,168	203,254	94,307	23,330	980,288	0
	(ii)	0	0	0	0	-0	-0	0
1ARCHIE L TURNERCFO/COO	(i)	403,651	0	6,414	91,558	29,456	531,079	0
	(ii)	0	0	0	0	-0	-0	0
2TONY F HABASH DSC CHIEF INFORMATION OFFICER	(i)	429,618	0	684	90,298	29,656	550,256	0
	(ii)	0	0	0	0	-0	-0	0
3MICHAEL HONAKER PHD DEPUTY CEO	(i)	215,704	132,066	427,315	17,469	20,717	813,271	132,066
	(ii)	0	0	0	0	-0	-0	0
4KATHERINE C NORDAL PHD ED, PROF PRAC & INTRM DIR, ETH	(i)	315,068	0	6,414	51,977	11,703	385,162	0
	(ii)	0	0	0	0	-0	-0	0
5GWENDOLYN P KEITA PHD ED, PUBLIC INTEREST	(i)	277,904	118,999	6,719	51,022	21,215	475,859	118,999
	(ii)	0	0	0	0	-0	-0	0
6JAIME DIAZ-GRANADOS PHD ED, EDUCATION	(i)	270,567	0	74	5,116	28,491	304,248	0
	(ii)	0	0	0	0	-0	-0	0
7RHEA K FARBERMAN ED, PUBLIC & MEMBER COMMUNIC	(i)	224,526	1,612	145,869	19,869	28,152	420,028	0
	(ii)	0	0	0	0	-0	-0	0
8HAROLD KURTZMAN PHD ED, SCIENCE(ACTING)	(i)	226,636	10,437	1,806	12,210	11,056	262,145	0
	(ii)	0	0	0	0	-0	-0	0
9NATHALIE P GILFOYLE JD GENERAL COUNSEL	(i)	386,703	0	6,414	15,900	12,185	421,202	0
	(ii)	0	0	0	0	-0	-0	0
10GARY R VANDENBOS PHD ED, PUBS & COMM PUBLISHER	(i)	360,188	0	5,935	15,900	21,787	403,810	0
	(ii)	0	0	0	0	-0	-0	0
11JASPER SIMONS MA ED, PUBS & COMM PUBLISHER	(i)	272,873	0	382	0	26,376	299,631	0
	(ii)	0	0	0	0	-0	-0	0
12NANCY MOORE PHD MBA ED, GOVERNANCE AFFAIRS	(i)	316,554	0	2,772	50,451	11,706	381,483	0
	(ii)	0	0	0	0	-0	-0	0
13PETER M GAVIORNO SENIOR DIR, SALES & MARKETING	(i)	171,939	62,246	1,922	10,581	28,239	274,927	0
	(ii)	0	0	0	0	-0	-0	0
14SUSAN J A HARRIS SENIOR DIR, BUS & PLANNING	(i)	222,500	22,250	5,639	13,350	4,042	267,781	0
	(ii)	0	0	0	0	-0	-0	0
15ELISABETH R STRAUS EXEC VP/EXEC DIR, APF	(i)	245,396	26,150	4,157	15,063	11,275	302,041	0
	(ii)	0	0	0	0	-0	-0	0
16RANDY E PHELPS SENIOR ADVISOR, PRAC DIR	(i)	224,965	0	5,334	14,082	28,184	272,565	0
	(ii)	0	0	0	0	-0	-0	0
17STEVEN J BRECKLER PHD ED, SCIENCE - KEY EMPLOYEE	(i)	8,627	0	363,481	512	1,209	373,829	0
	(ii)	0	0	0	0	-0	-0	0

Schedule K
(Form 990)

Supplemental Information on Tax Exempt Bonds

Department of the Treasury

Internal Revenue Service

Name of the organization

AMERICAN PSYCHOLOGICAL ASSOCIATION INC

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

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

OMB No 1545-0047

2015

Open to Public Inspection

Employer identification number

53-0205890

Part I Bond Issues											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A DISTRICT OF COLUMBIA	53-6001131	254839E66	03-27-2003	21,100,000	LOAN REFINANCING		X		X		X

Part II		Proceeds									
		A		B		C		D			
1	Amount of bonds retired	0									
2	Amount of bonds legally defeased	0									
3	Total proceeds of issue	21,100,000									
4	Gross proceeds in reserve funds	0									
5	Capitalized interest from proceeds	0									
6	Proceeds in refunding escrows	0									
7	Issuance costs from proceeds	422,000									
8	Credit enhancement from proceeds	0									
9	Working capital expenditures from proceeds	506,629									
10	Capital expenditures from proceeds	20,171,371									
11	Other spent proceeds	0									
12	Other unspent proceeds	0									
13	Year of substantial completion	2003									
		Yes	No	Yes	No	Yes	No	Yes	No		
14	Were the bonds issued as part of a current refunding issue?		X								
15	Were the bonds issued as part of an advance refunding issue?		X								
16	Has the final allocation of proceeds been made?	X									
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X									

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

Part III Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	X							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X							
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 470 %							
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	1 460 %							
6	Total of lines 4 and 5	1 930 %							
7	Does the bond issue meet the private security or payment test?	X							
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?.		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?		X						
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X							

Part IV Arbitrage

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

Part IV **Arbitrage** *(Continued)*

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

Part V **Procedures To Undertake Corrective Action**

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

Part VI **Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions).

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

2015

Open to Public Inspection

Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION INC	Employer identification number 53-0205890
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Return Reference	Explanation
FORM 990, PART III, LINE 4D	OTHER PROGRAM SERVICE ACCOMPLISHMENTS THE SCIENCE DIRECTORATE COMMUNICATES, FACILITATES, PROMOTES, AND REPRESENTS PSYCHOLOGICAL SCIENCE AND SCIENTISTS THE DIRECTORATE AWARDS RESEARCH AND TRAVEL GRANTS FOR GRADUATE STUDENTS (148 GRANTS IN 2015), SUPPORTS ADVANCED RESEARCH TRAINING FOR FACULTY AND STUDENTS (4 TRAINING COURSES, MORE THAN 85 PARTICIPANTS ATTENDING IN 2015), DISSEMINATES PSYCHOLOGICAL SCIENCE THROUGH SPECIAL LECTURES AND ELECTRONIC COMMUNICATIONS (9 LECTURES, 22,626 NEWSLETTER SUBSCRIBERS, AND 2,649 TWITTER FOLLOWERS IN 2015), AND PROVIDED A GRANT TO THE ARCHIVES OF AMERICAN HISTORY IN PSYCHOLOGY TO ASSIST WITH ARCHIVAL ACTIVITY (1 GRANT OF \$60,000 IN 2015) THE APA PUBLIC INTEREST DIRECTORATE APPLIES THE SCIENCE AND PRACTICE OF PSYCHOLOGY TO THE FUNDAMENTAL PROBLEMS OF HUMAN WELFARE AND SOCIAL JUSTICE AND THE PROMOTION OF EQUITABLE AND JUST TREATMENT OF ALL SEGMENTS OF SOCIETY THROUGH EDUCATION, TRAINING, AND PUBLIC POLICY IN 2015 THE DIRECTORATE MANAGED MORE THAN \$2 4 MILLION IN FEDERAL AND FOUNDATION GRANTS ADDRESSING VIOLENCE PREVENTION AND CHILD MALTREATMENT, HIV/AIDS RESEARCH, PREVENTION, AND CARE, LESBIAN, GAY, BISEXUAL, AND TRANSGENDER ADULTS, AND ADOLESCENT HEALTH AND WELL-BEING, HEALTH DISPARITIES AND SMOKING CESSATION IN HEALTH PRIORITY GROUPS, WOMENS LEADERSHIP, ETHNIC MINORITY TRAINING, AND WORK, STRESS, AND HEALTH AMONG 2015 APA-FUNDED PROGRAMS AND ACTIVITIES WERE ADVOCACY RELATED TO PUBLIC INTEREST ISSUES, AND ACTIVITIES ADDRESSING PSYCHOLOGICAL ISSUES RELATED TO WOMEN, CHILDREN, YOUTH, AND FAMILIES, LESBIAN, GAY, BISEXUAL, AND TRANSGENDER CONCERNS, RACIAL AND ETHNIC MINORITIES, HIV/AIDS, SOCIOECONOMIC STATUS, VIOLENCE PREVENTION, DISABILITY, AGING, WORK, STRESS, AND HEALTH, HEALTH DISPARITIES, AND HUMAN RIGHTS THE APA PRACTICE DIRECTORATE SUPPORTS AND PROMOTES THE PRACTICE OF PSYCHOLOGY AND THE ACCESSIBILITY AND AVAILABILITY OF MENTAL AND BEHAVIORAL HEALTH SERVICES INCLUDING ADVOCACY FOR ADEQUATE AND APPROPRIATE CONSUMER ACCESS TO PSYCHOLOGICAL SERVICES, DEVELOPMENT OF CLINICAL PRACTICE GUIDELINES AND PROFESSIONAL PRACTICE, A PUBLIC EDUCATION CAMPAIGN FOCUSING ON MIND/BODY HEALTH AND THE CONNECTION BETWEEN PSYCHOLOGICAL AND PHYSICAL HEALTH, THE PUBLIC EDUCATION CAMPAIGN NETWORK, THE ANNUAL STRESS IN AMERICA SURVEY, THE APA HELP CENTER, A WEB-BASED PLATFORM FOR CONSUMER INFORMATION, EDUCATIONAL AND PROFESSIONAL DEVELOPMENT MATERIALS FOR PRACTITIONERS, AND, A DISASTER RESPONSE NETWORK IN COOPERATION WITH THE AMERICAN RED CROSS, AND, STAFFING AND SUPPORT FOR NUMEROUS apa GOVERNANCE AND WORK GROUPS IN PURSUIT OF THEIR EFFORTS ON BEHALF OF PSYCHOLOGY AND THE PUBLIC

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1A	<p>VOTING MEMBERS APA IS GOVERNED BY A COUNCIL OF REPRESENTATIVES COMPRISED OF 173 MEMBERS WHICH MEETS TWICE A YEAR, AND ITS SMALLER BOARD OF DIRECTORS WHICH IS COMPRISED OF APA'S FIVE OFFICERS, PLUS SEVEN AT-LARGE-MEMBERS WHO ARE ALSO COUNCIL MEMBERS THE BOARD OF DIRECTORS MEETS AT LEAST SIX, AND OFTEN AS MANY AS TEN TIMES A YEAR IN PERSON, IN ADDITION TO BI-MONTHLY MEETINGS BY CONFERENCE CALL ALL VOTING BOARD MEMBERS ARE INDEPENDENT EXCEPT THREE THE BOARD OF DIRECTORS IS THE ADMINISTRATIVE AGENT OF COUNCIL, SUPERVISES THE WORK OF THE CHIEF EXECUTIVE OFFICER OF THE ASSOCIATION, AND EXERCISES GENERAL SUPERVISION OVER THE AFFAIRS OF THE ASSOCIATION IN THE INTERVAL BETWEEN THE ANNUAL MEETINGS OF COUNCIL, THE BOARD OF DIRECTORS HAS AUTHORITY TO TAKE SUCH ACTIONS AS ARE NECESSARY FOR THE CONDUCT OF THE ASSOCIATION'S AFFAIRS IN ACCORDANCE WITH THE BYLAWS AND THE POLICIES OF COUNCIL IF AN EMERGENCY IS DECLARED BY A MAJORITY OF THE BOARD OF DIRECTORS, THE BOARD HAS THE POWER TO TAKE ACTIONS AS THOUGH SUCH ACTIONS WERE TAKEN BY COUNCIL THE BOARD OF DIRECTORS CONSISTS OF THE PRESIDENT, THE PRESIDENT-ELECT, THE PAST PRESIDENT, THE RECORDING SECRETARY , THE TREASURER, THE CHIEF EXECUTIVE OFFICER (WITHOUT VOTE), THE APAGS REPRESENTATIVE TO THE COUNCIL OF REPRESENTATIVES, AND SIX OTHERS ELECTED BY THOSE MEMBERS HOLDING SEATS ON COUNCIL</p>

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

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

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	FORM 990 REVIEW PROCESS THE APA AUDIT SUBCOMMITTEE PERFORMS A THOROUGH REVIEW OF A DRAFT OF THE IRS FORM 990, AS DOES MANAGEMENT SUBSEQUENT TO THEIR REVIEWS THE RETURN IS FINALIZED AND FORWARDED, VIA E-MAIL, TO THE BOARD OF DIRECTORS AND COUNCIL OF REPRESENTATIVES BEFORE IT IS FILED WITH THE IRS

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

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINES 15A AND 15B	<p>DETERMINING COMPENSATION APA IS GOVERNED BY A COUNCIL OF REPRESENTATIVES COMPRISED OF 160 MEMBERS WHICH MEETS TWICE A YEAR, AND ITS SMALLER 12 MEMBER BOARD OF DIRECTORS THE BOARD OF DIRECTORS SETS COMPENSATION FOR SENIOR MANAGEMENT PURSUANT TO A COMPENSATION POLICY THE FULL BOARD SETS COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER (CEO), THE CHIEF FINANCIAL OFFICER (CFO) AND THE DEPUTY CHIEF EXECUTIVE OFFICER (DCEO) BASED ON, AMONG OTHER THINGS, COMPARABILITY DATA FROM AN INDEPENDENT COMPENSATION CONSULTANT, PERFORMANCE MEASURES, AND A REVIEW FOR REASONABLENESS FOR COMPENSATION FOR ASSOCIATION SENIOR EXECUTIVES OTHER THAN THE CEO, CFO AND DCEO, THE CEO MAKES COMPENSATION RECOMMENDATIONS TO THE PERSONNEL AND COMPENSATION COMMITTEE (PCC) OF THE BOARD BASED PRIMARILY ON PERFORMANCE AND COMPARABILITY DATA IN ADDITION THE PCC REVIEWS, ON BEHALF OF THE BOARD, THE CONTRACT PERIOD AND COMPENSATION FOR ANY OTHER KEY EMPLOYEES OF THE ASSOCIATION AS DEFINED IN THE INSTRUCTIONS TO THE 990 CONTEMPORARY MINUTES OF THE DELIBERATION AND DECISIONS OF THE BOARD AND PCC ARE MAINTAINED THE MEMBERS OF THE BOARD OF DIRECTORS RECEIVE HONORARIA FOR THEIR SERVICE ON THE BOARD THESE HONORARIA ARE ESTABLISHED BY THE COUNCIL OF REPRESENTATIVES AND SET OUT IN THE COUNCIL OF REPRESENTATIVES "SELECTED SPENDING POLICY" GUIDELINES THE MEMBERS OF COUNCIL DO NOT RECEIVE HONORARIA, AND THE BOARD OF DIRECTORS DOES NOT HAVE A ROLE IN REVIEWING, SETTING OR RECOMMENDING THE AMOUNT OF ITS OWN HONORARIA</p>

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

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

Return Reference	Explanation
FORM 990, PART VII, SECTION A - OFFICERS	THE PERSONS LISTED AS PRESIDENT, TREASURER, PAST PRESIDENT, PRESIDENT ELECT, AND RECORDING SECRETARY ARE MEMBERS OF THE BOARD OF DIRECTORS WHO HAVE LEADERSHIP ROLES WITH THE BOARD ALTHOUGH TECHNICALLY REFERRED TO AS OFFICERS, THEIR SERVICES TO APA ARE PROVIDED SOLELY AS PART OF THEIR BOARD LEADERSHIP RESPONSIBILITIES

Return Reference	Explanation
FORM 990, PART XI, LINE 9	OTHER CHANGES IN NET ASSETS OR FUND BALANCES UNREALIZED HOLDING LOSS ON INTEREST RATE SWAPS (822,225)

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION INC	Employer identification number 53-0205890
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Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) APA 750 LLC 750 1ST STREET NE WASHINGTON, DC 20002 53-0205890	RE RENTAL	DE	15,227,777	60,160,883	APA
(2) APA TEN G LLC 750 1ST STREET NE Washington, DC 20002 52-1890269	RE RENTAL	DE	12,777,791	48,115,356	APA
(3) CONFERENCE CENTER RETURN LLC 750 1ST STREET NE WASHINGTON, DC 20002 53-0205890	RE RENTAL	DE	246,029	1,434,306	APA 750

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) APA PRACTICE ORGANIZATION 750 1ST STREET NE WASHINGTON, DC 20002 52-2262136	MEMBERSHIP	DC	501(C)(6)		NA		No

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)
.

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c		No
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m		No
1n	Yes	
1o	Yes	
1p		No
1q	Yes	
1r		No
1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)APA PRACTICE ORGANIZATION	n	907,482	FMV
(2)APA PRACTICE ORGANIZATION	o	1,235,495	FMV
(3)APA PRACTICE ORGANIZATION	q	1,235,495	FMV

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

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
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