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DLN: 93493320125136

Department of the Treasury

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

Return of Organization Exempt From Income Tax

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

Intern	al Re	venue Ser	vice					Inspection
A F	or ti	ne 2015 (calendar year, or tax year be	eginning 01-01-2015 , and ending 12-31	-2015			
B Ch	eck ıf	applicable	e Name of organization AMERICAN PSYCHOLOGICAL	ASSOCIATION INC		D Empl	oyer ide	ntification number
┌ A	ddres	s change	GROUP RETURN			54-1	57259	0
\square N	ame	change	% APA FINANCIAL SERVICE (Doing business as	OFFICE				
		eturn						
Feturn		nnated	Number and street (or P O	box if mail is not delivered to street address) Roo	m/suite	E Teleph	none num	ber
_		ed return	750 FIRST STREET NE			(202) 218-3	3984
_		ion pendir		ice, country, and ZIP or foreign postal code				
			WASHINGTON, DC 20002			G Gross	receipts	\$ 12,247,592
			F Name and address of	principal officer	H(a) Is this a grou	p return	for
			ARCHIE L TURNER 750 FIRST STREET NE			subordinates	•	✓ Yes
			WASHINGTON, DC 200	002		No	l	
I Ta	ıx-ex	empt statı	JS	() ◀ (insert no)	_) Are all subord included?	imates	√ Yes No
7 14	labai	ita. b 14		() ((,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		If "No," attac	h a lıst	(see instructions)
	ebsi	ite: ► w	/WW APA ORG		H(c) Group exemp	tion nui	mber ▶ 3263
K For	m of	organizatio	on 🔽 Corporation 🗆 Trust 🗀	Association Other >	L	Year of formation	М	State of legal domicile
Pa	rt i		mmary					
			_	nission or most significant activities EDUCATION, SCIENTIFIC STUDY, HU	MAN WEI	FADE DDOMOT	I O N A N	ID INFORMATION
				NCEMENT OF THOSE PSYCHOLOGY D			IONAN	ID INTORMATION
ic e								
Governance								
Ven	١,	Charle	*h h *			then 250/ -5.th		
Ġ S	^	Check	this box P If the organiza	ition discontinued its operations or dispo	sea or mor	e than 25% or it	.s net a:	ssets
	3	Numbe	r of voting members of the g	overning body (Part VI, line 1a)			3	630
es.			-	nbers of the governing body (Part VI, line			4	630
¥			·	red in calendar year 2015 (Part V, line 2a	•		5	0
Activities &				ate if necessary)	•		6	1,659
•			,	rom Part VIII, column (C), line 12			7a	9,145
				ome from Form 990-T, line 34			7b	3,1.0
	 			· · · · · · · · · · · · · · · · · · ·		Prior Year		Current Year
	8	Con	tributions and grants (Part V	/III,line 1h)	—	2,201	.603	2,244,808
9:	9		= '	VIII, line 2g)		1,130,370		1,674,574
ën uë ve			·	column (A), lines 3, 4, and 7d)		,797	834,876	
ã	11		· ·	nn (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	2,732	` 	2,790,425
	12			ugh 11 (must equal Part VIII, column (A)				
		12)				7,038	,1 / 3	7,544,683
	13	Gran	nts and similar amounts paid	d (Part IX, column (A), lines 1-3)		182	,827	232,551
	14	Bene	efits paid to or for members	(Part IX, column (A), line 4)		0	0	
S	15							0
ક		5-1	•	TVlune (A) lune d d e)			0	
Expenses	16		fessional fundraising fees (P			0		
ă	Ь		fundraising expenses (Part IX, col	· · · · · · · · · · · · · · · · · · ·	- -		0.65	F 0 4 7 4 1 1
	17		er expenses (Part IX, colum	5,395		5,867,618		
	18		•	.7 (must equal Part IX, column (A), line 2	· —	5,577		6,100,169
	19	кеч	enue less expenses. Subtrac	ct line 18 from line 12	• •	1,460	,Z Q T	1,444,514
Net Assets or Fund Balances					Beg	Jinning of Current	Year	End of Year
e e e	20	Tota	al assets (Part X, line 16)			22,479	,184	22,965,502
Ž ¥	21							1,563,114
ξŠ							,975	21,402,388
Pa	rt I	I Sig	nature Block		<u> </u>			
				eve examined this return, including accon				
			d belief, it is true, correct, ai knowledge	nd complete Declaration of preparer (oth	er than off	licer) is based or	n all info	ormation of which
cp		uniy						
		_ I B	***			2016-11-15		
Sigi	n Signa		gnature of officer			Date		
			CHIE I TURNER COO/CEO					
Her			CHIE L TURNER COO/CFO					
Her ——			pe or print name and title		Te :		T=	
	e 			Preparer's signature Jeffrey J Schragg	Date	Check I if	PTIN P0023	4543
	e d	Ту	pe or print name and title Print/Type preparer's name Jeffrey J Schragg		Date	self-employed	P0023	4543
Pai Pre	e d pai	rer	pe or print name and title Print/Type preparer's name	Jeffrey J Schragg	Date		P00234	

MCLEAN, VA 22102

. ✓Yes No

Par	t 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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🔰	10	Yes	
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			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
	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
	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	11 c		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	11 d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11 f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12 a		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	12 b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "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
	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		

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Yes

Form 990 (2015)

	(,				
ΤV	Char	klist of	Peguired	Schadulas	(continued)

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24 c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

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

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?

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Part V Statements Regarding Other IRS Filings and Tax Complian

Par	t V	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this		V			
		Check if Schedule O contains a response of flote to any line in this	rait	<u>v</u>		Yes	No No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	319		103	110
		the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
		L ie organization comply with backup withholding rules for reportable payments to	vend	lors and reportable			
·		g (gambling) winnings to prize winners?		· · · · · ·	1 c		
2a	Enter	the number of employees reported on Form W-3, Transmittal of Wage and					
		tatements, filed for the calendar year ending with or within the year covered	2a	0			
h	•	s return		_	2b		
U		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file					
3a	Did th	ie organization have unrelated business gross income of \$1,000 or more during	the '	year [?]	3a	Yes	
b	If "Ye	s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanatio</i>	on in S	Schedule O	3b	Yes	
4a	Atany	y time during the calendar year, did the organization have an interest in, or a sig	gnatu	re or other authority			
		a financial account in a foreign country (such as a bank account, securities acc int)?	ount	, or other financial	4a		No
h		,					110
b		s," enter the name of the foreign country ▶	and	Financial Accounts			
	(FBAF		and	i illanciai Accounts			
5a	Was t	he organization a party to a prohibited tax shelter transaction at any time durin	g the	tax year?	5a		No
		ny taxable party notify the organization that it was or is a party to a prohibited t			5b		No
С	If"Ye	s," to line 5a or 5b, did the organization file Form 8886-T?	_				
_		o, to me of or ob, and the organization me round code			5с		
6a		the organization have annual gross receipts that are normally greater than \$10			6a		Νo
h	-	ization solicit any contributions that were not tax deductible as charitable cont s," did the organization include with every solicitation an express statement th					
-		not tax deductible?		· · · ·	6 b		
7	Organ	izations that may receive deductible contributions under section 170(c).					
а		e organization receive a payment in excess of \$75 made partly as a contribution is provided to the payor?		d partly for goods and	7a		Νo
b		s," did the organization notify the donor of the value of the goods or services pr		ed?	7b		
		e organization sell, exchange, or otherwise dispose of tangible personal proper					
		rm 8282?			7 c		No
d	If "Ye	s," indicate the number of Forms 8282 filed during the year	7d				
е	Dıd th	e organization receive any funds, directly or indirectly, to pay premiums on a p	erson	nal benefit contract?	- -		N
f	Did th	e organization, during the year, pay premiums, directly or indirectly, on a perso	nal h	enefit contract?	7e 7f		No No
		organization received a contribution of qualified intellectual property, did the oil			''		110
9	requir		• •	edition me ronn coss do	7 g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles	, dıd	the organization file a			
		1098-C?	•		7h		
8	-	donor advised fund maintaining donor advised runds.	sines	s holdings at any time			
	during	the year?			8		
9a	Did th	e sponsoring organization make any taxable distributions under section 49667			9a		
b	Did th	e sponsoring organization make a distribution to a donor, donor advisor, or rela	ted p	erson ⁷	9b		
10	Section	on 501(c)(7) organizations. Enter					
		tion fees and capital contributions included on Part VIII, line 12	10a				
b	Gross faciliti	receipts, included on Form 990, Part VIII, line 12, for public use of club les	10b				
11		on 501(c)(12) organizations. Enter					
а	Gross	income from members or shareholders	11a				
b		income from other sources (Do not net amounts due or paid to other sources					
	agains	st amounts due or received from them).......... L	11b				
12a	Section	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lıe	eu of Form 1041?	12a		
b		s," enter the amount of tax-exempt interest received or accrued during the	12b				
13	year Sectio	on 501(c)(29) qualified nonprofit health insurance issuers.		l			
а		organization licensed to issue qualified health plans in more than one state? N i Onal information the organization must report on Schedule O	ote. S	See the instructions for	13a		
ь		the amount of reserves the organization is required to maintain by the states					
		ch the organization is licensed to issue qualified health plans	13b				
		the amount of reserves on hand	13 c				
		e organization receive any payments for indoor tanning services during the tax	•		14a		No
b	тт "Үе	s," has it filed a Form 720 to report these payments? <i>If "No," provide an explana</i> t	tion ir	n Schedule O	14b		

orm	990 (2015)			Page
Par	For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, describe the circumstances, processes, or changes in Schedule O. See instructions.	or 10)b belo	w,
	Check if Schedule O contains a response or note to any line in this Part VI			
Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 630			
	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 630			
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3	Yes	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	event	ue Cod	e.)
			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 **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12h Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe **12**c Yes 13 Yes Did the organization have a written document retention and destruction policy? . . . 14 Yes 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 Nο f b Other officers or key employees of the organization $\ldots \ldots \ldots \ldots$ 15b Nο 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 **16**a Νo **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

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

(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.)

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

State the name, address, and telephone number of the person who possesses the organization's books and records
►APA FINANCIAL SERVICE OFFICE 750 FIRST STREET NE WASHINGTON, DC 20002 (202) 218-3984

Part VII

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

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (B) (C) (D) (F) (A) (E) Name and Title Average Position (do not check Reportable Reportable Estimated hours per more than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations from the (W-2/1099for related 2/1099-MISC) organization and Former Highest compensat employee Individual trustee É organizations MISC) related ũ stitutional below organizations employee 医含 dotted line) Trustee See Additional Data Table

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
See Additional Data Table						† –				
1b Sub-Total			٠.			. •				
c Total from continuation shd Total (add lines 1b and 1c)		ection /	٩.	•	•			33,000	0	0

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

Section B. Independent Contractors

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 ti					
(A) Name and business address	(B) Description of services	(C) Compensation			
AMC SOURCE, 631 US HIGHWAY 1 SUITE 400 NORTH PALM BEACH, FL 33408	MANAGEMENT FEES	231,888			
AMERICAN PSYCHOLOGICAL ASSOCIATION, 750 FIRST STREET NE WASHINGTON, DC 20002	MEMBERSHIP SERVICES	228,183			
BARBARA A KEETON, 1096 MAPLE STREET ASHLAND, VA 23005	ADMINISTRATIVE SERV	152,692			

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 \blacktriangleright 3

Form 99								Page 9
Part V	/##1	Statement o						
		Check If Schedi	ule O contains a resp	onse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
w 20	1a	Federated cam	paigns 1	a				
ant	ь	Membership du	ies 1	b 1,918,375				
GE GE	С	Fundraising eve	ents 1	с				
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organiz	zations 1	d				
m ii	e	Government grants	s (contributions) 1	e				
ons Sir	f	All other contribution	ons, gifts, grants, and 1	 f 326,433				
ibuti the		similar amounts no						
n di	g	1a-1f \$	ons included in lines					
CO am	h	Total. Add lines	s 1a-1f		2,244,808			
<u>=</u>				Business Code				
Program Service Revenue	2a	REGISTRATION FE		900099	765,515	765,515		
a <u>¥</u>	b	VARIOUS CONFERE		900099	484,372	484,372		
₩	c d	JOURNAL REVENUE	<u> </u>	900099	424,687	424,687		
₹	e							
jran,	f	All other progra	am service revenue					
P	_	Total Add lines	s 2a-2f	•	1,674,574			
	3		ome (including divide					
		and other simil	aramounts)	•	388,813			388,813
	5		stment of tax-exempt bon		2,125,498			2,125,498
		Noyundes !	(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental						
	c	expenses Rental income	0	0				
	d	or (loss) Net rental inco	me or (loss)	 	0			
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	5,148,972					
	b	Less cost or other basis and	4,702,909					
	c	sales expenses Gain or (loss)	446,063					
	d	Net gain or (los	ss)		446,063			446,063
nue	8a	Gross income f events (not inc	-					
Other Revenue				a				
the s	b	Less direct ex	penses	ь				
Ö	С		(loss) from fundraisin		0			
	9a		rom gaming activities ne 19	a				
	b	Less direct ex	penses	ь				
	С	Net income or ((loss) from gaming ac	tivities	0			
	10a	10a Gross sales of inventory, less returns and allowances .						
	b	Less cost of g	oods sold b					
	С		(loss) from sales of in		0			
	11-	Miscellaneous		Business Code 541900	639,862	639,862		
	11a b		END/ALLOWANCE NOVELTY ITEMS	900099	10,706	10,706		
	c	ADVERTISING		900099	9,145		9,145	
	d	All other reven	ue		5,214	5,214		
	e	Total. Add lines	s 11a-11d	•	664,927			
	12	Total revenue.	See Instructions .	•	7,544,683	2,330,356	9,145	2,960,374
					•	-	*	Form 000 (201E)

Part IX Statement of Functional Expenses

	Γ				
	ot include amounts reported on lines 6b, o, 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	169,193	169,193		
2	Grants and other assistance to domestic individuals See Part IV, line 22	58,358	58,358		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15	5,000	5,000		
4	and 16	0	3,000		
5	Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees)				
а	Management	238,936		238,936	
b	Legal	0			
С	Accounting	3,636		3,636	
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	6,219		6,219	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	946,954	444,953	502,001	
12	Advertising and promotion	37,080	33,513	3,567	
13	Office expenses	795,788	506,736	289,052	
14	Information technology	112,616	7,875	104,741	
15	Royalties	0			
16	Occupancy	0			
17	Travel	745,716	389,327	356,389	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	1,811,653	1,582,160	223,517	5,976
20	Interest	1,527		1,527	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0			
23	Insurance	500		500	
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)				
а	HONORARIUM/STIPEND	652,946	589,411	63,535	
b	AWARDS	326,198	321,177	5,021	
c	CONTRIBUTIONS/DONATIONS	142,745	95,990	46,605	150
d	EDUCATION/WORKSHOPS	19,232	16,073	3,159	
e	All other expenses	25,872	19,137	6,735	
25	Total functional expenses. Add lines 1 through 24e	6,100,169	4,238,903	1,855,140	6,126
26	Joint costs.Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

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_iabilities

Net Assets or Fund Balances

Investments—publicly traded securities . .

Intangible assets . . .

Grants payable

Deferred revenue .

Tax-exempt bond liabilities

Complete Part X of Schedule D

Unrestricted net assets . .

complete lines 30 through 34.

Total net assets or fund balances

Temporarily restricted net assets

Permanently restricted net assets

.

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Investments—other securities See Part IV, line 11

Investments—program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D

Other liabilities (including federal income tax, payables to related third

key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow SFAS 117 (ASC 958), check here ▶

Organizations that do not follow SFAS 117 (ASC 958), check here >

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

parties, and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 . . .

complete lines 27 through 29, and lines 33 and 34.

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to current and former officers, directors, trustees,

10,990,968

34,000

1,500

22,479,184

216,436

1,157,545

0 18

0 21

0

0 24

55,228

1,429,209

19,094,828

1,955,147

21,049,975

22,479,184

0 29

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28

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31

32

33

34

12,011,806

22,965,502

319,613

1,086,514

0

0

0

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0

156,987

1,563,114

18,814,293

2,588,095

21,402,388

22,965,502 Form **990** (2015)

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Гаг	tΧ	Check if Schedule O contains a response or note to any line in	this P	art X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			0	1	906,025
	2	Savings and temporary cash investments			10,886,052	2	9,228,562
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net			400,113	4	553,416
	5	Loans and other receivables from current and former officers trustees, key employees, and highest compensated employe II of Schedule L	•		0	5	0
ssets	6	Loans and other receivables from other disqualified persons section 4958(f)(1)), persons described in section 4958(c)(3 contributing employers and sponsoring organizations of sectivoluntary employees' beneficiary organizations (see instruct Part II of Schedule L	3)(B), a non 50	and 1(c)(9)	0	6	0
As	7	Notes and loans receivable, net	_		0	7	0
	8	Inventories for sale or use			0	8	0
	9	Prepaid expenses and deferred charges			166,551	9	265,218
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a		,	-	<u> </u>
	b	Less accumulated depreciation	10b	1	0	10c	

Investment expenses .

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

Prior period adjustments .

Donated services and use of facilities .

Part XIII Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . .

Other changes in net assets or fund balances (explain in Schedule O) .

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

If the organization changed its method of accounting from a prior year or checked "Other," explain in

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

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?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

If the organization changed either its oversight process or selection process during the tax year, explain in

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Net unrealized gains (losses) on investments

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

Cash ✓ Accrual Other

Both consolidated and separate basis

Both consolidated and separate basis

- - 2 6,100,169 3 1,444,514 4 21,049,975 5 6

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Page 12

7,544,683

21,402,388

No

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Nο

Form 990 (2015)

Yes

2a

2b

2c

3a

3b

-983,533 7 8 -108,568 9

Software ID: Software Version:

EIN: 54-1572590

Name: AMERICAN PSYCHOLOGICAL ASSOCIATION INC

GROUP RETURN

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

Compensated Employees, and Independent Contractors													
(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers	than on is	one bot	not box h an or/tr	offic ustee	ess er e)	(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			
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			organization and related organizations			
Janet A Sigal D01-Past-President 8/14-8/15	2 0	x		x				0	0	C			
Joan C Chrisler D01-Past-President 8/15-8/16	5 0	×		х				0	0	(
Nancy L Baker D01-President 8/15-8/16	5 0	×		х				0	0	(
Irene H Frieze D01-President-Elect 8/15-8/16	2 0 0 0	×		х				0	0	(
Anıta M Wells D01-Secretary 1/14-12/17	3 0 0 0	x		х				0	0	(
Deborah F Johnson D01-Treasurer 8/14-12/16	4 0 0 0	х		х				0	0	(
Jocelyn O Turner-Musa D01-Awards Coordinator	3 0	×						0	0	(
Clare K Porack D01-Council Representative	3 0	×						0	0	(
John D Hogan D01-Historian	2 0	×						0	0	(
Gerianne M Alexander D01-Journal Editor	20 0	х						0	0	(

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

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4,000

Compensated Employees, and Inde	penaent Co	ntrac	ctors	5					ı	ı
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	unles d	ore tl ss pe	than ersoi cer tor/t	o not one on is and trust	tee)	an	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	Hisey		and related organizations
Mındy J Erchull D01-Member-at-large	2 0	×						0	0	0
Lisa M Osbeck D01-Member-at-large	2 0	х						0	0	0
Mark Sciutto D01-Member-at-large	2 0	x						0	0	C
Alicia M Trotman D01-Newsletter Editor	3 0	×						0	0	С
Emily A A Dow D01-Student Rep 1/15-8/15	2 0	×						0	0	С
Kasey Powers D01-Student Rep 8/15-12/17	2 0	×						0	0	C
R Eric Landrum D02-Past President	10 0	x		×				0	0	C
Suzanne Baker	20 0									

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D02-President

Janie Wilson

D02-President-Elect

Thomas Pusateri D02-Secretary

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

Compensated Employees, and Inde					ı ru:	stee	S, F	key Employed	es, nignest	
(A) Name and Title	(B) Average hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and trus	tee)		(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
David Kreiner	10 0									
D02-Treasurer	0.0	X		×				0	0	0
Susan Nolan	10 0	×		x				0	0	0
D02-VP for Diversity	0 0									
Diane Finley Diane Finley	10 0	х		x				0	0	0
·	10 0									
Aaron Richmond D02-VP for Programming		x		×				0	0	0
	10 0									
Beth Schwartz	10 0	l _x		l _x				0	0	0
D02-VP Recognition and Awards	0 0	"		''						
Sue Frantz	10 0	,		,				•		
D02-VP for Resources	0 0	X		×				0	0	0
Theodore Bosack	20 0									
DOS Formations Downston		X						25,000	0	0

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D02-Executive Director

David Washburn

Leah Light

D03-President

Anne Cleary D03-President-Elect

D03-Past-President

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

Compensated Employees, and Inde					ı ru:	stee	S, F	key Employe	es, nignest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos m unle:	ition ore t	(C (do han erso cer	not one n is and			(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
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former			organization and related organizations
Emily Elliott	5 0									
D03-Secretary-Treasurer	0 0	X		×				0	0	0
Clare Porac	1 0									
D03-Member-At-Large	0 0	X						0	0	C
Jeffrey Katz	1 0									
D02 Marshar & Larra		Х						0	0	C
D03-Member-At-Large	0 0									
Jonathon Crystal	1 0							_		_
D03-Member-At-Large	0 0	X						0	0	C
	10				\vdash		\vdash			
Mıchael Beran		l _x l						0	0	٠
D03-Member-At-Large	0 0	^						0	U	
Janine Jennings	2 0									
D03-Awards Chair	0 0	X						0	0	C
J Bruce Overmier	2 0							_	_	

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D03-Council Representative

D03-Graduate Student Rep

Sharda Umanath

D03-Fellows Chair

Sarah DeLozier

Lise Abrams

D03-Early Career Rep

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

Compensated Employees, and Inde	pendent Co	ntrac	tor	s						
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Frank Farley D03-Member-at-Large	1 0	x						0	0	0
Shaleigh Kwok D03-Newsletter Editor	2 0	×						0	0	0
Matthew Rhodes D03-Program Co-Chair	2 0	×						0	0	0
Rachel Fouladı D05-Financial Officer	5 0	×		×				0	0	0
Abigail Panter D05-Past President 8/15-12/15	2 0	×		×				0	0	0
Keith Widaman D05-Past President 1/15-8/15	2 0	x		×				0	0	0
Scott Hofer D05-President 8/15-12/15	6 0	×		×				0	0	0

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Joseph L Rogers

Jim Bovaird

D05-Secretary

David Herzberg

D05-President Elect 8/15-12/15

D05-Assessment Section Rep

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

Compensated Employees, and Inde	pendent Co	ntrac	ctor	s			-, .			
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore t ss pe	than erso icer	not one on is and		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)		organization and related organizations
Susana Urbina	3 0									
D05-Council Representative	0 0	X			L			0	0	0
William Revelle D05-Council Representative	3 0	x						0	0	0
Deborah Bandalos D05-Member-at-Large 8/15-12/15	2 0	x						0	0	C
Mark Daniel D05-Member-at-Large 1/15-8/15	2 0	x						0	0	C
Barbara Byrne D05-Member-at-Large	2 0	x						0	0	C
Carolyn Anderson	2 0	x						0	0	,
D05-Member-at-Large	0 0						'		_	
Scott Churchill	3 0									
D05-Section Rep 8/15-12/15	0 0	×					ľ	0	0	

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Fred Wertz

David MacKinnon

D05-Section Rep

David Washburn D06-Past President

D05-Section Rep 1/15-8/15

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

Compensated Employees, and Inde					ıru	stee	S, F	key Employe	es, nignest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore t ss pe	han erso cer	not one n is and			(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
	organizations below dotted line)	individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former			organization and related organizations
Mary Cain	5 0									
D06-President	0 0	X		X				0	0	C
Rachel Nicolle Matthews Carr	3 0									
D06-Secretary	0 0	X		×				0	0	C
Lisa Savage	3 0									
D06-Treasurer	0 0	X		×				0	0	C
Mike Domjan	2 0									
D06-Awards Chair	0 0	×						0	0	C
Mark Krause	3 0									,
D06-Council Representive	0 0	X						υ	0	
Gary Greenberg	2 0	x						0	0	
D06-Division Historian	0 0	^						Ĭ	Ĭ	`
Jennifer Volk	2 0									

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D06-Fellows Member

D06-Member at Large

D06-News Letter Coordinator

Chana Atkıns

Allyson Bennett D06-President Elect

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

Compensated Employees, and Inde	pendent Co	ntrac	tors	5				1	1	1
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	not one n is and			from the organization	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Gail Goodman PhD	10 0									
D07-Past President	0 0	Х		×				0	0	0
Jacqueline Eccles PhD	10 0	.,		١						
D07-President	0 0	Х		×				0	0	C
Mıchael Lamb PhD D07-President-Elect	10 0	x		×				0	0	0
	0 0 10 0									
Kalı Tızesniewskı PhD D07-Secretary	0.0	x		×				0	0	o
Andrea Greenhoot PhD	10 0	×		X				0	0	
D07-Treasurer	0 0	^		^				0	0	١
James Kaufman	8 0									
D10-Past-President	0 0	Х		X				0	0	0
Steven Pritzker	8 0	.,		v				_	_	_
D10-President	0 0	X		X				0	0	٥

8 0

0 0

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Paul Silvia

D10-President-Elect

Roni Reiter-Palmon

D10-Secretary 8/12-7/15

Jen Katz-Buonincontro D10-Secretary 8/15-7/18

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

(4)	[-							l ,5,	(=)	/=>
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	m unle:	ore t ss pe	han erso cer	not one n is and			(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
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			organization and related organizations
Heather T Snyder	8 0									
D10-Treasurer	0 0	X		×				0	0	0
Annabel Cohen	8 0									
D10-Council Representative	0 0	X						0	0	0
Mary Gregerson	8 0							_	_	_
D10-Elections Chair	0 0	X						0	0	0
Sandra Russ	8 0									
D10-Fellows Chair		X						0	0	0
	0 0									
Daniel Harris D10-Student Rep 8/14-7/15	0.0	×						0	0	0
McKay Alexander S	8 0									
D10-Student Rep 8/15-7/16	0 0	×						0	0	0
Paul Sowden	8 0									
D10-International Rep	0 0	X						0	0	0
Danny Wedding	8 0									
Dumy would be a second of the		Х						0	0	0

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D10-Member-at-large

Scott Barry Kaufman

D10-Member-at-large

D10-Member-at-large 8/12-7/15

Ruth Richards

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

Compensated Employees, and Inde	penaent Co	ntrac	tor	5				1	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	m unles	ore t ss pe	han erso cer tor/t	not one n is and trus		(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
			4.			<u> </u>			
McCrory Pamela J	8 0								
D10-Member-at-large 8/15-7/18	0 0	Х					0	0	U
Oshın Vartanıan	8 0								
D10-Membership Chair 8/12-7/15	0 0	Х					0	0	0
Magdelana Grohman	8 0								
D10-Membership Chair 8/15-7/16	0 0	Х					0	0	0
Jonathan Plucker	8 0								
D10-Rep to APA CHP/CPSE	0 0	X					0	0	0
Storlie Timothy	8 0								
D10-Rep to Aging Coalition	0 0	X					0	0	0
Tinio Pablo L	8 0								
D10-Representative to CPSE	0 0	Х					0	0	0
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Richard Hass D10-Webmaster

David Tolin

D12-Past President

Terence M Keane

D12-President

Bradley E Karlın D12-President-Elect

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	m unles	ore t ss pe	han erso cer	not one n is and trus	tee)		(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
John C Linton	1 0	×		×				0	0	0
D12-Secretary	0 0	^								•
Jonathan Weinand	5 0	x		x				0	0	0
D12-Treasurer	0 0							_	_	
Danny Wedding	1 0	,								
D12-Council Representative	0 0	Х						0	0	U
Guillermo Bernal	1 0	.,								
D12-Council Representative	0 0	Х						0	0	0
Kenneth J Sher	1 0									
D12-Council Representative	0 0	X						0	0	0
Mark B Sobell	1 0									
D12-Council Representative	0 0	X						0	0	0
Cheryl Boyce	1 0									
D12-Member-at-Large	0 0	×						0	0	0
Natalia Potapova	10									
•	1			ı	1	1	i l	۱ .	l .	l .

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D12-Section 10 Representative

D12-Section 2 Representative

D12-Section 3 Representative

Michele Karel

David A Smith

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

Compensated Employees, and Inde	pendent Co	ntrac	.tor	5					1	ļ
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore t ss pe	han ersoi cer	not one n is and		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Elaine Burke	1 0	[[_
D12-Section 4 Representative	0.0	X						0	0	U
Fredenck T Leong D12-Section 6 Representative	0 0	х						0	0	0
Mark Hillibrand D12-Section 7 Representative	1 0	x						0	0	C
Sharon Berry D12-Section 8 Representative	10	x						0	0	C
Paul Arbisi D12-Section 9 Representative	1 0	×						0	0	C
Lyne Desormeaux D13-Past President 14-15	5 0	x		×				0	0	C
Vicky Vandaveer D13-Past President 15-16	5 0	x		x				0	0	(
John Fennig	20 0				Г		\Box			

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D13-President 15-16

Carolyn Humphrey D13-Secretary

D13-President-Elect 15-16

Adam Bandellı

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

Compensated Employees, and Inde	pendent Co	ntrac	tor	S						
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Bnan Buford D13-Treasurer 15-18	10 0	×		×				0	0	0
Amy Owen Nieberding D13-APA Council Rep 15-17	5 0	×						0	0	0
Stewart Cooper D13-APA Council Rep 13-15	5 0	×						0	0	0
Randy White D13-APA Council Rep 14-16	5 0	×						0	0	0
Rob Kaiser D13-DL, Research 15-16	5 0	×						0	0	0
Karen Steadman D13-DL, Community 13-16	5 0	x						0	0	0
Melanie Kinser D13-DL, Education 14-17	5 0	x						0	0	0

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Becky Turner

Bill Berman

Rodney Lowman D13-DL, Research 12-15

D13-DL, External Rel 12-15

D13-DL, External Rel 15-18

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

Compensated Employees, and Inde	pendent Co	ntrac	.tor	S						
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore tl	than erso icer	not one on is and		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Jı Hong D15-Current Secretary	80	x		×				0	0	0
Bonnie Meyer D15-Incoming President 15-16	4 0	x		x				0	0	C
Carol Connor D15-Incoming Treasurer 15-16	10	x		×				0	0	C
Karen Harris D15-Past-President 15-16	15 0	x		x				0	0	C
Nancy Perry D15-President 15-16	13 0	x		×				0	0	C
Michele Gill D15-Treasurer 13-16	2 0	х		х				0	0	C
Dionne Cross		x						0	0	C
D15-Member at Large 12-15	00	1 '	1 '		1 '	1 '	1 '	1 '	1 '	1

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Heather Davis

Rob Klassen

Cynthia Hudley

D15-Member at Large 13-15

D15-Member at Large 14-17

D15-Member at Large 15-18

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

Compensated Employees, and Inde	pendent Co	ntrac	ctors	S						
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
DeLeon Grey	10									
D15-Member at Large 15-18	0 0	X						0	0	0
Timothy Curby	2 0									
D15-APA Council Rep 13-16	0 0	Х						0	0	0
Linda Reddy	8 0	×		x				0	0	0
D16-Past President	0 0									
James DıPerna	8 0	x		×				0	0	0
D16-President	0 0									
Lea Theodore	8 0									
D16-President-Elect	0 0	X		×				0	0	0
Amanda Sullıvan	8 0							_		
D16-Secretary	0 0	X		X				0	0	0
Mark Terjesen	8 0									
D16-Treasurer	0 0	Х		X				0	0	0

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Amy Briesch

Melissa Pearrow

Robin Codding D16-VP Conv&PR

D16-VP Pub&Comm

D16-VP for Membership

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

Compensated Improvees, and Imag	ponaciic co.	,,,,,,,,,,	,	-					i company	
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	nore t ess pe	than erso icer	o not n one on is and trust	stee)	, an	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Scott Methe	5 0									
D16-VP Conv&PR	0 0	Х		X				0	0	0
Catherine Fiorello D16-VP E&T&Sci Affairs	5 0	x		×				0	0	0
Michelle Athanasiou D16-VP Professional Affairs	5 0	x		×				0	0	0
Amanda VanDerHeyden D16-VP Soc, Ethical & EMA	5 0	x		×				0	0	0
Elizabeth Doll D16-Council Representative	5 0	x						0	0	C
Frank Worrell D16-Council Representative	5 0	x						0	0	С
Tammy Hughes	5 0				\Box	\Box	\Box			

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Jessica Hoffman

Sharon Bowman

Michael Mobley D17-President

D17-Past President

D16-Membership Chair

D16-Council Representative

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Jim Lichtenberg	20 0	×		х				0	0	0
D17-President Elect	0 0									
Martın Heesacker	15 0			l				_	_	
D17-President Elect Elect	0 0	Х		Х				0	0	0
Suzanne Lease	10 0									
D17-Secretary	0 0	Х		×				0	0	0
Stephen Cook	10 0									
D17-Treasurer	0 0	X		×				0	0	0
Katharine Hahn Oh	10 0									
D17-VP Communication	0 0	×		×				0	0	0
Anneliese Singh	10 0									
D17-VP Diversity & Public Int	0 0	×		×				0	0	0
Mane Miville	10 0									
D17-VP Education & Training	0 0	×		x				0	0	0

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Sherry Benton

Tracı Callandrillo

D17-VP International Affairs

D17-VP Professional Practice

D17-VP Professional Practice

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

Compensated Employees, and Inde	pendent Co	ntrac	ctor	5						
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore t ss pe	than ersoi icer i	not one on is and		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Lisa Spanierman D17-VP Scientific Affairs	10 0	х		x				0	0	0
Rachel Navarro D17-VP Scientific Affairs	10 0	х		x				0	0	c
Changming Duan D17-Council Representative	10 0	х						0	0	C
Roberta Nutt D17-Council Representative	10 0	×						0	0	
Y Barry Chung D17-Council Representative	10 0	×						0	0	C
Ashley Oliver D17-SAS Representative	10 0	×						0	0	C
Brittan Davis D17-SAS Representative	10 0	х						0	0	
Erica Wiley Whiteman	10 0				П					

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D17-SAS Representative

D18-Past President 14-15

Femina P Varghese PhD D18-President 14-15

Anne S Klee PhD

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

Compensated Employees, and Inde					ı r u:	stee	5, F	tey Employed	es, nignest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos m unle:	ition ore t	(C (do han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Lorraine W Greene PhD D18-President-Elect 15-16	5 0	x		x				0	0	o
Mary L Bushnell PsyD D18-Secretary-Treasurer 12-15	5 0	x		х				0	0	0
David T Pilkey PhD D18-Secretary-Treasurer 15-18	5 0	×		×				0	0	0
Dolly C Sadow PhD D18-Council Representative	5 0	×						0	0	0
David B Kazar PhD D18-Member-at-large 12-15	5 0	×						0	0	0
Erica L Fitzgerald PhD D18-Member-at-large	5 0	×						0	0	0

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Jack Tsai PhD

Layne A Goble PhD

Linda M Richardson

D18-Membership Chair

D18-Membership Chair

D18-Section Chair/Rep 13-15

Michael R Tilus PsyD

D18-Member-at-large 15-18

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Shelia M Brandt PsyD	5 0									
D18-Section Chair/Rep 13-15	0 0	Х						0	0	0
Virginia Hayes	5 0									
D18-Section Chair/Rep 13-15	0 0	Х						0	0	0
Howard R Steinberg PhD D18-Section Chair/Rep 14-16	5 0	х						0	0	0
Casey O Stewart PsyD	5 0									
D18-Section Chair/Rep 15-17	0 0	Х						0	0	0
Lauren H Lussier PsyD	5 0									
D18-Section Chair/Rep 15-17	0 0	X						0	0	0
Shirley M Glynn	5 0									
D18-Section Chair/Rep 15-17	0 0	Х						0	0	0
Wendy M Peters PhD	5 0									

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D18-Section Chair/Rep 15-17

D18-Section Chair/Rep 15-17

D18-Student/APAGS Rep/Chair

D18-Student/APAGS Rep/Chair

William A Newbill PhD

Yolanda D Perkins

Christina L Patton

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

Compensated Employees, and Inde	pengent co	ntrac	tor	5				i	i	ı
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	other compensation from the organization
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Thomas Williams	3 0	×		×				0	0	0
D19-Past President	0 0	^		^				0	0	0
Ann Landes D19-President	3 0	x		x				0	0	0
Sally Harvey D19-President Elect	3 0	x		×				0	0	0
Enc Surface D19-Secretary	3 0	×		×				0	0	0
Scott Johnston D19-Treasurer	3 0	×		×				0	0	0
Larry James D19-Council Representative	1 0	×						0	0	0
Arlene Saitzyk D19-Member at Large	10	×						0	0	0
Christopher Murphy	1 0	х						0	0	0

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D19-Member at Large

D19-Member at Large

Sara Czaja D20-Past President

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	unles	ore tl ss pe	han erso cer	not one n is and			(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				
Harvey Stems	1 0	x		×				0	0	c	
D20-President	0 0										
Manfred Diehl D20-President-elect	1 0	x		x				0	0	C	
Joanne Montepare D20-Secretary	1 0	×		×				0	0	C	
Joseph Gaugler D20-Treasurer	1 0	x		×				0	0	(
K Warner Schale D20-Council Representative	1 0	x						0	0		
Patricia Parmalee D20-Council Representative	1 0	×						0	0	(
Jane Berry D20-Member at Large	1 0	х						0	0	(
Katherine Fiori	1 0	x						0	0	,	

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D20-Member at Large

Jennifer Margrett D20-Member at Large

Jennifer Moye D20-Member at Large

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	m unles	ore t ss pe	han rso cer	not one n is and			(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				
Julie Hicks Patrick D20-Member at Large	1 0	×						0	0	0	
Karen Kopera-Frye D20-Member at Large	10	×						0	0	0	
Lynn Snow D20-Member at Large	10	×						0	0	0	
Ericka Rovira D21-Past President 8/15-12/15	2 0	×		×				0	0	C	
Frank Drews D21-Past-President 1/15-7/15	1 0	×		×				0	0	0	
Douglas Wiegmann D21-President 8/15-12/15	2 0	×		×				0	0	0	
Anne McLaughlin	3 0	.,		v							

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D21-President Elect

Beth Blickensderfer

Richard Chong Pak

Robert Proctor D21-Member-at-Large

D21-Member-at-Large

D21-Secretary-Treasurer

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

Compensated Employees, and inde	pendent co	iiiiac		•				I	I	I
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore tl ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Gitendra Uswatte D22-Past President	1 0	x		×				0	0	0
Mary Brownsberger D22-Past President	1 0	x		×				0	0	0
Kathleen Brown D22-President	10 0	x		×				0	0	0
Lisa Brenner D22-President Elect	1 0	×		×				0	0	C
Joseph Rath D22-Secretary	1 0	×		×				0	0	C
Aaron Turner D22-Treasurer	2 0	x		×				0	0	C
Krystal Drake D22-Early Career Rep	1 0	х						0	0	C
Beth Rush	1 0	x						0	0	С

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D22-Member at Large

D22-Member at Large

Eun-Jeong Lee D22-Member at Large

Glenn Curtis

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

Compensated Employees, and Inde	pendent co	ntrac	LOF	5				1	ı	1
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Nancy Hansen Merbitz	1 0									
D22-Member at Large		X						0	0	0
	0.0									
Natalie Dong	1 0	×						0	0	_
D22-Member at Large	0.0	_ ^						0	0	
Stephanie Reid-Arndt	1 0									
D22-Member at Large	0 0	Х						0	0	0
Carne Pilarski	10									
D22-Member at Large	0 0	X						0	0	0
Abbey Hughes	1 0									
D22-Representative to Council	0 0	Х						0	0	0
Kım Gorgens	1 0									
D22-Representative to Council	0 0	Х						0	0	0
Lında Mona	1 0									
D22-Representative to Council	0.0	X						0	0	0
<u> </u>	0 0									
Jacqueline Kaufman		V								

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D22-Section 1 Pediatrics

D22-Section 1 Pediatrics

Sarah Lahey

Jeff Reber D24-Past President

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

Compensated Employees, and Inde	pendent Co	ntrac	:tor	5				•		ī
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Mark Freeman	10 0				Г					
D24-President	0 0	X		×				0	0	0
R Steve Harrist	5 0	,								_
D24-President Elect	0 0	X		X				0	0	
Thomas Teo	10 0	Γ, Ι								
D24-President Elect	0 0	X		×				0	0	
	5 0				\vdash					
D24-Secretary		x		Х				0	0	(
<u> </u>	0 0 5 0	\vdash			⊢	<u> </u>				
Mary Beth Mornssey	5.0	l _x l		×				0	0	,
D24-Treasurer	0 0									
Lisa Osbeck	5 0									
D24-Council Representative	0 0	X						0	0	
Brady Wiggins	5 0									
D24-Early Career Rep	0 0	×						0	0	

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Frank Richardson

D24-Elder at Large

Brent Dean Robbins D24-Member at Large

Samuel Downs

D24-Historian

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

Compensated Employees, and Inde						3000	٠, ١	tey Employe	es, mgnest	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	m unle:	ore t ss pe	han erso cer tor/t	not one n is and trus			(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
David Goodman D24-Member at Large	5 0	×						0	0	C
Sarah Hickinbottom D24-Member at Large	5 0	×						0	0	C
Gregg Henruiques D24-Membership Chair	5 0	×						0	0	0
Snjezana Huerta D24-Student Representative	5 0	x						0	0	0
Tyler LeFevor D24-Student Representative	5 0	×						0	0	0
Mark Reilly PhD D25-Past-President	3 0	x		×				0	0	0
Leon Green PhD	5 0	v		¥				0	0	0

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D25-President

Richard Foxx PhD

D25-President Elect

Enc A Jacobs PhD

Marcus J Marr PhD

D25-Secretary-Treasurer

D25-Council Representative

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

Compensated Employees, and Inde					ı ı u	stee	э, г	tey Employe	es, mgnest	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	m unles	ore t ss pe	han erso cer tor/t	not one n is and trus			(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
Cynthia Anderson PhD D25-Member at Large	3 0	×						0	0	C
James Mulick PhD D25-Member at Large	3 0	x						0	0	C
Debra Sue Pate D26-Past President	2 0	×		х				0	0	(
Hendenkus Hank Stam D26-President	5 0	×		х				0	0	(
James Lamiell D26-President-Elect	2 0	×		×				0	0	(
Vincent W Hevern D26-Secretary-Treasurer	4 0	x		×				0	0	(
Cathy Faye	6 0							_	_	

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D26-APA Council Representative

D26-Elec Communication Editor

D26-Archival Preservationist

Deborah Johnson

Jennifer Bazar

Andrew Winston D26-Fellows Chair

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

Compensated Employees, and Inde					ıru	stee	S, F	tey Employe	es, Hignest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Nadine Weidman	10 0									
D26-Journal Office/Editor	0 0	Х						0	0	0
Russ Kosits	2 0									
D26-Membership Chair	0 0	X						0	0	0
Arlie Belliveau	2 0									
		Х						0	0	0
D26-Student Representative	0 0									
Ellen Walker	2 0									
D28-Past President		X		Х				0	0	0
	0.0									
William Stoops	10 0			l						
D28-President	0 0	X		×				0	0	0
Ch C	1 0									
Stacey Sigmon		l x		x				0	0	n
D28-President Elect	0 0	,,								
Anthony Liguori	2 0									
	1		ı	I	ı	1	i I			۱ .

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D28-Council Representative

Cynthia Crawford

Katie Saulsgiver

Mark Smith

D28-Member at large

D28-Member at large

D28-Member at large

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

Compensated Employees, and Inde					ı u	3166	э, г			
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	unles	ore the ss pe office of the state of the sta	than erso icer tor/t	not one on is and trus	tee)	an	(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
	docted fille)	Individual trustee or director	Institutional Trustee	Officer	employee	Highest compensated employee	<u>ਜ਼ਿ</u>			Ulganizations
Raymond DiGiuseppe D29-Past President	10	x		×				0	0	0
Rodney Goodyear D29-President	2 0	x		×				0	0	C
Armand Cerbone D29-President-elect	10	x		×				0	0	C
Barry Farber D29-Secretary	1 0	x		×				0	0	C
Jeffrey Zimmerman D29-Treasurer	2 0	x		×				0	0	C
Jean Carter D29-council representative	1 0	x						0	0	C
John Norcross	1 0	V						0	0	

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D29-council representative

Ann Judge

D29-director

D29-director

Beverly Greene D29-director

Barbara Thompson

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

Compensated Employees, and Inde	pendent Co	ntrac	tor	S				1		1
(A) Name and Title	(B) Average hours per week (list any hours for related	m unle:	ore t	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	MISC)	MISC)	organization and related organizations
Jairo Fuertes	1 0							_		
D29-director	0 0	Х						0	0	0
Jesse Owen D29-director	1 0	×						0	0	0
	0.0									
Rayna Markın D29-dırector	1 0	x						0	О	o
Rosemary Adam Terem D29-director	10	×						0	0	0
Susan Woodhouse D29-director	1 0	×						0	0	0
Мапа Lauer D29-student representative	10	×						0	0	0
Arreed Barabasz D30-Past President	2 0	x		×				0	0	0
	1			-	-	_	-			l

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Gary Elkins

D30-Past President

Steffanie Schilder

Ciara Christensen D30-President-Elect

D30-President

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

Compensated Employees, and Inde					ı ru:	stee	S, F	key Employe	es, nignest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
David Godot	2 0									
D30-Secretary	0 0	X		X				0	0	0
Zoltan Kekecs	2 0									
D30-Treasurer	0 0	X		X				0	0	
John Mohl	2 0									
D30-Treasurer/Membership Chair	0 0	X		X				0	0	
Donald Moss	2 0									
D30-APA Council Representative	0 0	X						0	0	(
Guy Montgomery	2 0									
D30-Member at large	0 0	X						0	0	C
James Council	2 0									
D30-Member at large	0 0	X						0	0	(
Len Milling	2 0									

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D30-Member at large

Angela O Herzog PhD

D31-Past-President

D31-President

Dinelia Rosa PhD D31-President-Elect

Cathy McDaniels-Wilson PhD ABPP

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

Compensated Employees, and Inde					ru	stee	S, F	key Employe	es, nignest	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	unle:	ore t ss pe offi direct	han erso cer tor/i	not one n is and trus	tee)	an	(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
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former			and related organizations
Peter M Oppenheimer PhD D31-Secretary	2 0	×		×				0	0	0
Nancı C Klein PhD D31-Treasurer	8 0	×		×				0	0	0
Bruce Nystrom PhD D31-Member-at-Large	2 0	×						0	0	0
Mera Kachgal PhD D31-Member-at-Large	2 0	×						0	0	0
Kırk Schneider D32-Past President	3 0	×		×				0	0	0
Shawn Rubin D32-President	5 0	×		×				0	0	0
Donna Rockwell	3 0	х		x				0	0	0

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D32-President-elect

Nathaniel Granger

D32-Secretary

Kevin Keenan

D32-Treasurer

Brent Robbins

D32-Council Representative

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

Compensated Employees, and Inde	pendent Co	ntrac	ctor	S				ī	Ī	·
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Scott Churchill	2 0									
D32-Council Representative	0 0	X						0	0	0
Mark J Drake Spaeth	1 0							_	_	_
D32-Member at Large	0 0	X						0	0	0
Ian Wickramasekera II	1 0									
D32-Member at Large	0 0	X						0	0	O
	10									
		x						0	0	С
D32-Member at Large	0.0									
Sarah Kamens	1 0	l _x l						0	0	0
D32-Member at Large	0 0	,						Ĭ		
Susan Gordon	1 0									
D32-Member at Large	0 0	X						0	0	0
Theopia Jackson	10									
D32-Member at Large	0 0	X						0	0	0

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Trisha Nash

D32-Member at Large

Jan B Blacher PhD

D33-Past President

Laura Lee McIntyre PhD D33-Past President

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

Compensated Employees, and Inde					ıru	stee	s, r	key Employe	es, Hignest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos m unle:	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the						
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Anna J Esbensen PhD	5 0									
D33-President	0 0	X		×				0	0	C
Sharon J Krinsky-McHale	1 0									
D33-President-Elect	0 0	X		×				0	0	C
Gael I Orsmond PhD	1 0									
D33-President-elect		Х		Х				0	0	(
	0 0									
Cameron L Neece PhD	3 0	,		,						
D33-Secretary-Treasurer	0 0	X		×				0	0	C
James A Mulick	1 0									
D33-Council Representative	0 0	X						0	0	0
Jason K Baker PhD	1 0									
D33-Member-at-large	0.0	×						0	0	C
	0 0									
Jonathan A Weiss PhD	10							_	_	_

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D33-Member-at-large

D33-Member-at-large

D33-Membership Chair

D33-Student/APAGS Rep/Chair

Sigan L Hartley

Eric M Butter PhD

Elizabeth Will

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

Compensated Employees, and Inde	pendent Co	ntrac	ctors	S				•		·
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Geovanna Rodriguez D33-Student/APAGS Rep/Chair	1 0	×						0	0	0
Hillary H Bush D33-Student/APAGS Rep/Chair	10	×						0	0	0
Britain Scott D34-Past President	10	×		×				0	0	0
Elise Amel D34-President	3 0	×		×				0	0	0
Mary Gregerson D34-President-Elect	1 0	×		×				0	0	0
John Fraser D34-Secretary	1 0	x		×				0	0	0
Beth Karlın D34-Treasurer	2 0	×		×				0	0	0

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Susan Clayton

Jolene Caro

Ezra Markowitz D34-Member at Large

D34-APA Council Representative

D34-Grad Rep -Stud Committee

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

Compensated Employees, and Inde	pendent Co	ntrac	tor	s			-			
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
David St John D34-Member at Large	0 0	×						0	0	C
Nancy Piotrowski D34-Member at Large	2 0	×						0	0	C
Lynn Collins D35-Past-past pres 8/15-12/15	4 0	×		×				0	0	C
Pam Remer D35-Past-past pres 1/15-8/15	10	×		×				0	0	C
Olivia Moorehead-Slaughter D35-President elect 8/15-12/15	3 0	×		×				0	0	C
BraVada Garrett-Akinsanya D35-President 8/15-12/15	8 0	×		×				0	0	C
Maureen McHugh	6 0	х		x				0	0	0

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D35-Past President 8/15-12/15

Monique Clinton-Sherrod

D35-Council Representative

D35-Secretary

D35-Treasurer

Martha Banks

Margaret Signorella

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

Compensated Employees, and Inde	pendent Co	ntrac	tor	S					i	
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore t ss pe	than erso icer	not one on is and		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Natalie Porter	5 0	x						0	0	С
D35-Council Representative	0 0					'				
Michelle Santiago D35-Prof Rep 8/15-12/15	0 0	x						0	0	C
Lauren Mizock D35-Prof Rep 1/15-8/15	1 0	х						0	0	С
Wendı Williams D35-Section 1 President	3 0	x						0	0	C
Yvette Flores D35-Section 3 President	3 0	х						0	0	C
Jennifer Vencil	3 0	x						0	0	
D35-Section 4 President	0 0					'				
Khan Dinh	3 0	x						0	0	
D35-Section 5 President	0.0	^				'		١		

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Wendy Peters

Stephanie Wong

Jessica Joseph

D35-Section 6 President

D35-Student Rep 8/15-12/15

D35-Student Rep 1/15-8/15

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	Pos m unles	ition ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	· ·		Highest compensated employee	Former	` Misc)	Misc)	organization and related organizations
Elizabeth Hall	1 0									
D36-Past President	0 0	X		×				0	0	C
Doug Oman	2 0									
D36-President Elect	0 0	X		×				0	0	0
Michael Nielsen	5 0									
D36-President Elect/President	0 0	X		×				0	0	C
Kevin Ladd	2 0									
D36-President/Past President	0.0	X		×				0	0	С
·	10									
Gına Magyar-Russell		l x		×				0	0	c
D36-Secretary	0 0									
Jon Webb	1 0									
D36-Treasurer	0 0	X		X				0	0	C
Thomas Plante	1 0									
D36-Council Member	0 0	X						0	0	C
William Hathaway	1 0	х						0	0	C

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D36-Council Member

Innocent Okozi D36-Member-at-Large

Sarah Schnitker D36-Member-at-Large

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

Compensated Employees, and Inde	penaent Co	ntrac	tor	5				i	i	i '
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	nore ti ss pe	than ersoi icer	not one on is and		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations to below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
David Wang	1 0	x						0	0	
D36-Member-at-Large	0.0	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	-	- 1	
Canssa Dwiwardani	1 0	l x	'				!	0	0	,
D36-Membership Chair	0 0	└	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>	
Sharon Portwood PhD	5 0	_x		l _x	'	'	!	0	0	
D37-Past President	0.0	<u> </u>	<u> </u>		<u> </u>	'	<u>'</u>			
Mary Ann McCabe PhD	5 0		Ĺ '			Γ '		0		<u> </u>
D37-President	0.0	×	1 '	×		'	!		0	1
Penny Trickett PhD	5 0						\Box			
D37-President	0.0	X		X	'			0	0	
Cındy Mıller-Perrın PhD	5 0									
D37-President-Elect	0 0	×		×	'		!	O	0	
Amy Damashek PhD	5 0						\Box	,	1	1

0 0

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D37-Secretary

Amy Green PhD D37-Treasurer

Sangeeta Pankshak PhD D37-Member-at-Large

Nicholas Long PhD D37-Member-at-Large

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

Compensated Employees, and Inde	pendent Co	ntrac	tor	S					-	-
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	m unles	ore t ss pe	han erso cer tor/t	not one n is and trus	tee)	an	(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
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former			and related organizations
Paula Fite PhD D37-Member-at-Large	5 0	x						0	0	0
Anita Thomas PhD D37-Member-at-Large	5 0	х						0	0	C
Sandra Bishop-Josef PhD D37-Representative to APA	5 0	×						0	0	C
Kevin S Masters D38-Past-President	3 0	×		×				0	0	C
Kım E Dixon D38-President	5 0	×		×				0	0	C
Alex Rothman D38-President-Elect	3 0	x		×				0	0	C
Dawn Wilson	1 0	¥		¥				0	0	r

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D38-President-Elect-Elect

D38-Treasurer-Secretary

D38-APA Council Representative

D38-APA Council Representative

Mark Lumley

Helen Coons

Elizabeth Klonoff

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

Compensated Employees, and Inde	beugeut col	ntrac	tors	5				i	i	i
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han ersoi cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	other compensation from the organization
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	MISC)	MISC)	organization and related organizations
Ronald Rozensky	1 0									
D38-APA Council Rep Elect	0 0	X						0	0	Q
Justin Nash	1 0							_	_	_
D38-Member-at-Large	0 0	X						0	0	0
Robert Kerns D38-Member-at-Large	1 0	×						0	0	0
Zeeshan Butt D38-Member-at-Large	1 0	x						0	0	0
Daniel Bruns D38-Member-at-Large-Elect	1 0	X						0	0	0
Frank Summers D39-Past President	5 0	×		×				0	0	0
Manlyn Charles D39-President	10 0	x		×				0	0	0
Dennis Debiak	5 0	.,								

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D39-President-Elect

Dana Charatan

D39-Secretary

Arlene Lu Steinberg D39-Treasurer

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

Compensated Employees, and Inde	pendent Co	ntrac	.tor	S						
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore ti	than ersoi icer	not one on is and		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
David Downing	10						<u> </u>			
D39-APA Council Rep	0 0	X			<u> </u>			0	0	0
Laura Barbanel	1 0	Γ., Ι	ĺ '			['	['			
D39-APA Council Rep	0 0	X		<u> </u>	<u> </u>	<u> </u>	<u></u>	0	0	
Marsha McCary	1 0		i '			['	['			
D39-APA Council Rep	0.0	×				'	'	0	O	1
Mary Beth Cresci	10		\Box	\vdash	\Box	\vdash	\vdash	<u> </u>		
D39-APA Council Rep		X	1	'		'	'	0	0	
·	0 0	+		<u></u>		 '	<u></u>	 	<u> </u>	
Norman Abeles		x	1 '	'		'	'	0	0	1
D39-APA Council Rep	0 0	$oxed{oxed}$	— —'	<u> </u>	<u> </u>	'	⊥_′	<u> </u>		
Steven Reisner	1 0	1!	1	'		'	'	1		
D39-APA Council Rep	0 0	×	'	'		'	'	0	0	
Colin Ennis	10									
D39-Member at Large	0 0	X					'	0	0	

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Devon King

Diana Diamond D39-Member at Large

Jaine Darwin

D39-Member at Large

D39-Member at Large

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

Compensated Employees, and Inde	pendent Co	ntrac	tor	s [']			•			
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos m unle:	ition ore t	(C (do han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Jonathan Eger D39-Member at Large	1 0	×						0	0	0
Kns Yı D39-Member at Large	1 0	x						0	0	0
Scott Pytluk D39-Member at Large	1 0	x						0	0	0
Shara Sand D39-Member at Large	1 0	×						0	0	C
Usha Tummala Nara D39-Member at Large	1 0	×						0	0	C
Albert J Brok D39-Section 1 Representative	1 0	×						0	0	C
Manlyn Metzl D39-Section 3 Representative	1 0	×						0	0	C

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Joseph Schaller

Michael Jones

Antonia Halton

D39-Section 4 Representative

D39-Section 5 Representative

D39-Section 8 Representative

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

Compensated Employees, and Inde					ıru	stee	s, r	key Employe	es, Hignest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos m unle:	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the						
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Paula Shear	2 0									
D40-Past President 1/15-8/15	0 0	Х		×				0	0	0
Neil Pliskin	2 0									
D40-Past President 8/15-12/15	0 0	Х		×				0	0	0
Jennifer Vasterling	4 0									
D40 D 1 10/45 42/45		Х		Х				0	0	0
D40-President 8/15-12/15	0 0									
Mark Bondı	4 0									
D40-President Elect 8/15-12/15	0 0	Х		×				0	0	0
· · ·	5 0									
Heather Belanger	3.0	l x		l x				0	0	0
D40-Secretary (1/15 - 8/15)	0 0	^		,				0	O O	0
Amy Jak	3 0									
D40-Secretary (8/15 - 12/15)	0 0	Х		X				0	0	0
Kevin Duff	3 0									
NOVIII DUII	I	l		l	1	1	1	1 _	l _	_

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D40-Treasurer

Corwin Boake

Kenneth Adams

Celiane Rey-Casserly

D40-Council Representative

D40-Council Representative

D40-Council Representative

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	m unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Paul Craig	2 0	X						0	0	0
D40-Council Representative	0 0	^						0	U	0
Robb Mapou	1 0	x						0	0	0
D40-Council Representative	0 0	^						0	0	0
Cynthia Kubu	2 0	,								
D40-Member at Large	0 0	X						0	0	U
Joanne Festa	3 0									
D40-Member at Large	0 0	X						0	0	0
Monica Rivera-Mindt	2 0									
D40-Member at Large 1/15-8/15	0 0	X						0	0	0
April Thames	1 0									
D40-Member at Large 8/15-12/15	0 0	Х						0	0	0
Jennifer Skeem PhD	2 0									
D41-Past President	0 0	Х		×				0	0	0
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Patricia Zapf PhD

Jennifer Woolard PhD

D41-President Elect

Jennifer Groscup JD PhD

D41-President

D41-Secretary

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

Compensated Employees, and Inde	pendent Co	ntrac	.tor	S					1	
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore t ss pe	than erso icer	not one on is and		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Eve Brank JD PhD D41-Treasurer	5 0	x		×				0	0	0
Bnan Cutler PhD D41-APA Council Rep	1 0	x						0	0	C
Davd DeMatteo PhD D41-APA Council Rep	1 0	x						0	0	C
Daniel Krauss PhD D41-Member-at-Large	1 0	×						0	0	C
Gianni Pirelli PhD D41-Member-at-Large	1 0	x						0	0	C
Jennifer Eno Louden PhD D41-Member-at-Large	1 0	x						0	0	(
Casey LaDuke D41-Student Committee Chair	1 0	х			Г			0	0	C

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Gordon Herz D42-Past President

June Ching

D42-President

Lori Thomas D42-President Elect

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

Compensated Employees, and Inde	pendent Co	ntrac	tor	S						
(A) Name and Title	(B) A verage hours per week (list any hours for related	unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Michael Schwartz	10 0									
D42-Secretary	0 0	X		×				0	0	0
Gerald Koocher	10 0	l		l						
D42-Treasurer	0 0	Х		×				0	0	0
Douglas C Halderman D42-APA Council Representative	3 0	×						0	0	0
Jeffrey Younggren D42-APA Council Representative	3 0	×						0	0	0
Lenore Walker D42-APA Council Representative	3 0	×						0	0	0
Nancy Molitor D42-APA Council Representative	3 0	×						0	0	0
Robert J Resnick D42-APA Council Representative	3 0	х						0	0	0

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Robert Woody

David Shapiro

Elaine Ducharme D42-Member at Large

D42-Member at Large

D42-APA Council Representative

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

Compensated Employees, and Inde					ı u.	3166	э, г	tey Employed	es, mgnest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos m unles	sition iore tl ss pe	(C n (do than erso icer tor/t	not one on is and trust	tee)	an	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Judth Patterson	3 0									
D42-Member at Large	0 0	X			'	'		0	0	
Keely Kolmes	3 0				Γ,	[·				
D42-Member at Large	0 0	Х			'	'		0	0	(
Michi Fu	3 0				Γ,					
D42-Member at Large	0 0	Х			'	'		0	0	
Rachel Smook	3 0	_								
D42-Member at Large	0 0	X			'	'		0	0	
	3.0	+	 	 		 '	+-			
Stephanie Mihales		l x	'		'	'		0	o	,
D42-Member at Large	0 0	'	'		'	'				
Derek Phillips	3 0									
D42-Student Represnetative	0 0	Х			'	'		0	0	
Kristi Gordon	1 0									

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D43-Past President

Anthony Chambers

D43-President

Ruth Morehouse

D43-President-Elect

Caroline Clauss-Ehlers D43-Secretary

Form 990, Part VII - Compensation Compensated Employees, and Inde					Γru:	stee	s, k	Key Employe	es, Highest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos m unle:	sition ore t ss pe	(C (do han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Amanda Stewart	1 0			[
D43-Treasurer	0 0	X		×				0	U	(
Susan Regas	1 0									
D43-VP - Education	0 0	X		×				0	0	(
Corinne Datchi	1 0				Γ	Γ				
D43-VP - Practice	0 0	X		X				0	0	(
Shalonda Kelly	1 0				\vdash	\vdash				
D43-VP - Public Int and Div	0 0	x		×				0	0	(
	1 0			\vdash	\vdash	\vdash				
Brian Doss D43-VP - Science	0.0	x		×				0	0	(
	1 0	\vdash	\vdash	\vdash	₩	\vdash	\vdash			
Marianne Celano	10	,								
D43-APA Council Rep	0 0	X						0	0	(
Michele Harway	1 0									
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D43-Counsel Representative

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Constance Matthews PhD

D44-Past-president

Kimberly Balsam PhD D44-President-elect

Alan Omoto PhD

D44-President

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

Compensated Employees, and Inde	pendent Co	ntrac	ctor	S					•	
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Antoinette Kavanaugh PhD	5 0			l				_	_	_
D44-Secretary	0 0	X		×				0	0	C
Erin Deneke PhD	5 0	,,		v						
D44-Treasurer	0 0	X		×				0	0	١
Laura Alie PhD D44-1st year Member-at-Large	5 0	x						0	0	C
Nathan Smith PhD D44-2nd year Member-at-Large	5 0	×						0	0	C
Michelle Vaughn PhD D44-3 year Member-at-large	5 0	×						0	0	C
Bonnie Strickland PhD D44-Council Representative	5 0	×						0	0	C
Eduardo Morales PhD D44-Council Representative	5 0	х						0	0	C
				_	_		_			

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Michael Herndricks PhD D44-Council Representative

William Cross

Stan Sue D45-President

D45-Past President

Form 990, Part VII - Compensation Compensated Employees, and Inde					Γru	stee	s, I	Key Employe	es, Highest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos m unle:	ition ore t ss pe	(C (do han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Jacque Gray	5 0	<u> </u>								
D45-President-Elect	0 0	X		×				0	0	U
Cathy McDaniels Wilson	3 0			×						
D45-Secretary	0 0	X		^				0	0	
Barbara Thelamour	10 0			l,						
D45-Secretary-Elect	0 0	X		×				0	0	
Joe Horvat	10 0	,,		l,						
D45-Treasurer	0 0	X		X				0	0	(
Bertha Holliday	3 0									
D45-Afrıcan Amerıcan Slate	0 0	X						0	0	(
Martinque Jones	10 0									
D45-APAGS Rep	0.0	X						0	0	(
Alvın Alvarez	3 0									

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D45-Asian American Slate

D45-Council Representative

D45-Council Representative

Jean Chin

Luis Vasquez

Consuelo Arbona D45-Latina Slate

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

Compensated Employees, and Inde	pendent Co	ntrac	tor	S					-	-
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	unle:	ore t ss pe	han erso cer tor/t	not one n is and trus	tee)	an	(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
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former			and related organizations
Germine Awad	3 0								_	
D45-Membership Chair	0 0	Х						0	0	0
Casey McDougall D45-Native Amenacn Slate	3 0	x						0	0	0
Bernie Luskin D46-Past President	5 0	×		×				0	0	0
Jern Lynn Hogg D46-President	10 0	×		×				0	0	0
Mary Gregerson D46-President Elect	5 0	×		×				0	0	0
Kathryn Stamoulis D46-Secretary	5 0	x		×				0	0	0
Sean Thoennes	5 0	v		¥				0	0	0

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D46-Secretary

Elizabeth Carll

Chris Ferguson

Frank Farley

D46-Member-at-large

D46-Member-at-large

D46-Council Representative

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

Compensated Employees, and Inde	penaent Co	ntrac	tor	5				1	1	i
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore t ss pe	han ersoi icer	not one on is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Greg Zerovnik	5 0									
D46-Member-at-large	0 0	X			L'			0	0	U
Pauline Wallin	5 0	x						0	0	C
D46-Member-at-large	0.0	!			<u>_</u> '	!				
Rochelle Balter D46-Member-at-large	5 0	х						0	0	0
Sharon Tettegah D46-Member-at-large	5 0	x						0	0	C
John Heil D47-Past President	4 0	x		×				0	0	C
Anthony Kontos D47-President	4 0	х		х				0	0	C
Vince Granito	4 0				\Box		H			
D47-President Elect	0.0	X		×	'			0	0	

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Cristina Fink

Shane Murphy

Courtney Albinson D47-Member at Large

D47-Secretary/Treasurer

D47-APA Council Representative

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

Compensated Employees, and Inde	pendent co	ntrac	LOTS	•					1	i
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore these sections in the section in	than ersoi icer	not one on is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations i below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Jessica Bartley D47-Member at Large	2 0	x						0	0	0
Bradley D Olson PhD D48-Past President	2 0	x		×				0	0	C
Rebekah Phillips DeZalia PhD D48-President	4 0	x		×				0	0	C
Frank Farley D48-President-Elect	2 0	×		×				0	0	
Urmitapa Dutta PhD D48-President-Elect Designate	2 0	×		x				0	0	C
Caitlin O Mahoney PhD D48-Secretary	0.0	x		×				0	0	C
Juvia P Heuchert PhD D48-Treasurer	2 0	x		x				0	0	(
Eduardo I Diaz PhD	2 0		$i^{-}i$		\Box					

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D48-Council Representative

D48-Council Representative

Jean M Arrigo Phd

Gilbert Reyes D48-Member-at-large

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

Compensated Employees, and Inde					ı u.	stee	э, г	tey Linploye	es, iligilest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos mo unles	sition nore thess pe officed direct	(C) than ersoi icer tor/t	not one on is and trust		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
John P Szura PhD	2 0									
D48-Member-at-large	0 0	X	L'			'	'	0	0	
Serdar M Degirmencioglu	2 0		i '	['		['	['			
D48-Member-at-large	0 0	X	'			'	<u>_</u> '	0	0	
Henriette Warfield Van Eck PhD	2 0									
D48-Membership Chair	0 0	×	'	'		'	'	0	0	
Lee Gillis PhD	3 0								!	
D49-Past President	0.0	×	'	X	'	'	'	0	0	
Dennis M Kivlighan PhD	10 0				\Box		\Box			
D49-President	0 0	X	_ '	X	_	_ '	_!	0	0	
Craig D Parks PhD D49-President-Elect	5 0	х		×				0	, 0	,
Robert L Gleave PhD	5 0		\Box	Г	Г	\vdash	\Box			

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Robert L Gleave PhD D49-President-Elect

Jennifer Alonso PhD

D49-Secretary

D49-Treasurer

Amy G Nitza PhD

Sally H Barlow PhD

D49-Council Representative

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

Compensated Employees, and Inde	pendent Co	ntrac	.tor	5					1	
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore ti ss pe	han ersoi icer	not one on is and		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Jill D Paquin PhD	2 0									
D49-Member-at-large	0 0	Х						0	0	0
Joseph P Powers	2 0						[·			
D49-Member-at-large	0 0	Х						0	0	C
Rex Stockton EdD	2 0						[·			
D49-Member-at-large	0 0	Х						0	0	0
Leann J Diederich PhD	2 0									
D49-Member-at-large	0 0	X						0	0	
Rosamond J Smith	2 0									
D49-Student/APAGS Rep/Chair	0 0	X						0	0	C
Alan Budney PhD	3 0									
D50-Past President	0 0	X		×				0	0	
Sherry McKee PhD	10 0	х		x				0	0	(

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D50-President

D50-Secretary

Ty Schepis PhD

Katie Witkiewitz PhD D50-President-Elect

Brandon Bergman PhD

D50-Treasurer 9/15-12/15

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

pendent Co	ntrac	.tor	s						
(B) A verage hours per week (list any hours for related	unles	ore tl ss pe offic	n (do than ersoi icer i	not one on is and	e box, both I a	,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
2 0	x		×				0	0	C
10	x						0	0	C
10	x						0	0	(
10	x						0	0	(
10	x						0	0	(
1 0	х						0	0	(
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	(B) A verage hours per week (list any hours for related organizations below dotted line)	A verage hours per week (list any hours for related organizations below dotted line) 20 20 30 10 10 X 00 10 X	(B) A verage hours per week (list any hours for related organizations below dotted line) 2 0	Average hours per week (list any hours for related organizations below dotted line) 20 20 X 00 10 X 00 10 X 00 10 X 00 20 X X X X X X X X X X X X X	(B) A verage hours per week (list any hours for related organizations below dotted line) 20 20 20 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 00 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	(C) Average hours per week (list any hours for related organizations below dotted line) 20 20 20 20 X 00 10 1	(B) A verage hours per week (list any hours for related organizations below dotted line) 20 20 X 00 10 X 00 X X	(B) A verage hours per week (list any hours for related organizations below dotted line) 20 x 00 10 x 00 00	CC Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer and a director/trustee)

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David Whitcomb

D51-President

D51-President- Elect

Ryon McDermott D51-Secretary

Holly Sweet

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

For related organizations For related organizations For late For late	Compensated Employees, and Inde	pendent Co	ntrac	tor	S				ī	Ī	
Delow dotted line Delo		Average hours per week (list any hours	m unle:	ore t ss pe offi	(do han erso cer	not one n is and	box, both a		Reportable compensation from the organization	Reportable compensation from related organizations	Estimated amount of other compensation
X		below	individual trustee or director	Trust	Officer	key employee	compensat	Former	MISC)	MISC)	organization and related organizations
D51-Treasurer											
X			X		×				0	0	0
D51-APA Council Representative											
D51-Assistant List Serve Mod			X						0	0	C
D51-Assistant List Serve Mod	·								_	_	
X			X						0	0	C
X			×						0	0	C
X			x						0	0	C
Taleb Khairalian X 0 0			x						0	0	C
00			x						0	0	C

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Gerry Crete

Michael Parent

Gary Brooks

D51-List Serve Moderator

D51-Member-At-Large

D51-Member-At-Large

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe offi direc	han erso cer	not one n is and		(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the			
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations		
Bryana French	1 0											
D51-Member-At-Large	0 0	Х						0	0	0		
Will Elder	1 0											
D51-Member-At-Large	0 0	Х						0	0	0		
Emily Smith	1 0											
D51-Member-At-Large	0 0	Х						0	0	0		
Katherine Richmond	1 0											
D51-Member-At-Large	0 0	X						0	0	0		
Brian Cole	1 0											
D51-Membership and Recruitment	0 0	X						0	0	0		
Daniel Singley	1 0							0	0			
D51-Membership and Recruitment	0 0	X						0	0			
Jeff Nepute	1 0	х						0	0			
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D51-Program Co-Chair

D51-Representative to the APA

James Mahalık

Ryan McKelley

D51-Webmaster

Mark Terjensen D52-Past President

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

Compensated Employees, and Inde	pendent Co	ntrac	COL	5				ı	İ	i
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore ti ss pe	han erso cer	not one on is and			(D) Reportable compensation from the organization (W- 2/1099-	from related organizations	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Jean Chin	6 0			Γ						
D52-President	0 0	X		X				0	0	U
Craig Shealy	3 0	x		×				0	0	0
D52-President Elect	0 0									
Sayaka Machizawa D52-Secretary	6 0	x		×				0	0	C
Martha Ann Carey D52-Treasurer	6 0	×		×				0	0	C
Neal Rubin D52-Council Representative	3 0	×						0	0	C
Brigitte Khoury D52-Member at large	2 0	х						0	0	(
Janet Sigal D52-Member at large	2 0	х						0	0	C
Mercedes McCormick	2 0	,,								_

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D52-Member at large

Joan Asarnow D53-Past President

D52-Student Member at large

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

Compensated Employees, and Independent Contractors												
(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe offi	(do han erso cer	not one n is and	box, both a		(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the			
organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations			
6 0	x		x				0	0	0			
4 0	х		×				0	0	0			
4 0	×		×				0	0	0			
10 0	×		×				0	0	0			
4 0	x						0	0	o			
4 0	х						0	0	0			
4 0	х						0	0	0			
	(B) A verage hours per week (list any hours for related organizations below dotted line) 6 0 0 0 4 0 0 0 10 0 0 0 4 0 0 0 4 0 0 0 0	(B) A verage hours per week (list any hours for related organizations below dotted line) 60 00 40 00 40 X (B) A verage hours per week (list any hours for related organizations below dotted line) 60 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 40 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00	(B) A verage hours per week (list any hours for related organizations below dotted line) 60 00 40 40 00 40 00 40 00 40 00 40 X X X X X X X X X X X X X	A verage hours per week (list any hours for related organizations below dotted line) 60 40 40 40 40 40 40 40 40 40	(C) A verage hours per week (list any hours for related organizations below dotted line) 60 40 40 40 40 40 40 40 40 40	(B) A verage hours per week (list any hours for related organizations below dotted line) 60 X 00 40 X 00 AD X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D X D	(B) A verage hours per week (list any hours for related organizations below dotted line) Or director/trustee) Or director and a director/trustee) Or director/trustee Or director and a director/trustee) Or director/trustee Or di	(B) A verage 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)				

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Amanda Jenson-Doss

D53-Member at Large

D53-Member at Large

Elissa Jelalian PhD D54-Past President

Yo Jackson

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

Compensated Employees, and Inde	penaent Co	ntrac	tor	5				Ī	Ī	Ī
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore t ss pe	han erso cer	not one n is and			organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Sharron Berry PhD ABPP D54-President	5 0	х		×				О	О	o
Celia M Lescano PhD D54-President Elect	5 0	х		х				0	0	0
Avanı Modı PhD D54-Secretary	5 0	x		х				0	0	0
Thomas David Elkin Ph D D54-Treasurer	5 0 0 0	x		×				0	0	0
Mıchael C Roberts PhD ABPP D54-APA Council Representative	5 0 0 0	х						0	0	0
Anna Maria Patino-Fernandez PhD D54-Member At Large	5 0	х						0	0	O
David Janicke PhD D54-Member At Large	5 0	x						0	0	C
Jennifer V Schurman PhD	5 0									

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Jennifer V Schurman PhD D54-Member At Large

Wendy Ward PhD ABPP D54-Member At Large

James Bray PhD D55-Past President

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

Compensated Employees, and Inde					ı ı u	stee	>, F	key Employe	es, nignest		
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos m unle:	ition ore t	(F) Estimated amount of other compensation from the							
	organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations	
Michael R Tilus Psy D D55-President	2 0	x		x				0	0	C	
Neal R Morris EdD D55-President-Elect	1 0	×		×				0	0	(
Morgan T Sammons PhD D55-Secretary	10	×		×				0	0	C	
Kathleen MMcNamara D55-Treasurer	1 0	×		×				0	0	C	
Joseph Walloch MA D55-APAGS Representative 14-15	1 0	×						0	0	C	
Anthony P Tranchita PhD D55-Member at Large	1 0	х						0	0	(
George M Kapalka PhD	1 0	x						0	0	(

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D55-Member at Large

LaSonia Barlow PhD

D55-Member at Large

Robert McGrath PhD

D55-APA council rep

Kathleen Kendall-Tackett D56-Past-President

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations	
Beth Rom-Rymer	10 0										
D56-President	0 0	Х		×				0	0	0	
Joan Cook D56-President-Elect	5 0	×		×				0	0	0	
	0 0 5 0										
Amber Douglas D56-Secretary	0 0	x		x				0	0	0	
Lisa Rocchio D56-Treasurer	5 0	×		×				0	0	0	
Judith Armstrong D56-Ass of Trauma Sequelae TF	5 0	x						0	0	0	
Sandra Mattar D56-Associate Journal Editor	5 0	x						0	0	0	
Sylvia Marotta D56-Associate Journal Editor	5 0	х						0	0	0	
			t —	_	_		-				

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Zhen Cong

Terry Keane

D56-Associate Journal Editor

Constance Dalenberg D56-Awards Committee

D56-Capital Campaign TF

Form 990, Part VII - Compensation Compensated Employees, and Inde					Γru	stee	s, k	Key Employe	es, Highest					
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	Position (do not check more than one box, unless person is both an officer and a director/trustee) (C) Reportable Reportable compensation from the organization organizations (W- 2/1099- (W- 2/1099- MISC)) (W- 2/1099- MISC)											
		individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)		organization and related organizations				
Christine Courtois	5 0													
D56-Complex Trauma TF	0 0	Х						0	0	C				
Amy Ellis	5 0													
D56-Convention Prog Committee	0 0	X						0	0	,				
Vanessa Simiola	5 0													
D56-Convention Prog Committee	0 0	Х						0	0					
Nnamdı Pole	5 0													
D56-Convention Prog Committee	0 0	X						0	0	(
Jessica Punzo	5 0													
D56-Convention Prog Committee	0 0	X						0	0	C				
Charles Figley	5 0													
D56-Council Representative	0 0	X						0	0	C				
Steven Gold	5 0													

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Gilbert Reyes

Tyson Bailey

D56-Early Career Rep

George Rhoades

D56-Council Representative

D56-Disaster Relief Committee

D56-Ed and Training Committee

Form 990, Part VII - Compensation Compensated Employees, and Inde					[ru:	stee	s, k	(ey Employe	es, Highest		
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations	
Laune Anne Pearlman	5 0										
D56-Fellow Committee	0 0	Х						0	0	0	
Elizabeth Carll	5 0										
D56-International Committee	0 0	Х						0	0	0	
Rebecca Randel	5 0										
D56-Laison Committee	0 0	Х						0	0	C	
M Rose Barlow	5 0										
D56-Listserv Manager	0 0	Х						0	0		
Dawn Hughes	5 0										
D56-Member-at-Large	0 0	X						0	0	C	
Heather Littleton	5 0										
D56-Member-at-Large	0 0	X						0	0	(
Lesia Ruglass	5 0										
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D56-Member-at-Large

D56-Newsletter Editor

D56-Policy Committee

D56-Practice Committee, PETF

Bryan Reuther

Diane Elmore

Bethany Brand

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	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Dan Grech D56-Professional Affiliate Rep	5 0	x						0	0	
Denise Sloan D56-Publications Committee	5 0	x						0	0	1
Bnan Marx D56-Science Committee	5 0	×						0	0	1
Stacey Seibel D56-Special Interest Groups	5 0	×						0	0	(
		1		1	_					l

Employer identification number

SCHEDULE A (Form 990 or

Public Charity Status and Public Support

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

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

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

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization that normally receives a substantial part of its support from a governmental unit or from the general public

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ))

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

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

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

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

GROUP RETURN

Part I

2 3

Name of the organization

990EZ)

AMERICAN PSYCHOLOGICAL ASSOCIATION INC

hospital's name, city, and state

170(b)(1)(A)(iv). (Complete Part II)

described in section 170(b)(1)(A)(vi). (Complete Part II)

54-1572590

9	Г	receipts from activitie from gross investmen	es related to it t income and	ts exempt functions—s	subject to certa xable income (in exceptions less section 5	tributions, membership s, and (2) no more than 1 511 tax) from businesse	331/3% of its support
10		An organization organi	zed and opera	ated exclusively to tes	t for public saf	ety See secti	ion 509(a)(4).	
11 a	i _	one or more publicly s the box in lines 11a th Type I. A supporting o	upported orga irough 11d tha rganization op	inizations described in at describes the type o perated, supervised, oi	section 509(a of supporting o r controlled by	a)(1) or sectio rganization ar its supported	inctions of, or to carry o in 509(a)(2) See sectio id complete lines 11e, 1 organization(s), typical	n 509(a)(3). Check 1f, and 11g ly by giving the
			` '	2 , 11	,	ity of the dire	ctors or trustees of the	supporting
b	Г		organization s pporting orgai	supervised or controlle nization vested in the s	d in connectio		ported organization(s), b r manage the supported	
c	\vdash	Type III functionally i	ntegrated. A	supporting organizatio	n operated in o	connection wit	th, and functionally integ	rated with, its
	'	supported organization	n(s) (see instr	ructions) You must co	mplete Part IV	, Sections A,	D, and E.	
d e	Г	not functionally integra (see instructions) You Check this box if the o	ated The orga u must comple organization re	anization generally mu ete Part IV, Sections A eceived a written deter	st satisfy a dis A and D, and Pa mination from	tribution requ I rt V. the IRS that i	n with its supported org irrement and an attentiv t is a Type I, Type II, T	eness requirement
_		integrated, or Type III		, , , , , , , , , , , , , , , , , , , ,				
f	Ente	r the number of supporte					· · · · · · · <u> </u>	
g		Provide the following ii	nformation ab	out the supported orga	anızatıon(s)			
Nar	ne of s	(i) upported organization	(ii)EIN	(iii) Type of organization (described on lines 1 - 9 above (see instructions))	(iv Is the orga listed in your docum	inization governing	(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)
					Yes	No		
Tota	ıl							
For F	Paperw	vork Reduction Act Noti	ce, see the In	structions for Form 99	90 or 990EZ.	Cat No 1:		990 or 990-EZ) 2015

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. Pu	blic S	upport
---------	-------	--------	--------

	ection A. Public Support							
(or	Calendar year fiscal year beginning in) ▶	(a)2011	(b) 2012	(c) 2013	(d) 2014	(e) 20	15	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	2,843,748	2,231,798	2,725,394	2,201,603	2	,244,808	12,247,351
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0
3	The value of services or facilities furnished by a governmental unit to the organization without charge							0
4	Total. Add lines 1 through 3	2,843,748	2,231,798	2,725,394	2,201,603	2	,244,808	12,247,351
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)							209,779
6	Public support. Subtract line 5							12,037,572
	from line 4							12,037,372
S	ection B. Total Support							
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 20	15	(f) Total
(OF	fiscal year beginning in) ► Amounts from line 4	2,843,748	2,231,798	2,725,394	2,201,603	2	,244,808	12,247,351
_	Gross income from interest,	2,043,740	2,231,730	2,723,334	2,201,003		,244,000	12,247,331
8	dividends, payments received on securities loans, rents, royalties and income from similar sources	1,631,858	2,122,257	2,326,619	2,446,044	2	,514,311	11,041,089
9	Net income from unrelated business activities, whether or not the business is regularly carried on							0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	937,848	851,880	984,195	815,107		664,927	4,253,957
11	Total support. Add lines 7 through 10							27,542,397
12	Gross receipts from related activit	es, etc (see inst	ructions)			12		6,837,890

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,

Section C. Computation of Public Support Percentage

15	Public support percentage for 2014 Schedule A, Part II, line 14	15	44 640 %
14	Public support percentage for 2015 (fine 6, column (1) divided by fine 11, column (1))	14	43 706 %

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

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

box and stop here. The organization qualifies as a publicly supported organization 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 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

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

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

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

Se	ction A. Public Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e)2015	(f) ⊤otal
•	iscal year beginning in)	(4)2011	(5)2012	(6)2010	(4)2011	(0)2010	(1)10ta1
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
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						
3	Gross receipts from activities						
	that are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit						
	to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified						
	persons						
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						
_	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
Se	ction B. Total Support				1		I
	Calendar year			1	I	I	
(or f	iscal year beginning in)	(a) 2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
C	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years.If the Form 990 is f	or the organization	n's first second	thurd fourth or	fifth tay year ac a	section 501/c	V3) organization
14	•	or the organization	on s mist, second	, tillia, louitii, oi	ilitii tax yeal as a	1 5600001 501(0)(3) organization, ▶ □
	check this box and stop here	lia Cunnant D					
	ction C. Computation of Pub						
15	Public support percentage for 2015	(line 8, column	(f) divided by line	: 13, column (f))		15	
16	Public support percentage from 201	l 4 Schedule A, P	art III, line 15			16	
Se	ction D. Computation of Inv	estment Inco	me Percenta	ae			
17	Investment income percentage for				nn (f))	14-1	
	· · · · · · · · · · · · · · · · · · ·	•		•	···· (1 <i>))</i>	17	
18	Investment income percentage from	n 2014 Schedule	A, Part III, line	1 /		18	
19a	33 1/3% support tests—2015. If the	organization did	not check the bo	ox on line 14, and	l line 15 is more t	than 33 1/3%, a	ind line 17 is not
	more than 33 1/3%, check this box	and stop here. T	he organization q	ualıfıes as a publ	icly supported or	ganızatıon	▶┌
b	33 1/3% support tests—2014. If the	organization did	not check a box	on line 14 or line	19a, and line 16	ıs more than 3	3 1/3% and line
	18 is not more than 33 1/3%, check	this box and st	op here. The orga	nızatıon qualıfıes	as a publicly sup	ported organiz	ation 🕨 🗍
20	Private foundation. If the organizati	on did not check	a box on line 14	. 19a. or 19b. ch	eck this box and	see instruction	s ▶⊤ˈ

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, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and Complete Part V.)

	I, complete Sections A and D, and complete Part V)			
Se	ction A. All Supporting Organizations			
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,		Yes	No
2	describe the designation If historic and continuing relationship, explain Did the organization have any supported organization that does not have an IRS determination of status under	1		No
	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		No
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		No
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?	3c		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use			
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		No
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?	4b		
	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		<u> </u> 	
С	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	4с		
5a	organization was used exclusively for section 170(c)(2)(B) purposes 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		No
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		No
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		No
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		No
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		No
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		No
С	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		No
.0a	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		No
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)	10 b		
.1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		No
b	A family member of a person described in (a) above?	11b		No
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	11 c		No

Part IV Supporting Organizations (continued)

Castian	_	T	_	Cummantina	Organizations

S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		No
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		No
-	action C. Tuno II Suppositing Organizations			
3(ection C. Type II Supporting Organizations		W = -	B1 -
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1	Yes	No
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		No
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		Νo
	1. 100, dos choc m. 1 all 12 che fore the organization's supported organizations played in this regard			110
S	ection E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ctions)	
ā	The organization satisfied the Activities Test-Complete line 2 below			
ı	The organization is the parent of each of its supported organizations. Complete line 3 below			

The organization supported a governmental entity Describe in Part VI how you supported a government entity (see

	ınstructı	ions)		3	,	,		J	,	`
2	Activities Test	_Answer	(a) and ((b) below.						Υe
а		,			ities during the tax yea ation was responsive?	ar directly furthe	r the exer	npt purposes	of the	

supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b	

- 3 Parent of Supported Organizations Answer (a) and (b) below.
 - a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of 3a 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

3b

instructions)

1	Check here if the organization satisfied the Integral Part Test as a qualifying Type III non-functionally integrated supporting organizations must complete			tions. All other
	/ / / / /		<u> </u>	
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	0	
2	Recoveries of prior-year distributions	2	0	
3	Other gross income (see instructions)	3	0	
4	Add lines 1 through 3	4	0	
5	Depreciation and depletion	5	0	
6	Portion of operating expenses paid or incurred for production or collection o gross income or for management, conservation, or maintenance of property held for production of income (see instructions)		0	
7	Other expenses (see instructions)	7	0	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	0	
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a	0	
b	Average monthly cash balances	1b	0	
c	Fair market value of other non-exempt-use assets	1c	0	
d	Total (add lines 1a, 1b, and 1c)	1d	0	
e	Discount claimed for blockage or other factors (explain in detail in Part V I)0			
2	Acquisition indebtedness applicable to non-exempt use assets	2	0	
3	Subtract line 2 from line 1d	3	0	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	
6	Multiply line 5 by 035	6	0	
7	Recoveries of prior-year distributions	7	0	
8	Minimum Asset Amount (add line 7 to line 6)	8	0	
	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		1
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-		d Type III supporting org	anization (see

Section D - Distributions	Current Year							
A mounts paid to supported organizations to accomp	olish exempt purposes		C					
2 Amounts paid to perform activity that directly furthe excess of income from activity	C							
3 Administrative expenses paid to accomplish exemp	Administrative expenses paid to accomplish exempt purposes of supported organizations							
4 Amounts paid to acquire exempt-use assets			C					
5 Qualified set-aside amounts (prior IRS approval req	uired)		C					
6 Other distributions (describe in Part VI) See instru			(
7 Total annual distributions. Add lines 1 through 6	CCIONS		(
B Distributions to attentive supported organizations to details in Part VI) See instructions	o which the organization is re	esponsive (provide	C					
9 Distributable amount for 2015 from Section C, line 6	5		C					
10 Line 8 amount divided by Line 9 amount			0 %					
20 Ellie o allocale divided by Ellie 3 allocale								
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 requiredsee instructions)		0						
3 Excess distributions carryover, if any, to 2015								
a .								
<u>b</u>								
d From 2013 0								
d From 2013								
f Total of lines 3a through e	0							
g Applied to underdistributions of prior years		0						
h Applied to 2015 distributable amount			(
i Carryover from 2010 not applied (see instructions)								
j Remainder Subtract lines 3g, 3h, and 3i from 3f	0							
4 Distributions for 2015 from Section D, line 7 \$0								
Applied to underdistributions of prior years		0						
b Applied to 2015 distributable amount			C					
c Remainder Subtract lines 4a and 4b from 4	0							
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)		0						
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			C					
7 Excess distributions carryover to 2016. Add lines 31 and 4c	0							
8 Breakdown of line 7								
a								
b								
c Excess from 2013								
d From 2014 0								
e From 2015 0			(F 000 000 FT) (0.01 F					
		Schedule A (Form 990 or 990-EZ) (2015					

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

DLN: 93493320125136

Employer identification number

54-1572590

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

Political expenditures

GROUP RETURN

1

2

AMERICAN PSYCHOLOGICAL ASSOCIATION INC

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

<u>www.irs.gov/form990</u>.

2015
Open to Public Inspection

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

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

Section 527 organizations Complete Part I-A only

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

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

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

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

3	V olunteer hours						
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).			
1	Enter the amount of any excise	e tax incurred by the organization un	der section 495!	5 ▶	\$		
2	Enter the amount of any excise	e tax incurred by organization manag	ers under sectio	n 4955 ►	\$		
3	If the organization incurred a s	section 4955 tax, did it file Form 472	20 for this year?		☐ Yes ☐ No		
4 a	Was a correction made?				☐ Yes ☐ No		
b	If "Yes," describe in Part IV						
Par	t I-C Complete if the or	ganization is exempt under	section 501(c), except section 50	1(c)(3).		
1	Enter the amount directly expe	ended by the filing organization for se	ection 527 exem	pt function activities 🕨	\$		
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to ol	her organization	s for section 527 ▶	\$		
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	20-POL, line 17b ►	\$		
4	Did the filing organization file F	orm 1120-POL for this year?			Yes No		
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to whorganization made payments. For each organization listed, enter the amount paid from the filing organization's funds amount of political contributions received that were promptly and directly delivered to a separate political organization separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in							
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-		
2							
3							
4							
5							
6							
For F	Paperwork Reduction Act Notice, se	ee the instructions for Form 990 or 990)-EZ.	Cat No 50084S Schedule C (I	Form 990 or 990-EZ) 2015		

Subtract line 1g from line 1a $\,$ If zero or less, enter -0-Subtract line 1f from line 1c $\,$ If zero or less, enter -0-

Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election
	under section 501(h)).
Check ▶	If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EI

A	Check	▶ [of the filing organization belongs	to an affiliated group (and list in Part	t IV each affiliated group member's n	ame, address, EIN
			xpenses, and share of excess lo	bbying expenditures)		

		oying Expenditures means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a b	Total lobbying expenditures to influence public lobbying) Total lobbying expenditures to influence a legi	,		
c	Total lobbying expenditures (add lines 1a and	1b)		
d	Other exempt purpose expenditures	4,238,903		
e	Total exempt purpose expenditures (add lines	4,238,903		
f	Lobbying nontaxable amount Enter the amoun	t from the following table in both columns	361,945	
	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		

4-Year Averaging Period Under section 501(h)	
reporting section 4911 tax for this year? Yes No	
If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720	

j	If there is an amount other than zero on either line reporting section 4911 tax for this year?	e 1h or line 1i, did the o	-	Form 4720		
	4-Year Ave (Some organizations that made a so columns below. See th		ction do not	havè to comp		e five
	Lobbying Expe	nditures During 4	-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a)2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a	Lobbying nontaxable amount	402,852	424,985	428,895	361,945	1,618,677
b	Lobbying ceiling amount (150% of line 2a, column(e))					2,428,016
_с	Total lobbying expenditures					
d	Grassroots nontaxable amount	100,713	106,246	107,224	90,486	404,669
e	Grassroots ceiling amount					607.004

Return Reference

filed Form 5768 (election under section 501(h)).	(a)	(b)
each "Yes" response on lines 1a through 11 below, provide in Part IV a detailed description of the lobbying rivity	Yes	No _	A mount
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			
Volunteers?			
Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
Media advertisements?			
d Mailings to members, legislators, or the public?			
Publications, or published or broadcast statements?			
Grants to other organizations for lobbying purposes?			
Direct contact with legislators, their staffs, government officials, or a legislative body?			
n Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
Other activities?			
Total Add lines 1c through 1i			
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
If "Yes," enter the amount of any tax incurred under section 4912			
If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
		I –	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501 (c)(5), o	r section
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501 (c		Yes
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?	on 501 (c		Yes I
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	on 501 (c	<u> </u>	Yes 1 2
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?			Yes 1 2 3
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?	on 501(c)(5), 01	Yes 1 2 3 r section
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere	on 501(c)(5), 01	Yes 1 2 3 r section
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes." Dues, assessments and similar amounts from members	on 501(c d "No" C)(5), 01	Yes 1 2 3 r section
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	on 501(c d "No" C)(5), 01	Yes 1 2 3 r section
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	on 501(c d "No" C l l 2a 2b)(5), 01	Yes 1 2 3 r section
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	2a 2b 2c)(5), 01	Yes 1 2 3 r section
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	2a 2b 2c 3)(5), 01	Yes 1 2 3 r section
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	2a 2b 2c 3)(5), 01	Yes 1 2 3 r section
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	2a 2b 2c 3)(5), 01	Yes 1 2 3 r section

Explanation

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

SCHEDULE D

(Form 990)

Department of the

Treasury

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

DLN: 93493320125136

Inspection Internal Revenue Service **Employer identification number** Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION INC GROUP RETURN 54-1572590 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶_ Number of states where property subject to conservation easement is located ▶_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the A mount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4) (B)(I) and section 170(h)(4)(B)(II)? ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

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

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

Assets included in Form 990, Part X

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

Jene	cadle B (Form 330) 2013								rage Z
Par	t III Organizations Maintainin (continued)	ig Collections of <i>i</i>	Art, Historical ⁻	Treasures, or	Oth	er Simil	lar Ass	ets	
3	Using the organization's acquisition, ac collection items (check all that apply)	ccession, and other re	cords, check any o	f the following tha	at are a	a significa	ant use o	fits	
а	Public exhibition		d ┌ Loa	ın or exchange pı	ogram	ıs			
b	Scholarly research		e ┌ Oth	ner					
c	Preservation for future generations								
4	Provide a description of the organization		plain how they furtl	her the organizat	ion's e	xempt pu	ırpose ın		
5	Part XIII During the year, did the organization so	olicit or receive donati	ons of art, historica	al treasures or ot	her sır	nılar			
	assets to be sold to raise funds rather		as part of the orga	nızatıon's collect	ion?		Yes	No	<u> </u>
Pal	rt IV Escrow and Custodial Ari Complete if the organization Part X, line 21.		n Form 990, Part	IV, line 9, or r	eport	ed an a:	mount o	n Forr	n 990,
1a	Is the organization an agent, trustee, c included on Form 990, Part X?	ustodian or other inte	rmediary for contrib	outions or other a	ıssets		☐ Yes	┌ No	•
b	If "Yes," explain the arrangement in	Part XIII and comple	te the following tab	le			A mou	nt	
c	Beginning balance	Tare XIII and comple	te the following tab	1	1c				
d	Additions during the year			<u> </u>	1d				
e	Distributions during the year			_	1e				
f	Ending balance				1f				
2 a	Did the organization include an amount	on Form 990, Part X,	line 21, for escrow	or custodial acc	ount li	ability?	Yes	No	<u> </u>
b	If "Yes," explain the arrangement in Pa	art XIII Check here if	the explanation ha	s been provided i	n Part	XIII .			
Pa	ert V Endowment Funds. Comp	lete if the organiza	tion answered "Y	es" to Form 99	0, Pa	rt IV, lır	ne 10.		
		(a)Current year	(b)Prior year	b (c) Two years ba		Three year	rs back (e)Four ye	ears back
1a	Beginning of year balance	2,952,855	2,516,448	2,116,4	29				
b	Contributions	200,000	400,000						
c	Net investment earnings, gains, and losses	-38,059	69,536	400,0	19				
d	Grants or scholarships								
e	Other expenditures for facilities and programs								
f	Administrative expenses		33,129						
g	End of year balance	3,114,796	2,952,855	2,516,4	48				
_									
2	Provide the estimated percentage of th	•	lance (line 1g, colu	mn (a)) held as					
а	Board designated or quasi-endowment	▶ 100 000 %							
b	Permanent endowment ► 0 %								
c	Temporarily restricted endowment ►	0 %							
	The percentages on lines 2a, 2b, and 2	· ·							
3a	Are there endowment funds not in the porganization by	•		eld and administe	red for	the .		Yes	No
	(i) unrelated organizations						3a(i)		No
b	(ii) related organizations		urad an Schadula B	• •			3a(ii)		No
4	Describe in Part XIII the intended use:				• •		. 30		<u> </u>
	rt VI Land, Buildings, and Equ		endominente idinas						
	Complete if the organization				e For				
	Description of property		Cost or oth (a) (Investm				imulated reciation	(d) Bo	ok value
1a	Land								
b	Buildings								
c	Leasehold improvements								
А	Equipment		1	ĺ				1	

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).

Part VII Investments—Other Securities. C See Form 990, Part X, line 12.	Complete if the orga	nızatıon answered 'Ye	es' on Form 990, Part IV, line 11b.
(a) Description of security or catego (including name of security)	ory	(b) Book value	(c)Method of valuation Cost or end-of-year market value
(1)Financial derivatives			,
(2)Closely-held equity interests (3)Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. Complete if the organization answer	ed 'Yes' on Form 99	n Part IV line 11c c	F 000 P V 13
(a) Description of investment	eu res orrorm 93	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. Complete if the organiza	ition answered 'Yes' or scription	Form 990, Part IV, line	11d See Form 990, Part X, line 15 (b) Book value
(17)			(5) 5000 14130
Total. (Column (b) must equal Form 990, Part X, col (B) Im Part X Other Liabilities. Complete if the o			▶ Part IV. line 11e or 11f.
See Form 990, Part X, line 25.			
1. (a) Description of liability	(b) Book valu	<u> </u>	
Federal income taxes		0	
OTHER LIABILITIES	156	,987	
		$\overline{}$	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions In Part XIII, pro	156		's financial statements that remarks the
organization's liability for uncertain tax positions under XIII			

Schedule D (Form 990) 2015

1 2 1

2e

3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII) 4b		
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s per	Return.
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)............... 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)............. 4b		
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Part	XIII Supplemental Information		
Part	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2l 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 mation		e any additional

Explanation

DIVISION 53 USES THESE FUNDS TO SUPPORT STUDENT DISSERTATION RESEARCH

2a

2b

2c

2d

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

Total revenue, gains, and other support per audited financial statements

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Net unrealized gains (losses) on investments

Donated services and use of facilities

Recoveries of prior year grants .

Other (Describe in Part XIII) .

Add lines 2a through 2d .

Return Reference

SCH D, PART V, LINE 4

Schedule D (Form 990) 2015	Page 5	
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
		_

efile GRAPHIC print - DO NOT PROCESS DLN: 93493320125136 As Filed Data -OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number AMERICAN PSYCHOLOGICAL ASSOCIATION INC 54-1572590 GROUP RETURN Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient Part II that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (c) IRC section (d) A mount of cash **(b)** EIN (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government (book, FMV, assistance appraisal, other) See Additional Data Table

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

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

Cat No 50055P

Schedule I (Form 990) 2015

Schedule I (Form 990) 2015

Part III can be duplicated if additional space is needed

ARE REQUIRED TO SUPPLY A FINAL REPORT AT THE RESEARCH'S CONCLUSION

(h)Number of

(a) Type of grant of assistar	recipients	cash grant	non-cash assistance	FMV, appraisal, other)	(1) Description of non-cash assistance
Part IV Supplemental :	Information. Provide the in	formation required in	Part I, line 2, Part III,	column (b), and any other	additional information.
Return Reference	Explanation				
DIVISION 15, INITIAL BUDGETS AND MAJOR CHANGES ARE APPROVED BY THE EXECUTIVE COMMITTEE, SPENDING IS MONITORED BY INSTITUTION, FINAL REPORTS ARE PROVIDED TO THE TREASURER/EXECUTIVE COMMITTEE				MONITORED BY INSTITUTION,	

GRANTS OFFERED ARE UNRESTRICTED GRANTS CALLS FOR GRANT PROPOSALS ARE DISTRIBUTED ANNUALLY, OUTLINING ELIGIBILITY,

DIVISION 29, GOALS, SUBMISSION REQUIREMENTS, AND EVALUATION CRITERIA DISTRIBTION IS VIA PROFESSIONAL LISTSERVS, ON THE

DIVISION 40,

ASSOCIATION WEBSITE, AND IN THE OFFICIAL PUBLICATION GRANT APPLICATIONS ARE BLIND-REVIEWED, AND GRANT RECIPIENTS

neuropsychologists in their research and (b) to socialize them into the division by having them serve on divisional committees

At the end of the grant period, the recipient organization must provide a report that details all the activities THAT TOOK place in the context of this grant, along with a detailed account of expenditures and return of any unused funds. Copies of conference presentations and journal publications of research that was conducted with grant support must also be provided at that time. The overall purpose of the grant is to (a) support early career

Schedule I (Form 990) 2015

Additional Data

Software ID: Software Version:

EIN: 54-1572590

Name: AMERICAN PSYCHOLOGICAL ASSOCIATION INC

(h) Purpose of grant

or assistance

GROUP RETURN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of ıf applicable (book, FMV, appraisal, organization grant cash non-cash assistance other) or government assistance

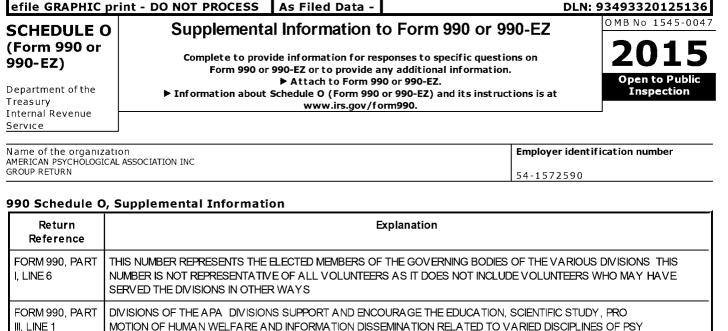
or government				assistance	other)	
UNIVERSITY OF TEXAS PO BOX 7159 AUSTIN,TX 787137159	74-6000203	501(C)(3)	6,000			EARLY CAREER RESEARCH GRANT
MICHIGAN STATE UNIVERSITY 360 ADMINISTRATION BUILDING EAST LANSING,MI 488241046	38-6005984	501(C)(3)	6,000			EARLY CAREER RESEARCH
COLORADO SEMINARY UNIVERSITY OF DENVER 2199 S UNIVERSITY BLVD DENVER,CO 80210	84-0404231	501(C)(3)	10,000			RESEARCH GRANT

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance organization grant or government assistance other) 501(C)(3) 14,977 REGENTS OF THE 95-6006144 RESEARCH GRANT UNIVERSITY OF 9500 GILMAN DRIVE MC

CALIFORNIA 0041 LA JOLLA, CA 920930041 501(C)(3) 14,050 OCEAN STATE RESEARCH 05-0440574 INSTITUTE INC

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

RESEARCH GRANT 830 CHALKSTONE AVE BLDG 35 PROVIDENCE, RI 02908



CHOLOGY, AND THE ADVANCEMENT OF THOSE PSYCHOLOGY DISCIPLINES IN SERVING THE PUBLIC

Return Reference Explanation

FORM 990. PART III, LINE 4D OTHER PROGRAM SERVICES INCLUDE VARIOUS TASK FORCES AND COMMITTEES WORKING ON

990 Schedule O, Supplemental Information

	PROGRAMMATIC ISSUES
FORM 990, PART VI, SECTION A,	EACH DIVISION HAS A GOVERNING BODY OF 8 TO 25 MEMBERS, ALL OF WHOM ARE INDEPENDENT
LINES 1A AND 1B	AND ELECTED BY THE MEMBERS OF THE DIVISION

Return Reference Explanation FORM 990, PART VI. DIVISIONS 12, 13, 29, AND 55 ARE THE ONLY FOUR DIVISIONS THAT DELEGATED CONTROL OVER MANAGEMENT |

990 Schedule O, Supplemental Information

SECTION A. LINE 7A

SECTION A, LINE 3	DUTIES CUSTOMARILY PREFORMED BY OR UNDER THE DIRECT SUPERVISION OF OFFICERS, DIRECTORS OR TRUSTEES, OR KEY EMPLOYEES TO A MANAGEMENT COMPANY OR OTHER PERSON
FORM 990 PART VI	THE DIVISIONS ARE MEMBERSHIP ORGANIZATIONS WHOSE MEMBERS FLECT THE GOVERNING BODIES

990 Schedule O, Supplemental Information

Return Reference Explanation

FORM 990, PART VI, SECTION A, LINE THE DIVISIONS ARE MEMBERSHIP ORGANIZATIONS WHOSE MEMBERS ELECT THE GOVERNING

7B	BODIES
FORM 990, PART VI, SECTION B, LINE	APA MANAGEMENT PERFORMS A THOROUGH REVIEW OF A DRAFT OF THE 990 BOARDS OF THE
11	DIVISIONS W
	ERE REQUESTED TO DELEGATE THE POWER TO RECEIVE THE 990 TO THE PRESIDENT, AND A FINAL
	COPY
	OF THE 990 WAS PROVIDED TO THE PRESIDENT OF EACH DIVISION INCLUDED IN THIS
	CONSOLIDATED RE
	TURN AND TO THE APA BOARD OF DIRECTORS PRIOR TO IT BEING FILED WITH THE IRS

990 Schedule O, Supplemental Information

Return Reference Explanation

SECTION B. LINE 15

COMPENSATED

FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO ALL DIVISIONS AND OFFICERS ARE REQUIRED, ON A MEETING BY MEETING BASIS, TO RECUSE THEMSELVES FROM ANY CONFLICT IN VIOLATION OF THIS POLICY
FORM 990, PART VI.	THE ORGANIZATION'S TOP MANAGEMENT OFFICIALS. OFFICERS, AND KEY EMPLOYEES ARE NOT

P990 Schedule O, Supplemental Information

Return Reference Explanation

ECOMM 990 PART VI GOVERNING DOCUMENTS CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE

SECTION C, LINE 19	UPON REQUEST AT THE OFFICES OF AMERICAN PSYCHOLOGICAL ASSOCIATION
FORM 990 PART IX LINE 11G	DESCRIPTION ADMINISTRATIVE SERVICES TOTAL FEES 441919

990 Schedule O, Supplemental Information Return Reference Explanation

DESCRIPTION PHOTOGRAPHY/VIDEO PRODUCTION TOTAL FEES 7100

FORM 990 PART IX LINE 11G	DESCRIPTION EDITORIAL SERVICES TOTAL FEES 129436

FORM 990 PART IX LINE 11G

990 Schedule O, Supplemental Information

Return Reference Explanation

Neturi Nererence	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION OTHER TOTAL FEES 368499