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Form 990

Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
Do not enter social security numbers on this form as it may be made public  
Information about Form 990 and its instructions is at [www.irs.gov/form990](#)

OMB No 1545-0047

2016

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 01-01-2016 , and ending 12-31-2016

B Check if applicable  
☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final  
☒ Return/terminated  
☐ Amended return  
☐ Application pending

C Name of organization  
AMERICAN PSYCHOLOGICAL ASSOCIATION INC  
GROUP RETURN  
% APA FINANCIAL SERVICE OFFICE  
Doing business as  
Number and street (or P O box if mail is not delivered to street address) Room/suite  
750 FIRST STREET NE  
City or town, state or province, country, and ZIP or foreign postal code  
WASHINGTON, DC 20002  
F Name and address of principal officer  
ARCHIE L TURNER  
750 FIRST STREET NE  
WASHINGTON, DC 20002  
H(a) Is this a group return for subordinates?  
H(b) Are all subordinates included?  
If "No," attach a list (see instructions)  
H(c) Group exemption number

D Employer identification number  
54-1572590  
E Telephone number  
(202) 218-3984  
G Gross receipts \$ 15,331,714

I Tax-exempt status  
☒ 501(c)(3) ☐ 501(c) ( ) (insert no ) ☐ 4947(a)(1) or ☐ 527  
J Website: WWW APA ORG  
K Form of organization  
☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation  
M State of legal domicile

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities  
SUPPORT AND ENCOURAGE THE EDUCATION, SCIENTIFIC STUDY, HUMAN WELFARE PROMOTION AND INFORMATION DISSEMINATION AND THE ADVANCEMENT OF THOSE PSYCHOLOGY DISCIPLINES

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

3 Number of voting members of the governing body (Part VI, line 1a) 3 582

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 582

5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 0

6 Total number of volunteers (estimate if necessary) 6 2,132

7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 3,930

7b Net unrelated business taxable income from Form 990-T, line 34 7b

Revenue

8 Contributions and grants (Part VIII, line 1h) 8 2,244,808

9 Program service revenue (Part VIII, line 2g) 9 1,674,574

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d ) 10 834,876

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 2,790,425

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 7,544,683

Current Year 2,395,478 1,285,940 441,117 3,306,455 7,428,990

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) 13 232,551

14 Benefits paid to or for members (Part IX, column (A), line 4) 14 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 15 0

16a Professional fundraising fees (Part IX, column (A), line 11e) 16a 0

b Total fundraising expenses (Part IX, column (D), line 25) 8,408

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 17 5,867,618

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 18 6,100,169

19 Revenue less expenses Subtract line 18 from line 12 19 1,444,514

End of Year 255,604 0 0 0 6,005,767 6,261,371 1,167,619

Net Assets or Fund Balances

20 Total assets (Part X, line 16) 20 22,965,502

21 Total liabilities (Part X, line 26) 21 1,563,114

22 Net assets or fund balances Subtract line 21 from line 20 22 21,402,388

Beginning of Current Year End of Year 26,134,098 1,439,149 24,694,949

Part II Signature Block

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

Sign Here

Signature of officer  
ARCHIE L TURNER COO/CFO  
Type or print name and title

2017-11-06  
Date

Paid Preparer Use Only

Print/Type preparer's name  
Jeffrey J Schragg  
Preparer's signature  
Jeffrey J Schragg  
Date  
Check ☐ if self-employed  
PTIN  
P00234543  
Firm's name BDO USA LLP  
Firm's EIN  
Firm's address 8401 GREENSBORO DRIVE 800  
Phone no (703) 893-0600  
MCLEAN, VA 22102

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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2016)

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

SEE SCHEDULE O

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

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

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

If "Yes," describe these changes on Schedule O

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

**4a** (Code ) (Expenses \$ 1,791,007 including grants of \$ ) (Revenue \$ 987,262 )  
See Additional Data
















**4b** (Code ) (Expenses \$ 1,310,895 including grants of \$ ) (Revenue \$ 787,516 )  
See Additional Data

**4c** (Code ) (Expenses \$ 768,621 including grants of \$ 255,604 ) (Revenue \$ )  
See Additional Data

**4d** Other program services (Describe in Schedule O )  
(Expenses \$ 135,552 including grants of \$ ) (Revenue \$ 30,571 )

**4e** Total program service expenses ▶ 4,006,075

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> 	<b>1</b> Yes	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 	<b>2</b> Yes	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> 	<b>3</b>	No
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> 	<b>4</b> Yes	
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III</i> 	<b>5</b>	No
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I</i> 	<b>6</b>	No
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 	<b>7</b>	No
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 	<b>8</b>	No
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i> 	<b>9</b>	No
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 	<b>10</b> Yes	
<b>11</b> 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		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> 	<b>11a</b>	No
<b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> 	<b>11b</b>	No
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i> 	<b>11c</b>	No
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i> 	<b>11d</b>	No
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 	<b>11e</b> Yes	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i> 	<b>11f</b>	No
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> 	<b>12a</b>	No
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> 	<b>12b</b>	No
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<b>13</b>	No
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b>	No
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	<b>14b</b>	No
<b>15</b> 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 "Yes," complete Schedule F, Parts II and IV</i>	<b>15</b>	No
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	<b>16</b>	No
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	<b>17</b>	No
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<b>18</b>	No
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<b>19</b>	No

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

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H . . . . .</i>		No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>	Yes	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III . . . . .</i>	Yes	
<b>23</b> 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>		No
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a . . . . .</i>		No
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I . . . . .</i>		No
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I . . . . .</i>		No
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II . . . . .</i>		No
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III . . . . .</i>		No
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		No
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		No
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		No
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . . . .</i>		No
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . . . .</i>		No
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . . . .</i>		No
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II . . . . .</i>		No
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I . . . . .</i>		No
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 . . . . .</i>		No
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>		No
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	Yes	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . . . . .	<b>1a</b>	374
<b>b</b>	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . . . . .	<b>1b</b>	0
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	<b>1c</b>	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .	<b>2a</b>	0
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>2b</b>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>3a</b>	Yes
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O . . . . .	<b>3b</b>	Yes
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	<b>4a</b>	No
<b>b</b>	If "Yes," enter the name of the foreign country <b>▶</b> _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	<b>5a</b>	No
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .	<b>5b</b>	No
<b>c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .	<b>5c</b>	
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . . .	<b>6a</b>	No
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .	<b>7a</b>	No
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	<b>7b</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	<b>7c</b>	No
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	<b>7d</b>	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<b>7e</b>	No
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	<b>7f</b>	No
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	<b>7g</b>	
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	<b>7h</b>	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .	<b>8</b>	
<b>9a</b>	Did the sponsoring organization make any taxable distributions under section 4966? . . . . .	<b>9a</b>	
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .	<b>9b</b>	
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter		
<b>a</b>	Gross income from members or shareholders . . . . .	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O . . . . .	<b>13a</b>	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand . . . . .	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year? . . . . .	<b>14a</b>	No
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .	<b>14b</b>	

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI. ☒**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent		
<b>2</b>	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?		No
<b>3</b>	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?	Yes	
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	Yes	
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
<b>6</b>	Did the organization have members or stockholders?	Yes	
<b>7a</b>	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?	Yes	
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	Yes	
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	Yes	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	Yes	
<b>9</b>	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.		No

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?	Yes	
<b>b</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?	Yes	
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13.	Yes	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	Yes	
<b>13</b>	Did the organization have a written whistleblower policy?	Yes	
<b>14</b>	Did the organization have a written document retention and destruction policy?	Yes	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official.		No
<b>b</b>	Other officers or key employees of the organization.		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
<b>b</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?		

**Section C. Disclosure**

<b>17</b>	List the States with which a copy of this Form 990 is required to be filed: ▶
<b>18</b>	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. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)
<b>19</b>	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.
<b>20</b>	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

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

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

Form **990** (2016)

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
<b>1b Sub-Total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								41,000	0	0

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

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
AMC SOURCE, 631 US HIGHWAY 1 SUITE 400 NORTH PALM BEACH, FL 33408	MANAGEMENT FEES	195,157
AMERICAN PSYCHOLOGICAL ASSOCIATION, 750 FIRST STREET NE WASHINGTON, DC 20002	MEMBERSHIP SERVICES	259,283
BARBARA A KEETON, 1096 MAPLE STREET ASHLAND, VA 23005	ADMINISTRATION SERV	140,898

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **3**



**Part VIII** Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . .	<b>1a</b>				
	<b>b</b> Membership dues . . .	<b>1b</b>	2,010,152			
	<b>c</b> Fundraising events . . .	<b>1c</b>				
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	385,326			
	<b>g</b> Noncash contributions included in lines 1a-1f \$ _____					
	<b>h Total.</b> Add lines 1a-1f . . . . . ▶		2,395,478			
<b>Program Service Revenue</b>			Business Code			
	<b>2a</b> REGISTRATION FEES/WORKSHOP/CE		900099	638,232	638,232	
	<b>b</b> VARIOUS CONFERENCES		900099	185,878	185,878	
	<b>c</b> JOURNAL REVENUE		900099	298,678	298,678	
	<b>d</b> LICENSING REVENUE		900099	163,152	163,152	
	<b>e</b> _____					
	<b>f</b> All other program service revenue					
<b>g Total.</b> Add lines 2a-2f . . . . . ▶		1,285,940				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . . ▶		419,427			419,427
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . . ▶		0			
	<b>5</b> Royalties . . . . . ▶		2,783,116			2,783,116
			(i) Real	(ii) Personal		
	<b>6a</b> Gross rents					
	<b>b</b> Less rental expenses					
	<b>c</b> Rental income or (loss)	0	0			
	<b>d</b> Net rental income or (loss) . . . . . ▶		0			
			(i) Securities	(ii) Other		
	<b>7a</b> Gross amount from sales of assets other than inventory	7,924,414				
	<b>b</b> Less cost or other basis and sales expenses	7,902,724				
	<b>c</b> Gain or (loss)	21,690				
	<b>d</b> Net gain or (loss) . . . . . ▶		21,690			21,690
	<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . . <b>a</b>		0			
	<b>b</b> Less direct expenses . . . . . <b>b</b>		0			
	<b>c</b> Net income or (loss) from fundraising events . . . . . ▶		0			
	<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . . <b>a</b>		0			
<b>b</b> Less direct expenses . . . . . <b>b</b>		0				
<b>c</b> Net income or (loss) from gaming activities . . . . . ▶		0				
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . . <b>a</b>		0				
<b>b</b> Less cost of goods sold . . . . . <b>b</b>		0				
<b>c</b> Net income or (loss) from sales of inventory . . . . . ▶		0				
Miscellaneous Revenue		Business Code				
<b>11a</b> EDITOR STIPEND/ALLOWANCE		541900	488,838	488,838		
<b>b</b> BROCHURES/NOVELTY ITEMS		900099	9,547	9,547		
<b>c</b> ADVERTISING		541800	3,930		3,930	
<b>d</b> All other revenue . . . . .			21,024	21,024		
<b>e Total.</b> Add lines 11a-11d . . . . . ▶			523,339			
<b>12 Total revenue.</b> See Instructions . . . . . ▶			7,428,990	1,805,349	3,930	3,224,233

**Part IX Statement of Functional Expenses**

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

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	185,604	185,604		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22.	60,000	60,000		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	10,000	10,000		
<b>4</b> Benefits paid to or for members.	0			
<b>5</b> Compensation of current officers, directors, trustees, and key employees.	0			
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
<b>7</b> Other salaries and wages.	0			
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	0			
<b>9</b> Other employee benefits.	0			
<b>10</b> Payroll taxes.	0			
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management.	330,017		330,017	
<b>b</b> Legal.	0			
<b>c</b> Accounting.	3,067		3,067	
<b>d</b> Lobbying.	0			
<b>e</b> Professional fundraising services. See Part IV, line 17.	0			
<b>f</b> Investment management fees.	23,763		23,763	
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	1,014,490	455,807	558,683	
<b>12</b> Advertising and promotion.	110,019	106,097	3,922	
<b>13</b> Office expenses.	662,974	357,163	305,811	
<b>14</b> Information technology.	170,450		170,450	
<b>15</b> Royalties.	0			
<b>16</b> Occupancy.	0			
<b>17</b> Travel.	815,518	437,169	378,349	
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
<b>19</b> Conferences, conventions, and meetings.	1,442,051	1,109,338	324,305	8,408
<b>20</b> Interest.	0			
<b>21</b> Payments to affiliates.	0			
<b>22</b> Depreciation, depletion, and amortization.	0			
<b>23</b> Insurance.	500		500	
<b>24</b> 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):				
<b>a</b> HONORARIUM/STIPEND	742,548	678,926	63,622	
<b>b</b> AWARDS	353,715	351,035	2,680	
<b>c</b> CONTRIBUTIONS/DONATIONS	247,419	197,253	50,166	
<b>d</b> EDUCATION/WORKSHOPS	21,428	18,874	2,554	
<b>e</b> All other expenses	67,808	38,809	28,999	
<b>25</b> Total functional expenses. Add lines 1 through 24e.	6,261,371	4,006,075	2,246,888	8,408
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

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

				(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .		906,025	<b>1</b>	868,756
	<b>2</b>	Savings and temporary cash investments . . . . .		9,228,562	<b>2</b>	8,616,957
	<b>3</b>	Pledges and grants receivable, net . . . . .		0	<b>3</b>	0
	<b>4</b>	Accounts receivable, net . . . . .		553,416	<b>4</b>	528,733
	<b>5</b>	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		0	<b>5</b>	0
	<b>6</b>	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.		0	<b>6</b>	0
	<b>7</b>	Notes and loans receivable, net . . . . .		0	<b>7</b>	0
	<b>8</b>	Inventories for sale or use . . . . .		0	<b>8</b>	0
	<b>9</b>	Prepaid expenses and deferred charges . . . . .		265,218	<b>9</b>	381,404
	<b>10a</b>	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D.	<b>10a</b>			
	<b>b</b>	Less: accumulated depreciation	<b>10b</b>	0	<b>10c</b>	0
	<b>11</b>	Investments—publicly traded securities . . . . .		12,011,806	<b>11</b>	15,737,773
	<b>12</b>	Investments—other securities. See Part IV, line 11 . . . . .		0	<b>12</b>	0
	<b>13</b>	Investments—program-related. See Part IV, line 11 . . . . .		0	<b>13</b>	0
	<b>14</b>	Intangible assets . . . . .		0	<b>14</b>	0
	<b>15</b>	Other assets. See Part IV, line 11 . . . . .		475	<b>15</b>	475
<b>16</b>	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .		22,965,502	<b>16</b>	26,134,098	
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .		319,613	<b>17</b>	380,765
	<b>18</b>	Grants payable . . . . .		0	<b>18</b>	0
	<b>19</b>	Deferred revenue . . . . .		1,086,514	<b>19</b>	1,058,384
	<b>20</b>	Tax-exempt bond liabilities . . . . .		0	<b>20</b>	0
	<b>21</b>	Escrow or custodial account liability. Complete Part IV of Schedule D.		0	<b>21</b>	0
	<b>22</b>	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		0	<b>22</b>	0
	<b>23</b>	Secured mortgages and notes payable to unrelated third parties . . . . .		0	<b>23</b>	0
	<b>24</b>	Unsecured notes and loans payable to unrelated third parties . . . . .		0	<b>24</b>	0
	<b>25</b>	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		156,987	<b>25</b>	0
	<b>26</b>	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .		1,563,114	<b>26</b>	1,439,149
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>					
	<b>27</b>	Unrestricted net assets		18,814,293	<b>27</b>	22,865,363
	<b>28</b>	Temporarily restricted net assets . . . . .		2,588,095	<b>28</b>	1,829,586
	<b>29</b>	Permanently restricted net assets		0	<b>29</b>	0
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>					
	<b>30</b>	Capital stock or trust principal, or current funds . . . . .			<b>30</b>	
	<b>31</b>	Paid-in or capital surplus, or land, building or equipment fund . . . . .			<b>31</b>	
	<b>32</b>	Retained earnings, endowment, accumulated income, or other funds			<b>32</b>	
<b>33</b>	<b>Total net assets or fund balances</b> . . . . .		21,402,388	<b>33</b>	24,694,949	
<b>34</b>	<b>Total liabilities and net assets/fund balances</b> . . . . .		22,965,502	<b>34</b>	26,134,098	

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	7,428,990
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	6,261,371
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	1,167,619
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	21,402,388
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	564,581
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	15,506
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	1,544,855
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	24,694,949

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>b</b> Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>c</b> If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
<b>b</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		

# Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 54-1572590  
**Name:** AMERICAN PSYCHOLOGICAL ASSOCIATION INC  
GROUP RETURN

Form 990 (2016)

**Form 990, Part III, Line 4a:**

ANNUAL CONVENTION, DIVISIONAL MEETINGS, AND OTHER EVENTS - ACTIVITIES INCLUDE ATTENDANCE AND PLANNED ACTIVITIES AT THE ANNUAL CONVENTION, AS WELL AS, VARIOUS DIVISION MEETINGS, WORKSHOPS, CONTINUING EDUCATION AND OTHER EVENTS THROUGHOUT THE YEAR COVERING VARIOUS EDUCATIONAL AND SCIENTIFIC TOPICS IN PSYCHOLOGY

**Form 990, Part III, Line 4b:**

PUBLICATIONS (JOURNALS, NEWSLETTERS, ETC ) - THE PREPARATION AND DISSEMINATION OF JOURNALS AND NEWSLETTERS IN VARIOUS PSYCHOLOGY DISCIPLINES TO INFORM MEMBERS AND OTHER PSYCHOLOGY PROFESSIONALS ON PSYCHOLOGY ISSUES

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**Form 990, Part III, Line 4c:**

AWARDS AND GRANTS - VARIOUS AWARD PRESENTATIONS AND GRANTS TO FUND VARIOUS RESEARCH PROJECTS IN PSYCHOLOGY

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Emily A A Dow ..... D01-Early Career Rep 8/15-8/17	3 0 ..... 0 0	X						0	0	0
John D Hogan ..... D01-Historian 1/14-12/17	3 0 ..... 0 0	X						0	0	0
Gerianne M Alexander ..... D01-Journal Editor 1/14-12/19	20 0 ..... 0 0	X						0	0	0
Alicia M Trotman ..... D01-NewsletterEditor 1/15-7/17	7 0 ..... 0 0	X						0	0	0
Kasey Powers ..... D01-Student Rep 8/15-8/17	3 0 ..... 0 0	X						0	0	0
Suzanne Baker ..... D02-Past President	10 0 ..... 0 0	X		X				0	0	0
Janie Wilson ..... D02-President	20 0 ..... 0 0	X		X				8,000	0	0
Kenneth Keith ..... D02-President-Elect	10 0 ..... 0 0	X		X				4,000	0	0
Thomas Pusateri ..... D02-Secretary	10 0 ..... 0 0	X		X				0	0	0
David Kreiner ..... D02-Treasurer	10 0 ..... 0 0	X		X				4,000	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Sue Frantz ..... D02-VP for Resources	10 0 ..... 0 0	X		X				0	0	0
Aaron Richmond ..... D02-VP for Programming	10 0 ..... 0 0	X		X				0	0	0
Meera Komarraju ..... D02-VP for Membership	10 0 ..... 0 0	X		X				0	0	0
Amy Fineburg ..... D02-VP for Recognition/Awards	10 0 ..... 0 0	X		X				0	0	0
Susan Nolan ..... D02-VP Diversity/Int Relations	10 0 ..... 0 0	X		X				0	0	0
Leah L Light ..... D03-Past President	1 0 ..... 0 0	X		X				0	0	0
Anne M Cleary ..... D03-President	4 0 ..... 0 0	X		X				0	0	0
Jonathon D Crystal ..... D03-President-Elect	3 0 ..... 0 0	X		X				0	0	0
Emily M Elliott ..... D03-Secretary-Treasurer	4 0 ..... 0 0	X		X				0	0	0
Frank Farley ..... D03-Member-at-Large	1 0 ..... 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Michael J Beran ..... D03-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Matthew G Rhodes ..... D03-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Patricia D Stokes ..... D03-Member-at-Large	1 0 ..... 0 0	X						0	0	0
William W Stoops ..... D03-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Jessica K Witt ..... D03-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Emanuel Donchin ..... D03-Council Representative	1 0 ..... 0 0	X						0	0	0
J Bruce Overmier ..... D03-Council Representative	1 0 ..... 0 0	X						0	0	0
David A Washburn ..... D03-Membership Chair	3 0 ..... 0 0	X						0	0	0
Sarah DeLozier ..... D03-Student/APAGS Rep/Chair	1 0 ..... 0 0	X						0	0	0
Abigail Panter ..... D05-Past President Jan-Aug	2 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										(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		
(A) Name and Title		(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)											
			Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former						
Scott Hofer		5 0												
D05-Past President Aug-Dec		0 0	X		X								0	0
Joseph Rodgers		5 0												
D05-President Aug-Dec		0 0	X		X								0	0
Amy Schmidt		2 0												
D05-President Elect Aug-Dec		0 0	X		X								0	0
Matthew Fritz		4 0												
D05-Coord Office /Secretary		0 0	X		X								0	0
Rachel Fouladi		5 0												
D05-Financial Officer		0 0	X		X								0	0
Barbara Byrne		2 0												
D05-Member-at-Large Jan-Aug		0 0	X										0	0
Nathan Kuncel		2 0												
D05-Member-at-Large Aug-Dec		0 0	X										0	0
Deborah Bandalos		2 0												
D05-Member-at-Large		0 0	X										0	0
Carolyn Anderson		2 0												
D05-Member-at-Large		0 0	X										0	0
Susana Urbina		3 0												
D05-Council Representative		0 0	X										0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
William Revelle ..... D05-Council Representative	3 0 ..... 0 0	X						0	0	0
David Herzberg ..... D05-Section Rep 7 Jan-Aug	2 0 ..... 0 0	X						0	0	0
Eric Youngstrom ..... D05-Section Rep 7 Assessment	3 0 ..... 0 0	X						0	0	0
Angelta Bryan ..... D05-Section Rep 7 Evaluation	3 0 ..... 0 0	X						0	0	0
Scott Churchill ..... D05-Section Rep 7 Qualitative	3 0 ..... 0 0	X						0	0	0
David Washburn ..... D06-Past President	1 0 ..... 0 0	X		X				0	0	0
Mary Cain ..... D06-President	5 0 ..... 0 0	X		X				0	0	0
Michael Beran ..... D06-President Elect	1 0 ..... 0 0	X		X				0	0	0
Gary Greenberg ..... D06-President Elect	2 0 ..... 0 0	X		X				0	0	0
Rachel Nicolle Matthews Carr ..... D06-Secretary	3 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Lisa Savage ..... D06-Treasurer	3 0 ..... 0 0	X		X				0	0	0
Sarah Brosnan ..... D06-Memeber at Large	1 0 ..... 0 0	X						0	0	0
Chana Atkins ..... D06-Member at Large	1 0 ..... 0 0	X						0	0	0
Mark Krause ..... D06-Council Representative	3 0 ..... 0 0	X						0	0	0
Wayne Pratt ..... D06-Awards Chair	2 0 ..... 0 0	X						0	0	0
Jennifer Volk ..... D06-Fellows Member	2 0 ..... 0 0	X						0	0	0
Alan Daniel ..... D06-News Letter Coordinator	2 0 ..... 0 0	X						0	0	0
Douglas Wallace ..... D06-Program Chair	3 0 ..... 0 0	X						0	0	0
Allyson Bennett ..... D06-Program Chair	3 0 ..... 0 0	X						0	0	0
Gail Goodman PhD ..... D07-Past President	10 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jacqueline Eccles PhD ..... D07-President	10 0 ..... 0 0	X		X				0	0	0
Michael Lamb PhD ..... D07-President-Elect	10 0 ..... 0 0	X		X				0	0	0
Kali Trzesniewski PhD ..... D07-Secretary	10 0 ..... 0 0	X		X				0	0	0
Kristen Alexander PhD ..... D07-Treasurer	10 0 ..... 0 0	X		X				0	0	0
James Kaufman ..... D10-Past-President thru 7/31	8 0 ..... 0 0	X		X				0	0	0
Steven Pritzker ..... D10-Past President 8/1-7/31/18	8 0 ..... 0 0	X		X				0	0	0
Paul Silvia ..... D10-President 8/1/16-7/31/18	8 0 ..... 0 0	X		X				0	0	0
Mary Gregerson ..... D10-President-Elect 8/16-7/18	8 0 ..... 0 0	X		X				0	0	0
Jennifer Katz-Buonincontro ..... D10-Secretary/Program Co-Chair	8 0 ..... 0 0	X		X				0	0	0
Heather Snyder ..... D10-Treasurer	8 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Scott Kaufman ..... D10-Member-at-Large	8 0 ..... 0 0	X						0	0	0
Pamela McCrory ..... D10-Member-at-Large	8 0 ..... 0 0	X						0	0	0
Danny Wedding ..... D10-Member-at-Large/Counc Rep	8 0 ..... 0 0	X						0	0	0
Kyung Hee Kim ..... D10-Int Rep 8/16-7/18	8 0 ..... 0 0	X						0	0	0
Paul Sowden ..... D10-Int Rep thru 7/31/16	8 0 ..... 0 0	X						0	0	0
Roni Reiter-Palmon ..... D10-PACA journal co-editor	8 0 ..... 0 0	X						0	0	0
Alexander McKay ..... D10-Student rep thru 7/31/16	8 0 ..... 0 0	X						0	0	0
Maria Eugenia Panero ..... D10-Student rep 8/1/16-7/31/17	8 0 ..... 0 0	X						0	0	0
Terence Keane ..... D12-Past President	2 0 ..... 0 0	X		X				0	0	0
Bradley E Karlin ..... D12-President	10 0 ..... 0 0	X		X				0	0	0



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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Michael W Otto ..... D12-President-Elect	4 0 ..... 0 0	X		X				0	0	0
John C Linton ..... D12-Secretary	1 0 ..... 0 0	X		X				0	0	0
Jonathan Weinand ..... D12-Treasurer	5 0 ..... 0 0	X		X				0	0	0
Jennifer K Penberthy ..... D12-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Danny Wedding ..... D12-Council Representative	1 0 ..... 0 0	X						0	0	0
Guillermo Bernal ..... D12-Council Representative	1 0 ..... 0 0	X						0	0	0
Kenneth J Sher ..... D12-Council Representative	1 0 ..... 0 0	X						0	0	0
Mark B Sobell ..... D12-Council Representative	1 0 ..... 0 0	X						0	0	0
Victor Molinari ..... D12-Section 2 Representative	1 0 ..... 0 0	X						0	0	0
David A Smith ..... D12-Section 3 Representative	1 0 ..... 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Elaine Burke ..... D12-Section 4 Representative	1 0 ..... 0 0	X						0	0	0
Frederick T Leong ..... D12-Section 6 Representative	1 0 ..... 0 0	X						0	0	0
Anders Goranson ..... D12-Section 7 Representative	1 0 ..... 0 0	X						0	0	0
Sharon Berry ..... D12-Section 8 Representative	1 0 ..... 0 0	X						0	0	0
Paul Arbisi ..... D12-Section 9 Representative	1 0 ..... 0 0	X						0	0	0
Natalia Potapova ..... D12-Section 10 Representative	1 0 ..... 0 0	X						0	0	0
John P Fennig ..... D13-Past President 02/16-02/17	5 0 ..... 0 0	X		X				0	0	0
Gregory Pennington PhD ..... D13-President 02/16-02/17	20 0 ..... 0 0	X		X				0	0	0
Dee R Ramsel ..... D13-President-Elect 2/16-2/17	5 0 ..... 0 0	X		X				0	0	0
Carolyn F Humphrey PhD ..... D13-Secretary 2/14-2/18	5 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Brian A Buford PhD ..... D13-Treasurer 1/15-12/17	10 0 ..... 0 0	X		X				0	0	0
Amy Owen Nieberding PhD ..... D13-Council Rep 1/15-12/17	5 0 ..... 0 0	X						0	0	0
Randall P White PhD ..... D13-Council Rep 1/16-12/18	5 0 ..... 0 0	X						0	0	0
Michelle A Downey PsyD ..... D13-Domain Ldr Comm 2/16-2/19	5 0 ..... 0 0	X						0	0	0
Melanie Kinser PhD ..... D13-Domain Ldr Ed 2/14-2/18	5 0 ..... 0 0	X						0	0	0
William H Berman PhD ..... D13-Domain Ldr Ext 2/15-1/18	5 0 ..... 0 0	X						0	0	0
Kenneth M Nowack ..... D13-Domain Ldr Res 4/16-2/17	5 0 ..... 0 0	X						0	0	0
Karen R Harris ..... D15-Past President 8/15-8/16	15 0 ..... 0 0	X		X				0	0	0
Nancy Perry ..... D15-Past-President 8/16-8/17	15 0 ..... 0 0	X		X				0	0	0
Bonnie J F Meyer ..... D15-President 8/16-8/17	35 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
E Michael Nussbaum ..... D15-President-Elect 8/16-8/17	4 0 ..... 0 0	X		X				0	0	0
Michele G Gill ..... D15-Treasurer 8/13-8/16	2 0 ..... 0 0	X		X				0	0	0
Carol Connor ..... D15-Treasurer 8/15-8/18	2 0 ..... 0 0	X		X				0	0	0
Ji Hong ..... D15-Secretary 8/14-8/17	8 0 ..... 0 0	X		X				0	0	0
DeLeon Grey ..... D15-Member-at-Large 8/15-8/18	1 0 ..... 0 0	X						0	0	0
Cynthia Hudley ..... D15-Member-at-Large 8/15-8/18	1 0 ..... 0 0	X						0	0	0
Robert Klassen ..... D15-Member-at-Large 8/14-8/17	1 0 ..... 0 0	X						0	0	0
Timothy W Curby ..... D15-Rep to APA Coun 8/13-8/16	2 0 ..... 0 0	X						0	0	0
Avi Kaplan ..... D15-Rep to APA Coun 8/16-8/19	2 0 ..... 0 0	X						0	0	0
James DiPerna ..... D16-Past President	5 0 ..... 0 0	X		X				0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Lea Theodore ..... D16-President	8 0 ..... 0 0	X		X				0	0	0
Amanda Clinton ..... D16-President-Elect	5 0 ..... 0 0	X		X				0	0	0
Prerna Aurora ..... D16-Secretary	5 0 ..... 0 0	X		X				0	0	0
Mark Terjesen ..... D16-Treasurer	5 0 ..... 0 0	X		X				0	0	0
Samuel Song ..... D16-Council Representative	5 0 ..... 0 0	X						0	0	0
Bonnie Nastasi ..... D16-Council Representative	5 0 ..... 0 0	X						0	0	0
Tammy Hughes ..... D16-Council Representative	5 0 ..... 0 0	X						0	0	0
Michelle Perfect ..... D16-Vice President Pub/Comm	5 0 ..... 0 0	X		X				0	0	0
Robin Coddig ..... D16-Vice President Conv /PR	8 0 ..... 0 0	X		X				0	0	0
Catherine Fiorello ..... D16-Vice President ETSA	8 0 ..... 0 0	X		X				0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Yadira Sanchez ..... D16-Vice President SEREMA	8 0 ..... 0 0	X		X				0	0	0
Amy Briesch ..... D16-Vice President Membership	8 0 ..... 0 0	X		X				0	0	0
Michelle Athanasiou ..... D16-Vice President Prof Affair	5 0 ..... 0 0	X		X				0	0	0
Michael Mobley ..... D17-Past President	10 0 ..... 0 0	X		X				0	0	0
Jim Lichtenberg ..... D17-President & Past President	10 0 ..... 0 0	X		X				0	0	0
Martin Heesacker ..... D17-President Elect/President	20 0 ..... 0 0	X		X				0	0	0
Arpana Inman ..... D17-President Elect	15 0 ..... 0 0	X		X				0	0	0
Suzanne Lease ..... D17-Secretary	10 0 ..... 0 0	X		X				0	0	0
Stephen Cook ..... D17-Treasurer	10 0 ..... 0 0	X		X				0	0	0
Susan Kashubeck-West ..... D17-Treasurer	10 0 ..... 0 0	X		X				0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Barry Chung ..... 2017-Council Representative	10 0 ..... 0 0	X						0	0	0
Changming Duan ..... 2017-Council Representative	10 0 ..... 0 0	X						0	0	0
Roberta Nutt ..... 2017-Council Representative	10 0 ..... 0 0	X						0	0	0
Candace Crowell ..... 2017-Council Representative	10 0 ..... 0 0	X						0	0	0
Louise Douce ..... 2017-VP, Communication	10 0 ..... 0 0	X		X				0	0	0
Katharine Hahn Oh ..... 2017-VP, Communication	10 0 ..... 0 0	X		X				0	0	0
Anneliese Singh ..... 2017-VP, Diversity/Pub Interest	10 0 ..... 0 0	X		X				0	0	0
Marie Miville ..... 2017-VP, Education & Training	10 0 ..... 0 0	X		X				0	0	0
Michael Scheel ..... 2017-VP, Education & Training	10 0 ..... 0 0	X		X				0	0	0
Aye ifti ..... 2017-VP, International Affairs	10 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors			
(C)	(D)	(E)	(F)

(A) Compensated Employees, and Independent Contractors	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for related organizations below dotted line)	Position (do not check more than one box, unless person is both an officer and a director/trustee)						Reportable compensation from the organization (W- 2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Sheryl Benton ..... D17-VP, Professional Practice	10 0 ..... 0 0	X		X				0	0	0
Rachel Navarro ..... D17-VP, Scientific Affairs	10 0 ..... 0 0	X		X				0	0	0
Brandon Scott Millspaugh ..... D17-SAS Representative	10 0 ..... 0 0	X						0	0	0
Wendy Gonzalez-Canal ..... D17-SAS Representative	10 0 ..... 0 0	X						0	0	0
Ashley Oliver ..... D17-SAS Representative	10 0 ..... 0 0	X						0	0	0
Erica Wiley Whiteman ..... D17-SAS Representative	10 0 ..... 0 0	X						0	0	0
Timothy Carmody ..... D18-Past President 8/16-12/16	4 0 ..... 0 0	X		X				0	0	0
Shirley Glynn ..... D18-President 8/16-12/16	4 0 ..... 0 0	X		X				0	0	0
Linda Richardson ..... D18-President-Elect 8/16-12/16	4 0 ..... 0 0	X		X				0	0	0
David Pilkey ..... D18-Secretary-Treasurer	4 0 ..... 0 0	X		X				0	0	0



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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Monica Roy ..... D18-Sec Chair Veterans Affairs	4 0 ..... 0 0	X						0	0	0
Howard Steinberg ..... D18-Sec Chair Veterans Affairs	4 0 ..... 0 0	X						0	0	0
Marcia Hunt ..... D18-Sec Chair SMI/SED	4 0 ..... 0 0	X						0	0	0
Jennifer Snyder ..... D18-Sec Chair Comm/State Hosp	4 0 ..... 0 0	X						0	0	0
Will Newbill ..... D18-Sec Chair Comm/State Hosp	4 0 ..... 0 0	X						0	0	0
Casey Stewart ..... D18-Sec Chair Police/Safety	4 0 ..... 0 0	X						0	0	0
Wendy Peters ..... D18-Sec Chair Psychologists	4 0 ..... 0 0	X						0	0	0
Lauren Lussier ..... D18-Sec Chair Criminal Justice	4 0 ..... 0 0	X						0	0	0
Thomas Williams ..... D19-Past President	3 0 ..... 0 0	X		X				0	0	0
Ann Landes ..... D19-President	3 0 ..... 0 0	X		X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Sally Harvey ..... D19-President Elect	3 0 ..... 0 0	X		X				0	0	0
Eric Surface ..... D19-Secretary	3 0 ..... 0 0	X		X				0	0	0
Scott Johnston ..... D19-Treasurer	3 0 ..... 0 0	X		X				0	0	0
Joel Dubenitz ..... D19-Member at Large	1 0 ..... 0 0	X						0	0	0
Christopher Murphy ..... D19-Member at Large	1 0 ..... 0 0	X						0	0	0
Arlene Saitzyk ..... D19-Member at Large	1 0 ..... 0 0	X						0	0	0
Larry James ..... D19-Council Representative	1 0 ..... 0 0	X						0	0	0
Sara Czaja ..... D20-Past President	1 0 ..... 0 0	X		X				0	0	0
Harvey Sterns ..... D20-President	3 0 ..... 0 0	X		X				0	0	0
Manfred Diehl ..... D20-President-Elect	1 0 ..... 0 0	X		X				0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Joanne Montepare ..... D20-Secretary	2 0 ..... 0 0	X		X				0	0	0
Joseph Gaugler ..... D20-Treasurer	4 0 ..... 0 0	X		X				0	0	0
Karen Kopera-Frye ..... D20-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Jane Berry ..... D20-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Jennifer Margrett ..... D20-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Katherine Fiori ..... D20-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Jennifer Moye ..... D20-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Julie Hicks Patrick ..... D20-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Lynn Snow ..... D20-Member-at-Large	1 0 ..... 0 0	X						0	0	0
K Warner Schaie ..... D20-Council Representative	3 0 ..... 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Patricia Parmalee ..... D20-Council Representative	3 0 ..... 0 0	X						0	0	0
Erica Rovira ..... D21-Past-President 1/16-7/16	1 0 ..... 0 0	X		X				0	0	0
Doug Wiegmann ..... D21-Past-President 8/16-12/16	2 0 ..... 0 0	X		X				0	0	0
Anne McLaughlin ..... D21-President 8/16-12/16	2 0 ..... 0 0	X		X				0	0	0
Robert Proctor ..... D21-President Elect 8/16-12/16	3 0 ..... 0 0	X		X				0	0	0
Beth Blickensderfer ..... D21-Secretary-Treasurer	1 0 ..... 0 0	X		X				0	0	0
Richard Chong Pak ..... D21-Member at Large	1 0 ..... 0 0	X						0	0	0
Terry Von Thaden ..... D21-Member at Large	1 0 ..... 0 0	X						0	0	0
Laura Whitlock ..... D21-Member at Large	1 0 ..... 0 0	X						0	0	0
Kathleen Brown ..... D22-President & Past-President	10 0 ..... 0 0	X		X				0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Lisa Brenner ..... D22-President Elect&President	10 0 ..... 0 0	X		X				0	0	0
Michelle Meade ..... D22-President Elect	5 0 ..... 0 0	X		X				0	0	0
Joseph Rath ..... D22-Secretary	2 0 ..... 0 0	X		X				0	0	0
Aaron Turner ..... D22-Treasurer	1 0 ..... 0 0	X		X				0	0	0
Kimberley Monden ..... D22-Treasurer	2 0 ..... 0 0	X		X				0	0	0
Eun-Jeong Lee ..... D22-Member at Large	1 0 ..... 0 0	X						0	0	0
Beth Rush ..... D22-Member at Large	1 0 ..... 0 0	X						0	0	0
Nancy Hansen Merbitz ..... D22-Member at Large	1 0 ..... 0 0	X						0	0	0
Stephanie Reid-Arndt ..... D22-Member at Large	1 0 ..... 0 0	X						0	0	0
Janet Niemeier ..... D22-Member at Large	1 0 ..... 0 0	X						0	0	0

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

(A)

(B)

(C)

(D)

(E)

(F)

Name and Title	Average hours per week (list any hours for related organizations below dotted line)	Position (do not check more than one box, unless person is both an officer and a director/trustee)						Reportable compensation from the organization (W- 2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
<div>Marlene Vega</div> <div>.....</div> <div>D22-Member at Large</div>	<div>1 0</div> <div>.....</div> <div>0 0</div>	X						0	0	0
<div>Pamela Fitzpatrick</div> <div>.....</div> <div>D22-Member at Large</div>	<div>1 0</div> <div>.....</div> <div>0 0</div>	X						0	0	0
<div>Paul Perrin</div> <div>.....</div> <div>D22-Member at Large</div>	<div>1 0</div> <div>.....</div> <div>0 0</div>	X						0	0	0
<div>Kim Gorgens</div> <div>.....</div> <div>D22-Representative to Council</div>	<div>1 0</div> <div>.....</div> <div>0 0</div>	X						0	0	0
<div>Linda Mona</div> <div>.....</div> <div>D22-Representative to Council</div>	<div>1 0</div> <div>.....</div> <div>0 0</div>	X						0	0	0
<div>Connie Sung</div> <div>.....</div> <div>D22-Early Career Rep</div>	<div>1 0</div> <div>.....</div> <div>0 0</div>	X						0	0	0
<div>Samantha DeDios Stern</div> <div>.....</div> <div>D22-Student Representative</div>	<div>1 0</div> <div>.....</div> <div>0 0</div>	X						0	0	0
<div>Sarah Lahey</div> <div>.....</div> <div>D22-Sec 1 Pediatrics,President</div>	<div>1 0</div> <div>.....</div> <div>0 0</div>	X						0	0	0
<div>Carrie Pilarski</div> <div>.....</div> <div>D22-Sec 2 Women, President</div>	<div>1 0</div> <div>.....</div> <div>0 0</div>	X						0	0	0
<div>Mark Freeman</div> <div>.....</div> <div>D24-Past-President</div>	<div>5 0</div> <div>.....</div> <div>0 0</div>	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Thomas Teo ..... 2024-President	10 0 ..... 0 0	X		X				0	0	0
Alan Tjeltveit ..... 2024-President-Elect	10 0 ..... 0 0	X		X				0	0	0
Chris Ramey ..... 2024-Secretary	5 0 ..... 0 0	X		X				0	0	0
Mary Beth Morrissey ..... 2024-Treasurer	5 0 ..... 0 0	X		X				0	0	0
Brent Dean Robbins ..... 2024-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Scott Churchill ..... 2024-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Sarah Hickinbottom ..... 2024-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Lisa Osbeck ..... 2024-Council Rep	5 0 ..... 0 0	X						0	0	0
Joshua Webb Clegg ..... 2024-Convention program chair	5 0 ..... 0 0	X						0	0	0
Sam Downs ..... 2024-Midwinter meeting co-chair	5 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										(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		
(A) Name and Title		(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)											
			Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former						
Gregg Henriques		5 0												
D24-Membership Chair		0 0	X										0	0
Brady Wiggins		5 0												
D24-Early Career Rep/Chair		0 0	X										0	0
Frank Richardson		5 0												
D24-Elder-at-Large		0 0	X										0	0
Dan Aalbers		5 0												
D24-Ethics Psychology co-chair		0 0	X										0	0
Blaine Fowers		5 0												
D24-Fellows Chair		0 0	X										0	0
Samuel Downs		5 0												
D24-Hist/Documentation Chair		0 0	X										0	0
Brent Slife		5 0												
D24-Journal Editor		0 0	X										0	0
Erin Thrift		5 0												
D24-Student Rep/Co-chair		0 0	X										0	0
Catherine Mellor		5 0												
D24-Student Rep/Co-chair		0 0	X										0	0
John Houser		5 0												
D24-Web/Social Media Chair		0 0	X										0	0



(A) Name and Title	(B) Average hours per week (list any hours spent outside of the organization)	(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 (US\$14,000 or more)	(E) Reportable compensation from other organizations (US\$14,000 or more)
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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Leon Green ..... D25-Past-President	5 0 ..... 0 0	X		X				0	0	0
Richard Foxx ..... D25-President	5 0 ..... 0 0	X		X				0	0	0
Ed Wasserman ..... D25-President-Elect	5 0 ..... 0 0	X		X				0	0	0
Eric Jacobs ..... D25-Secretary-Treasurer	8 0 ..... 0 0	X		X				0	0	0
Cynthia Anderson ..... D25-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Bruce Thyer ..... D25-Member-at-Large	5 0 ..... 0 0	X						0	0	0
James Mullick ..... D25-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Henderikus Hank Stam ..... D26-Past President	2 0 ..... 0 0	X		X				0	0	0
James Lamiell ..... D26-President	5 0 ..... 0 0	X		X				0	0	0
Edward K Morris ..... D26-President-Elect	2 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										(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		
(A) Name and Title		(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)											
			Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former						
Vincent W Hevern		4 0												
D26-Secretary-Treasurer		0 0	X		X								0	0
Cathy Faye		6 0												
D26-APA Council Representative		0 0	X										0	0
Arlie Belliveau		5 0												
D26-16 Program Chair		0 0	X										0	0
Deborah Johnson		2 0												
D26-Archival Preservationist		0 0	X										0	0
Jennifer Bazar		2 0												
D26-Electronic Comm Editor		0 0	X										0	0
Andrew Winston		1 0												
D26-Fellows Chair		0 0	X										0	0
Nadine Weidman		10 0												
D26-Journal Office/Editor		0 0	X										0	0
Russ Kosits		2 0												
D26-Membership Chair		0 0	X										0	0
Wanda Power		1 0												
D26-Student Representative		0 0	X										0	0
Bret Kloos		10 0												
D27-Past-President 1/16-8/16		0 0	X		X								0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
John Moritsugu ..... D27-Past-President 8/16-12/16	10 0 ..... 0 0	X		X				0	0	0
Susan McMahon ..... D27-President 8/16-12/16	10 0 ..... 0 0	X		X				0	0	0
Yolanda Suarez-Balcazar ..... D27-President-Elect 8/16-12/16	10 0 ..... 0 0	X		X				0	0	0
Stephanie Reich ..... D27-Secretary 1/1/16-8/1/16	10 0 ..... 0 0	X		X				0	0	0
Elizabeth Thomas ..... D27-Secretary 8/1/16-12/31/16	10 0 ..... 0 0	X		X				0	0	0
James Emshoff ..... D27-Treasurer 1/1/16-12/31/16	10 0 ..... 0 0	X		X				0	0	0
William Stoops ..... D28-Past President	1 0 ..... 0 0	X		X				0	0	0
Stacey Sigmon ..... D28-President	3 0 ..... 0 0	X		X				0	0	0
David Festinger ..... D28-President Elect	1 0 ..... 0 0	X		X				0	0	0
Katie Saulsgiver ..... D28-Member-at-Large	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mark Smith ..... D28-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Cecile Marczynski ..... D28-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Anthony Liguori ..... D28-Council Representative	1 0 ..... 0 0	X						0	0	0
Rodney Goodyear ..... D29-Past President	1 0 ..... 0 0	X		X				0	0	0
Armand Cerbone ..... D29-President	2 0 ..... 0 0	X		X				0	0	0
Jeffery Zimmerman ..... D29-President-Elect	1 0 ..... 0 0	X		X				0	0	0
Barry Farber ..... D29-Secretary	1 0 ..... 0 0	X		X				0	0	0
Jesse J Owen ..... D29-Treasurer	2 0 ..... 0 0	X		X				0	0	0
Maria Lauer ..... D29-Student Representative	1 0 ..... 0 0	X						0	0	0
Rayna Markin ..... D29-Domain Rep Early Career	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jennifer Callahan ..... D29-Domain Rep Ed/Training	1 0 ..... 0 0	X						0	0	0
Jairo Fuertes ..... D29-Domain Rep Diversity	1 0 ..... 0 0	X						0	0	0
Beverly Greene ..... D29-Domain Rep Diversity	1 0 ..... 0 0	X						0	0	0
Fred Leong ..... D29-Domain Rep Int Affairs	1 0 ..... 0 0	X						0	0	0
Jean Birbilis ..... D29-Domain Rep Membership	1 0 ..... 0 0	X						0	0	0
Rosemary Adam-Terem ..... D29-Domain Rep Pub Interest	1 0 ..... 0 0	X						0	0	0
Barbara Thompson ..... D29-Domain Rep Prof practice	1 0 ..... 0 0	X						0	0	0
Susan Woodhouse ..... D29-Domain Rep Science/Scholar	1 0 ..... 0 0	X						0	0	0
Gary Elkins PhD ..... D30-Past President 8/15-7/16	2 0 ..... 0 0	X		X				0	0	0
Steffanie J Schilder PhD ..... D30-Past President 8/16-7/17	2 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Ciara C Christensen PhD ..... D30-President 8/16-7/17	2 0 ..... 0 0	X		X				0	0	0
E T Dowd PhDABPP ..... D30-President-Elect 8/16-7/17	2 0 ..... 0 0	X		X				0	0	0
David Godot PsyD ..... D30-Secretary 8/15-7/18	2 0 ..... 0 0	X		X				0	0	0
John C Mohl PhD ..... D30-Treasurer 8/15-7/18	2 0 ..... 0 0	X		X				0	0	0
James R Council PhD ..... D30-Member-at-Large 8/12-7/16	2 0 ..... 0 0	X						0	0	0
Leonard S Milling PhD ..... D30-Member-at-Large 8/14-7/17	2 0 ..... 0 0	X						0	0	0
Guy H Montgomery ..... D30-Member-at-Large 8/15-7/18	2 0 ..... 0 0	X						0	0	0
Joseph P Green ..... D30-Member-at-Large 8/16-7/19	2 0 ..... 0 0	X						0	0	0
Donald P Moss PhD ..... D30-Council Rep 1/15-12/17	2 0 ..... 0 0	X						0	0	0
Angela O Herzog PhD ..... D31-Past-President	5 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Cathy McDaniels Wilson PhD ..... D31-President	5 0 ..... 0 0	X		X				0	0	0
Dinelia Rosa PhD ..... D31-President-Elect	5 0 ..... 0 0	X		X				0	0	0
Peter M Oppenheimer PhD ..... D31-Secretary	5 0 ..... 0 0	X		X				0	0	0
Nanci C Klein PhD ..... D31-Treasurer	5 0 ..... 0 0	X		X				0	0	0
Mera Kachgal PhD ..... D31-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Bruce Nystrom PhD ..... D31-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Lisa Grossman PhD ..... D31-APA Council Representative	5 0 ..... 0 0	X						0	0	0
Dianne Fitzgerald-Verbonitz MA RN C ..... D31-CESPPA Representative	5 0 ..... 0 0	X						0	0	0
Jennifer Doran MA ..... D31-Student Representative	5 0 ..... 0 0	X						0	0	0
Kirk Schneider ..... D32-Past President	3 0 ..... 0 0	X		X				0	0	0





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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Ian Wickramasekera II ..... D32-Member at Large	1 0 ..... 0 0	X						0	0	0
Scott Churchill ..... D32-Council Representative	2 0 ..... 0 0	X						0	0	0
Brent Robbins ..... D32-Council Representative	2 0 ..... 0 0	X						0	0	0
Laura Lee McIntyre PhD ..... D33-Past President 8/15-7/16	1 0 ..... 0 0	X		X				0	0	0
Anna J Esbensen PhD ..... D33-Past President 8/16-7/17	1 0 ..... 0 0	X		X				0	0	0
Sharon J Krinsky-McHale ..... D33-President 8/16-7/17	5 0 ..... 0 0	X		X				0	0	0
Gael I Orsmond PhD ..... D33-President-Elect 8/16-7/17	1 0 ..... 0 0	X		X				0	0	0
VM Durand PhD ..... D33-President-elect 8/16-7/17	1 0 ..... 0 0	X		X				0	0	0
Cameron L Neece PhD ..... D33-Secretary-Treasurer 15-18	3 0 ..... 0 0	X		X				0	0	0
Grace W Gengoux PhD ..... D33-Member-at-large 8/16-7/18	1 0 ..... 0 0	X						0	0	0

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

(A)(B)(C)(D)(E)(F)

Name and Title	Average hours per week (list any hours for related organizations below dotted line)	Position (do not check more than one box, unless person is both an officer and a director/trustee)						Reportable compensation from the organization (W- 2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jason K Baker PhD ..... D33-Member-at-large 8/14-7/16	1 0 ..... 0 0	X						0	0	0
Jonathan A Weiss PhD ..... D33-Member-at-large 8/15-7/17	1 0 ..... 0 0	X						0	0	0
Eric M Butter PhD ..... D33-Council Rep 1/16-12/18	5 0 ..... 0 0	X						0	0	0
Elizabeth Will ..... D33-Student/APAGS Rep/Chair	1 0 ..... 0 0	X						0	0	0
Geovanna Rodriguez ..... D33-Student/APAGS Rep/Chair	1 0 ..... 0 0	X						0	0	0
Elise Amel ..... D34-Past-President 8/16 - 8/17	2 0 ..... 0 0	X		X				0	0	0
Mary Gregerson ..... D34-President 8/16 - 8/17	2 0 ..... 0 0	X		X				0	0	0
Beth Karlin ..... D34-President-Elect 8/16-8/17	2 0 ..... 0 0	X		X				0	0	0
John Fraser ..... D34-Secretary	1 0 ..... 0 0	X		X				0	0	0
Daniel Benkendorf ..... D34-Treasurer 8/16-8/19	1 0 ..... 0 0	X		X				0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Ezra Markowitz ..... D34-Member at Large	1 0 ..... 0 0	X						0	0	0
Nancy Piotrowski ..... D34-Member at Large/Mem Chair	2 0 ..... 0 0	X						0	0	0
Vincent Schutt ..... D34-Member at Large/Com Chair	2 0 ..... 0 0	X						0	0	0
Cameron Brick ..... D34-Awards Chair	1 0 ..... 0 0	X						0	0	0
Brianne Eby ..... D34-Grad Rep/Student Chair	1 0 ..... 0 0	X						0	0	0
Maureen McHugh ..... D35-Past-past pres Aug-Dec	4 0 ..... 0 0	X		X				0	0	0
Lynn Collins ..... D35-Past-Past Pres Jan-Aug	1 0 ..... 0 0	X		X				0	0	0
BraVada Garrett Akinsanya ..... D35-Past president Aug-Dec	6 0 ..... 0 0	X		X				0	0	0
Olivia Moorehead Slaughter ..... D35-President Aug-Dec	8 0 ..... 0 0	X		X				0	0	0
Margaret Signorella ..... D35-President-elect Aug-Dec	5 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Monique Clinton Sherrod ..... D35-Secretary Jan-Dec	5 0 ..... 0 0	X		X				0	0	0
Karol Dean ..... D35-Treasurer Aug-Dec	5 0 ..... 0 0	X		X				0	0	0
Debra Kawahara ..... D35-Council Representative	5 0 ..... 0 0	X						0	0	0
Natalie Porter ..... D35-Council Representative	5 0 ..... 0 0	X						0	0	0
Michelle Santiago ..... D35-Professional Rep	1 0 ..... 0 0	X						0	0	0
Cashuna Huddleston ..... D35-Section 1 President	3 0 ..... 0 0	X		X				0	0	0
Bianca Guzman ..... D35-Section 3 President	3 0 ..... 0 0	X		X				0	0	0
Jennifer Vencil ..... D35-Section 4 President	3 0 ..... 0 0	X		X				0	0	0
Khanh Dinh ..... D35-Section 5 President	3 0 ..... 0 0	X		X				0	0	0
Julia Green ..... D35-Section 6 President	3 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Stephanie Wong ..... D35-Student Representative	1 0 ..... 0 0	X						0	0	0
Kevin Ladd ..... D36-Past President	1 0 ..... 0 0	X		X				0	0	0
Michael Nielsen ..... D36-President/Past President	2 0 ..... 0 0	X		X				0	0	0
Doug Oman ..... D36-President Elect/President	5 0 ..... 0 0	X		X				0	0	0
Annette Mahoney ..... D36-President Elect	2 0 ..... 0 0	X		X				0	0	0
Amy Wachholtz ..... D36-Secretary	1 0 ..... 0 0	X		X				0	0	0
Gina Magyar-Russell ..... D36-Secretary outgoing	1 0 ..... 0 0	X		X				0	0	0
Jon Webb ..... D36-Treasurer	1 0 ..... 0 0	X		X				0	0	0
Sarah Schnitker ..... D36-Member-at-Large	1 0 ..... 0 0	X						0	0	0
David Wang ..... D36-Member-at-Large	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Andy Johnson ..... D36-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Innocent Okozi ..... D36-Member-at-Large outgoing	1 0 ..... 0 0	X						0	0	0
Thomas Plante ..... D36-Council Member	1 0 ..... 0 0	X						0	0	0
Kari O'Grady ..... D36-Council Member	1 0 ..... 0 0	X						0	0	0
William Hathaway ..... D36-Council Member outgoing	1 0 ..... 0 0	X						0	0	0
Carissa Dwiwardani ..... D36-Membership Chair	1 0 ..... 0 0	X						0	0	0
Daryl Van Tongeren ..... D36-Program Chair	1 0 ..... 0 0	X						0	0	0
Cindy Miller-Perrin PhD ..... D37-Past President	5 0 ..... 0 0	X		X				0	0	0
Anita Thomas ..... D37-President	5 0 ..... 0 0	X		X				0	0	0
Jennifer Noll ..... D37-Pres Child Maltreatment	5 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jen Kaminski ..... D37-President-Elect	5 0 ..... 0 0	X		X				0	0	0
Jenelle Shanley ..... D37-Secretary	5 0 ..... 0 0	X		X				0	0	0
Amy Green ..... D37-Treasurer	5 0 ..... 0 0	X		X				0	0	0
Joaquin Borrego ..... D37-Member-at-Large,Task Force	5 0 ..... 0 0	X						0	0	0
Sonia Rubens ..... D37-Member-at-Large, Comm/Tech	5 0 ..... 0 0	X						0	0	0
Christina Rodriquez ..... D37-Member-at-Large, Advocacy	5 0 ..... 0 0	X						0	0	0
Christy Olezeski ..... D37-Member-at-Large, Early Car	5 0 ..... 0 0	X						0	0	0
Mary Ann McCabe ..... D37-Representative to APA	5 0 ..... 0 0	X						0	0	0
Barbara Fiese ..... D37-Editor-Child/Family	5 0 ..... 0 0	X						0	0	0
Jonathan Martinez ..... D37-Editor of the Advocate	5 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Susan Limber ..... D37-Fellows Chair	5 0 ..... 0 0	X						0	0	0
Licci James ..... D37-Graduate Student Rep	5 0 ..... 0 0	X						0	0	0
Aaron Sawyer ..... D37-Membership Chair	5 0 ..... 0 0	X						0	0	0
Miriam Ofonedu ..... D37-Program Chair	5 0 ..... 0 0	X						0	0	0
Kim E Dixon ..... D38-Past-President	3 0 ..... 0 0	X		X				0	0	0
Alex Rothman ..... D38-President	3 0 ..... 0 0	X		X				0	0	0
Dawn K Wilson ..... D38-President-Elect	5 0 ..... 0 0	X		X				0	0	0
Mark A Lumley ..... D38-Treasurer	3 0 ..... 0 0	X		X				0	0	0
Robert D Kerns ..... D38-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Zeeshan Butt ..... D38-Member-at-Large	1 0 ..... 0 0	X						0	0	0



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Daniel Bruns ..... D38-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Elizabeth A Klonoff ..... D38-APA Council Representative	1 0 ..... 0 0	X						0	0	0
Ronald H Rozensky ..... D38-APA Council Representative	1 0 ..... 0 0	X						0	0	0
Frank Summers ..... D39-Past President	5 0 ..... 0 0	X		X				0	0	0
Marilyn Charles ..... D39-President	10 0 ..... 0 0	X		X				0	0	0
Dennis Debiak ..... D39-President-elect	5 0 ..... 0 0	X		X				0	0	0
Dana Charatan ..... D39-Secretary	10 0 ..... 0 0	X		X				0	0	0
Arlene Lu Steinberg ..... D39-Treasurer	10 0 ..... 0 0	X		X				0	0	0
Jaine Darwin ..... D39-Member at Large	1 0 ..... 0 0	X						0	0	0
Diana Diamond ..... D39-Member at Large	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jonathan Eger ..... D39-Member at Large	1 0 ..... 0 0	X						0	0	0
Colin Ennis ..... D39-Member at Large	1 0 ..... 0 0	X						0	0	0
Devon King ..... D39-Member at Large	1 0 ..... 0 0	X						0	0	0
Scott Pytluk ..... D39-Member at Large	1 0 ..... 0 0	X						0	0	0
Shara Sand ..... D39-Member at Large	1 0 ..... 0 0	X						0	0	0
Usha Tummala-Narra ..... D39-Member at Large	1 0 ..... 0 0	X						0	0	0
Kris Yi ..... D39-Member at Large	1 0 ..... 0 0	X						0	0	0
Norman Abeles ..... D39-APA Council Representative	1 0 ..... 0 0	X						0	0	0
Laura Barbanel ..... D39-APA Council Representative	1 0 ..... 0 0	X						0	0	0
Mary Beth Cresci ..... D39-APA Council Representative	1 0 ..... 0 0	X						0	0	0

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

(A)

(B)

(C)

(D)

(E)

(F)

Name and Title	Average hours per week (list any hours for related organizations below dotted line)	Position (do not check more than one box, unless person is both an officer and a director/trustee)						Reportable compensation from the organization (W- 2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
David Downing ..... D39-APA Council Representative	1 0 ..... 0 0	X						0	0	0
Marsha McCary ..... D39-APA Council Representative	1 0 ..... 0 0	X						0	0	0
Steven Reisner ..... D39-APA Council Representative	1 0 ..... 0 0	X						0	0	0
Albert Brok ..... D39-Section 1 representative	1 0 ..... 0 0	X						0	0	0
Marilyn Metzl ..... D39-Section 3 representative	1 0 ..... 0 0	X						0	0	0
Joseph Schaller ..... D39-Section 4 representative	1 0 ..... 0 0	X						0	0	0
Michael Jones ..... D39-Section 5 representative	1 0 ..... 0 0	X						0	0	0
Maurine Kelly ..... D39-Section 8 representative	1 0 ..... 0 0	X						0	0	0
Alice Shaw ..... D39-Section 9 representative	1 0 ..... 0 0	X						0	0	0
Neil Pliskin ..... D40-Past President 1/16 - 8/16	6 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jennifer Vasterling ..... 2040-Past President 9/16-12/16	4 0 ..... 0 0	X		X				0	0	0
Mark Bondi ..... 2040-President 9/16 - 12/16	3 0 ..... 0 0	X		X				0	0	0
Doug Johnson-Greene ..... 2040-President Elect 9/16-12/16	2 0 ..... 0 0	X		X				0	0	0
Amy Jak ..... 2040-Secretary	3 0 ..... 0 0	X		X				0	0	0
Kevin Duff ..... 2040-Treasurer	3 0 ..... 0 0	X		X				0	0	0
Joanne Festa ..... 2040-Member at Large	2 0 ..... 0 0	X						0	0	0
Cynthia Kubu ..... 2040-Member at Large 1/16-8/16	2 0 ..... 0 0	X						0	0	0
April Thames ..... 2040-Member at Large	1 0 ..... 0 0	X						0	0	0
Teresea Deer ..... 2040-Member at Large 9/16-12/16	2 0 ..... 0 0	X						0	0	0
Celiane Rey-Casserly ..... 2040-Council Rep 1/16-8/16	2 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Rodney Vanderploeg ..... D40-Council Representative	2 0 ..... 0 0	X						0	0	0
Kenneth Adams ..... D40-Council Representative	1 0 ..... 0 0	X						0	0	0
Heather Belanger ..... D40-Council Representative	2 0 ..... 0 0	X						0	0	0
Robb Mapou ..... D40-Council Rep 1/16-8/16	1 0 ..... 0 0	X						0	0	0
Cheryl Silver ..... D40-Council Rep 9/16-12/16	2 0 ..... 0 0	X						0	0	0
Patricia Zapf PhD ..... D41-Past President 8/15-7/16	2 0 ..... 0 0	X		X				0	0	0
Jennifer Woolard ..... D41-Past President 8/16-7/17	2 0 ..... 0 0	X		X				0	0	0
David S DeMatteo PhD ..... D41-President 8/16-7/17	2 0 ..... 0 0	X		X				0	0	0
Eve M Brank PhD ..... D41-President-Elect 8/16-7/17	5 0 ..... 0 0	X		X				0	0	0
Jennifer L Groscup PhD ..... D41-Secretary	2 0 ..... 0 0	X		X				0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
Vanessa A Edkins PhD ..... D41-Treasurer 8/16-7/21	5 0 ..... 0 0	X		X				0	0	0	
Jennifer Hunt ..... D41-Member-at-Large	1 0 ..... 0 0	X						0	0	0	
Gianni Pirelli PhD ..... D41-Member-at-Large	1 0 ..... 0 0	X						0	0	0	
Daniel A Krauss PhD ..... D41-Member-at-Large 8/13-7/16	1 0 ..... 0 0	X						0	0	0	
Tess M Neal PhD ..... D41-Member-at-Large 8/16-7/19	1 0 ..... 0 0	X						0	0	0	
Joel D Lieberman PhD ..... D41-Council Representative	1 0 ..... 0 0	X						0	0	0	
Brian L Cutler PhD ..... D41-Council Representative	1 0 ..... 0 0	X						0	0	0	
JT Gnisso ..... D41-Council Representative	1 0 ..... 0 0	X						0	0	0	
Megan Galloway ..... D41-Student Chair 8/15-8/16	1 0 ..... 0 0	X						0	0	0	
Emily Haney-Caron ..... D41-Student Chair 8/16-8/17	1 0 ..... 0 0	X						0	0	0	

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
June Ching ..... D42-Past President	10 0 ..... 0 0	X		X				0	0	0
Lori Thomas ..... D42-President	15 0 ..... 0 0	X		X				0	0	0
Norman Abeles ..... D42-President Elect	10 0 ..... 0 0	X		X				0	0	0
Michael Schwartz ..... D42-Secretary	10 0 ..... 0 0	X		X				0	0	0
Gerald Koocher ..... D42-Treasurer	10 0 ..... 0 0	X		X				0	0	0
Lindsey Buckman ..... D42-Member at Large	3 0 ..... 0 0	X						0	0	0
Elaine Ducharme ..... D42-Member at Large	3 0 ..... 0 0	X						0	0	0
Keely Kolmes ..... D42-Member at Large	3 0 ..... 0 0	X						0	0	0
Stephanie Mihalas ..... D42-Member at Large	3 0 ..... 0 0	X						0	0	0
Judith Patterson ..... D42-Member at Large	3 0 ..... 0 0	X						0	0	0





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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Ruth Morehouse ..... D43-President	5 0 ..... 0 0	X		X				0	0	0
Susan Regas ..... D43-President-Elect	1 0 ..... 0 0	X		X				0	0	0
Caroline Clauss-Ehlers ..... D43-Secretary	1 0 ..... 0 0	X		X				0	0	0
Amanda Edwards Stewart ..... D43-Treasurer	1 0 ..... 0 0	X		X				0	0	0
Shelley Riggs ..... D43-VP for Education	1 0 ..... 0 0	X		X				0	0	0
Corinne Datchi ..... D43-VP for Practice	1 0 ..... 0 0	X		X				0	0	0
Martha Hernandez ..... D43-VP Public Int/Diversity	1 0 ..... 0 0	X		X				0	0	0
Brian Doss ..... D43-VP for Science	1 0 ..... 0 0	X		X				0	0	0
Alan Omoto PhD ..... D44-Past-President	10 0 ..... 0 0	X		X				0	0	0
Kimberly Balsam PhD ..... D44-President	10 0 ..... 0 0	X		X				0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
David Pantalone PhD ..... D44-President-Elect	10 0 ..... 0 0	X		X				0	0	0
Antionette Kavanaugh PhD ..... D44-Secretary	5 0 ..... 0 0	X		X				0	0	0
Erin Deneke PhD ..... D44-Treasurer	5 0 ..... 0 0	X		X				0	0	0
Melissa Grey PhD ..... D44-1st year Member-at-Large	5 0 ..... 0 0	X						0	0	0
Laura Alie PhD ..... D44-3rd year Member-at-Large	5 0 ..... 0 0	X						0	0	0
Franco Dispenza ..... D44-2nd year Member-at-Large	5 0 ..... 0 0	X						0	0	0
Arlene Noriega PhD ..... D44-Council Representative	5 0 ..... 0 0	X						0	0	0
Michael Hendricks PhD ..... D44-Council Representative	5 0 ..... 0 0	X						0	0	0
Terry Gock PhD ..... D44-Council Representative	5 0 ..... 0 0	X						0	0	0
Stanley Sue ..... D45-Past President	5 0 ..... 0 0	X		X				0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jacque Gray ..... D45-President	5 0 ..... 0 0	X		X				0	0	0
Enedina Vazquez ..... D45-President-Elect	5 0 ..... 0 0	X		X				0	0	0
Barbara Thelamour ..... D45-Secretary	10 0 ..... 0 0	X		X				0	0	0
Joe Horvat ..... D45-Treasurer	10 0 ..... 0 0	X		X				0	0	0
Alvin Alvarez ..... D45-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Bertha Holliday ..... D45-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Kira Banks ..... D45-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Carlos Santos ..... D45-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Angela Ferguson ..... D45-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Germine Awad ..... D45-Member-at-Large	5 0 ..... 0 0	X						0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Casey McDougall ..... D45-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Jean Lau Chin ..... D45-Council Representative	5 0 ..... 0 0	X						0	0	0
Luis Vazquez ..... D45-Council Representative	5 0 ..... 0 0	X						0	0	0
Teresa LaFromboise ..... D45-Fellows Chair	5 0 ..... 0 0	X						0	0	0
Desa Daniel ..... D45-Student Representatiave	5 0 ..... 0 0	X						0	0	0
Jerry Lynn Hogg ..... D46-Past President	5 0 ..... 0 0	X		X				0	0	0
Mary Gregerson ..... D46-President	10 0 ..... 0 0	X		X				0	0	0
Joanne Broder Sumerson ..... D46-President Elect	5 0 ..... 0 0	X		X				0	0	0
Sean Thoennes ..... D46-Secretary	5 0 ..... 0 0	X		X				0	0	0
Karla Hamlen Mansour ..... D46-Treasurer	5 0 ..... 0 0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors		
(C)	(D)	(E)

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Pauline Wallin ..... D46-Member-at-Large	5 0 ..... 0 0	X						0	0	0
V Krishna Kumar ..... D46-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Greg Zerovnik ..... D46-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Rochelle Balter ..... D46-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Frank Farley ..... D46-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Irene Deitch ..... D46-Member-at-Large	5 0 ..... 0 0	X						0	0	0
Elizabeth Carl ..... D46-Council Representative	1 0 ..... 0 0	X						0	0	0
John Heil ..... D47-Past President	4 0 ..... 0 0	X		X				0	0	0
Anthony Kontos ..... D47-President/Past President	4 0 ..... 0 0	X		X				0	0	0
Vincent Granito ..... D47-President-Elect/President	4 0 ..... 0 0	X		X				0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Courtney Albinson	4 0									
D47-Member-at-Large/Pres-Elect	0 0	X		X				0	0	0
Cristina Fink	3 0									
D47-Secretary-Treasurer	0 0	X		X				0	0	0
Jamie Shapiro	4 0									
D47-Secretary-Treasurer	0 0	X		X				0	0	0
Jessica Bartley	2 0									
D47-Junr/Senr Member-at-Large	0 0	X						0	0	0
Mitch Abrams	2 0									
D47-Junior Member-at-Large	0 0	X						0	0	0
Shane Murphy	8 0									
D47-Council Representative	0 0	X						0	0	0
Julie Vieselmeyer	5 0									
D47-Senior Student Rep	0 0	X						0	0	0
Ryan Sappington	3 0									
D47-Junior Student Rep	0 0	X						0	0	0
Rebekah Phillips DeZalia PhD	2 0									
D48-Past President 16	0 0	X		X				0	0	0
Frank Farley	2 0									
D48-President 16	0 0	X		X				0	0	0



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Dennis M Kivlighan PhD ..... 2014-2019-Past President 1/16-12/16	3 0 ..... 0 0	X		X				0	0	0
Craig D Parks PhD ..... 2014-2019-President 1/16-12/16	10 0 ..... 0 0	X		X				0	0	0
Robert L Gleave PhD ..... 2014-2019-President-Elect 1/16-12/16	5 0 ..... 0 0	X		X				0	0	0
Jennifer Alonso PhD ..... 2014-2019-Secretary 1/14-12/16	2 0 ..... 0 0	X		X				0	0	0
Joseph R Miles PhD ..... 2014-2019-Secretary-Elect 7/16-12/16	2 0 ..... 0 0	X		X				0	0	0
Amy G Nitza PhD ..... 2014-2019-Treasurer 1/15-12/17	3 0 ..... 0 0	X		X				0	0	0
Michele D Ribeiro EdD ..... 2014-2019-Member-at-Large 1/16-12/18	2 0 ..... 0 0	X						0	0	0
Joseph P Powers ..... 2014-2019-Member-at-Large 1/14-12/16	2 0 ..... 0 0	X						0	0	0
Jill D Paquin PhD ..... 2014-2019-Member-at-Large 1/15-12/17	2 0 ..... 0 0	X						0	0	0
Misha Bogomaz ..... 2014-2019-Member-at-Large	2 0 ..... 0 0	X						0	0	0



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Sally H Barlow PhD ..... D49-Council Rep 1/14-12/19	2 0 ..... 0 0	X						0	0	0
Sherry McKee PhD ..... D50-Past President	3 0 ..... 0 0	X		X				0	0	0
Katie Witkiewitz PhD ..... D50-President	10 0 ..... 0 0	X		X				0	0	0
Bruce Liese PhD ..... D50-President-Elect	5 0 ..... 0 0	X		X				0	0	0
Brandon Bergman PhD ..... D50-Secretary	2 0 ..... 0 0	X		X				0	0	0
Ty Schepis PhD ..... D50-Treasurer	3 0 ..... 0 0	X		X				0	0	0
Paul Stasiewicz PhD ..... D50-Member-at-Large Practice	1 0 ..... 0 0	X						0	0	0
Joel Grube PhD ..... D50-Member-at-Large Public Int	1 0 ..... 0 0	X						0	0	0
Jennifer Read PhD ..... D50-Member-at-Large Science	1 0 ..... 0 0	X						0	0	0
Linda Sobell PhD ..... D50-Council Rep Science	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
James Bray PhD ..... D50-Council Rep Practice	1 0 ..... 0 0	X						0	0	0
David Shepard ..... D51-Past-President	5 0 ..... 0 0	X		X				0	0	0
David Whitcomb ..... D51-President	2 0 ..... 0 0	X		X				0	0	0
Holly Sweet ..... D51-President- Elect	10 0 ..... 0 0	X		X				0	0	0
Edward Adams ..... D51-President-Elect Elect	2 0 ..... 0 0	X		X				0	0	0
Ryan McDermott ..... D51-Secretary	2 0 ..... 0 0	X		X				0	0	0
Randa Remer ..... D51-Treasurer	2 0 ..... 0 0	X		X				0	0	0
Gary Brooks ..... D51-MAL at Large	1 0 ..... 0 0	X						0	0	0
Michael Parent ..... D51-MAL ECP	1 0 ..... 0 0	X						0	0	0
Bryana French ..... D51-MAL Racial/Ethnic Minority	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors		(C)	(D)
1. Name of the officer, director, trustee, key employee, highest compensated employee, or independent contractor	2. Organization's EIN	3. Compensation for services rendered to the organization	4. Compensation for services rendered to the organization

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Will Elder ..... D51-MAL Sexual Minorities	1 0 ..... 0 0	X						0	0	0
Katherine Richmond ..... D51-MAL Women	1 0 ..... 0 0	X						0	0	0
Ron Levant ..... D51-Council Representative	1 0 ..... 0 0	X						0	0	0
Jean Chin ..... D52-Past President	3 0 ..... 0 0	X		X				0	0	0
Craig Shealy ..... D52-President	6 0 ..... 0 0	X		X				0	0	0
Merry Bullock ..... D52-President Elect	3 0 ..... 0 0	X		X				0	0	0
Sayaka Machizawa ..... D52-Secretary	6 0 ..... 0 0	X		X				0	0	0
Martha Ann Carey ..... D52-Treasurer	6 0 ..... 0 0	X		X				0	0	0
Stefania Aegisdottir ..... D52-Member at Large	2 0 ..... 0 0	X						0	0	0
Mercedes McCormick ..... D52-Member at Large	2 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LeAnn DeHoff ..... D52-Member at Large	2 0 ..... 0 0	X						0	0	0
Ani Kalayjian ..... D52-Member at Large	2 0 ..... 0 0	X						0	0	0
Neal Rubin ..... D52-Council Rep	2 0 ..... 0 0	X						0	0	0
Katelyn Lehman ..... D52-Student Rep	2 0 ..... 0 0	X						0	0	0
John Piacentini ..... D53-Past President	4 0 ..... 0 0	X		X				0	0	0
Eric Youngstrom ..... D53-President	6 0 ..... 0 0	X		X				0	0	0
Mitchell Prinstein ..... D53-President Elect	4 0 ..... 0 0	X		X				0	0	0
Jonathan Comer ..... D53-Secretary	4 0 ..... 0 0	X		X				0	0	0
Richard Abidin ..... D53-Treasurer	10 0 ..... 0 0	X		X				0	0	0
Adam Lewin ..... D53-Member at Large	4 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Yo Jackson ..... D53-Member at Large	4 0 ..... 0 0	X						0	0	0
Amanda Jenson-Doss ..... D53-Member at Large	4 0 ..... 0 0	X						0	0	0
Mary Fristad ..... D53-APA Council Representative	4 0 ..... 0 0	X						0	0	0
Gerald Koocher ..... D53-APA Council Representative	4 0 ..... 0 0	X						0	0	0
Elissa Jelalian PhD ..... D54-Past President	5 0 ..... 0 0	X		X				0	0	0
Sharron Berry PhD ABPP ..... D54-President	5 0 ..... 0 0	X		X				0	0	0
Celia M Lescano PhD ..... D54-President Elect	5 0 ..... 0 0	X		X				0	0	0
Avani Modi PhD ..... D54-Secretary	5 0 ..... 0 0	X		X				0	0	0
Thomas David Elkin PhD ..... D54-Treasurer	5 0 ..... 0 0	X		X				0	0	0
Anna Maria Patino-Fernandez PhD ..... D54-Member At Large	5 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
David Janicke PhD ..... D54-Member At Large	5 0 ..... 0 0	X						0	0	0
Jennifer V Schurman PhD ..... D54-Member At Large	5 0 ..... 0 0	X						0	0	0
Wendy Ward PhD ABPP ..... D54-Member At Large	5 0 ..... 0 0	X						0	0	0
Michael C Roberts PhD ABPP ..... D54-APA Council Representative	5 0 ..... 0 0	X						0	0	0
Michael Tilus PsyD ..... D55-Past President	1 0 ..... 0 0	X		X				0	0	0
Neal Morris EdD ..... D55-President	2 0 ..... 0 0	X		X				0	0	0
Sean Evers PhD ..... D55-President-Elect	1 0 ..... 0 0	X		X				0	0	0
Morgan Sammons PhD ..... D55-Secretary	2 0 ..... 0 0	X		X				0	0	0
Kathleen M McNamara PhD ..... D55-Treasurer	1 0 ..... 0 0	X		X				0	0	0
George Kapalka PhD ..... D55-Member-at-Large	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Alan Lincoln PhD ..... D55-Member-at-Large	1 0 ..... 0 0	X						0	0	0
Anthony Tranchita PsyD ..... D55-Member-at Large	1 0 ..... 0 0	X						0	0	0
Robert McGrath PhD ..... D55-Representative APA Council	1 0 ..... 0 0	X						0	0	0
Yolanda Perkins ..... D55-Student/APAGS Rep	1 0 ..... 0 0	X						0	0	0
Beth Rom-Rymer ..... D56-Past-President	5 0 ..... 0 0	X		X				0	0	0
Joan Cook ..... D56-President	5 0 ..... 0 0	X		X				0	0	0
Elizabeth Carll ..... D56-President-Elect	5 0 ..... 0 0	X		X				0	0	0
Amber Douglas ..... D56-Secretary	5 0 ..... 0 0	X		X				0	0	0
Lisa Rocchio ..... D56-Treasurer	5 0 ..... 0 0	X		X				0	0	0
Heather Littleton ..... D56-Member at Large	5 0 ..... 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Robyn Gobin ..... D56-Member at Large	5 0 ..... 0 0	X						0	0	0
Charles Figley ..... D56-Council Rep	5 0 ..... 0 0	X						0	0	0
Steven Gold ..... D56-Council Rep	5 0 ..... 0 0	X						0	0	0
Constance Dalenberg ..... D56-Award/Science Committee	5 0 ..... 0 0	X						0	0	0
Terry Keane ..... D56-Capital Camp Task Force	5 0 ..... 0 0	X						0	0	0
Christine Courtois ..... D56-Complex Trauma Committee	5 0 ..... 0 0	X						0	0	0
Vanessa Simiola ..... D56-Convention Prog Committee	5 0 ..... 0 0	X						0	0	0
Jessica Punzo ..... D56-Convention Prog Committee	5 0 ..... 0 0	X						0	0	0
Tyson Bailey ..... D56-ECP Rep	5 0 ..... 0 0	X						0	0	0
Laurie Anne Pearlman ..... D56-Fellows Committee	5 0 ..... 0 0	X						0	0	0



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Kathleen Kendall-Tackett ..... D56-Journal Editor	5 0 ..... 0 0	X						0	0	0
Rose Barlow ..... D56-Listserv Manager	5 0 ..... 0 0	X						0	0	0
Brian Reuther ..... D56-Newsletter Editor	5 0 ..... 0 0	X						0	0	0
Diane Elmore ..... D56-Policy Committee	5 0 ..... 0 0	X						0	0	0
Bethany Brand ..... D56-Practice Committee	5 0 ..... 0 0	X						0	0	0
Denise Sloan ..... D56-Publications Committee	5 0 ..... 0 0	X						0	0	0
Christine Valdez ..... D56-Student Rep	5 0 ..... 0 0	X						0	0	0
Theodore Bosack ..... D02-Executive Director	20 0 ..... 0 0			X				25,000	0	0

<b>SCHEDULE A</b> (Form 990 or 990-EZ)	<b>Public Charity Status and Public Support</b> 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 <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .	OMB No 1545-0047
	<b>2016</b> <b>Open to Public Inspection</b>	
Department of the Treasury Internal Revenue Service <b>Name of the organization</b> AMERICAN PSYCHOLOGICAL ASSOCIATION INC GROUP RETURN	<b>Employer identification number</b> 54-1572590	

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box )

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II )
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II )
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university \_\_\_\_\_
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III )
- 11 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
  - a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
  - b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
  - c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
  - d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
  - e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
  - f Enter the number of supported organizations \_\_\_\_\_
  - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	2,231,798	2,725,394	2,201,603	2,244,808	2,395,478	11,799,081
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	2,231,798	2,725,394	2,201,603	2,244,808	2,395,478	11,799,081
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)						0
6 Public support. Subtract line 5 from line 4						11,799,081

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
7 Amounts from line 4	2,231,798	2,725,394	2,201,603	2,244,808	2,395,478	11,799,081
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,122,257	2,326,619	2,446,044	2,514,311	3,202,543	12,611,774
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.)	851,880	984,195	815,107	664,927	523,339	3,839,448
11 Total support. Add lines 7 through 10						28,250,303
12 Gross receipts from related activities, etc. (see instructions)					12	5,941,494

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	41.766 %
15 Public support percentage for 2015 Schedule A, Part II, line 14	15	43.706 %

16a 33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☒

b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐

17a 10%-facts-and-circumstances test—2016. 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—2015. 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 ▶ ☐

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

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6</b> <b>Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8</b> <b>Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13</b> <b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						

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

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	
<b>16</b> Public support percentage from 2015 Schedule A, Part III, line 15	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2016</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	
<b>18</b> Investment income percentage from <b>2015</b> Schedule A, Part III, line 17	<b>18</b>	

**19a** **33 1/3% support tests—2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

**b** **33 1/3% support tests—2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>	<b>1</b>	
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	<b>2</b>	
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	<b>3a</b>	
<b>b</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)? <i>If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.</i>	<b>3b</b>	
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.</i>	<b>3c</b>	
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	<b>4a</b>	
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>	<b>4b</b>	
<b>c</b> 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)? <i>If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>	<b>4c</b>	
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b>, 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).</i>	<b>5a</b>	
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	<b>5b</b>	
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	<b>5c</b>	
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>6</b>	
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	<b>7</b>	
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	<b>8</b>	
<b>9a</b> 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))? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>9a</b>	
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>9b</b>	
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>9c</b>	
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	<b>10a</b>	
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	<b>10b</b>	

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>1</b>		No
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		
<b>2</b>		No

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>1</b>		No
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>2</b>		No
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>3</b>		No

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
<b>2</b> Activities Test <b>Answer (a) and (b) below.</b>		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
<b>2a</b>		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations <b>Answer (a) and (b) below.</b>		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
<b>3a</b>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>3b</b>		

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

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

**Section A - Adjusted Net Income**

	(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b> 0	
<b>2</b> Recoveries of prior-year distributions	<b>2</b> 0	
<b>3</b> Other gross income (see instructions)	<b>3</b> 0	
<b>4</b> Add lines 1 through 3	<b>4</b> 0	
<b>5</b> Depreciation and depletion	<b>5</b> 0	
<b>6</b> Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<b>6</b> 0	
<b>7</b> Other expenses (see instructions)	<b>7</b> 0	
<b>8 Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b> 0	

**Section B - Minimum Asset Amount**

	(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	<b>1</b>	
<b>a</b> Average monthly value of securities	<b>1a</b> 0	
<b>b</b> Average monthly cash balances	<b>1b</b> 0	
<b>c</b> Fair market value of other non-exempt-use assets	<b>1c</b> 0	
<b>d Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b> 0	
<b>e Discount</b> claimed for blockage or other factors (explain in detail in Part VI) 0		
<b>2</b> Acquisition indebtedness applicable to non-exempt use assets	<b>2</b> 0	
<b>3</b> Subtract line 2 from line 1d	<b>3</b> 0	
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b> 0	
<b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b> 0	
<b>6</b> Multiply line 5 by .035	<b>6</b> 0	
<b>7</b> Recoveries of prior-year distributions	<b>7</b> 0	
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b> 0	

**Section C - Distributable Amount**

		Current Year
<b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>	0
<b>2</b> Enter 85% of line 1	<b>2</b>	0
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>	0
<b>4</b> Enter greater of line 2 or line 3	<b>4</b>	0
<b>5</b> Income tax imposed in prior year	<b>5</b>	0
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>	0
<b>7</b> <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	0
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	0
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	0
4 Amounts paid to acquire exempt-use assets	0
5 Qualified set-aside amounts (prior IRS approval required)	0
6 Other distributions (describe in Part VI) See instructions	0
7 Total annual distributions. Add lines 1 through 6	0
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	0
9 Distributable amount for 2016 from Section C, line 6	0
10 Line 8 amount divided by Line 9 amount	0 %

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			0
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required--see instructions)		0	
3 Excess distributions carryover, if any, to 2016			
a			
b			
c From 2013. . . . . 0			
d From 2014. . . . . 0			
e From 2015. . . . . 0			
f Total of lines 3a through e	0		
g Applied to underdistributions of prior years		0	
h Applied to 2016 distributable amount			0
i Carryover from 2011 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f	0		
4 Distributions for 2016 from Section D, line 7 \$ 0			
a Applied to underdistributions of prior years		0	
b Applied to 2016 distributable amount			
c Remainder Subtract lines 4a and 4b from 4	0		
5 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)		0	
6 Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			0
7 Excess distributions carryover to 2017. Add lines 3j and 4c	0		
8 Breakdown of line 7			
a			
b Excess from 2013. . . . . 0			
c Excess from 2014. . . . . 0			
d Excess from 2015. . . . . 0			
e Excess from 2016. . . . . 0			



**Part VI**    **Supplemental Information.**

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

<b>Facts And Circumstances Test</b>

**SCHEDULE C**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

**2016**

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
- Section 527 organizations Complete Part I-A only

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

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

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

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

Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION INC GROUP RETURN	Employer identification number 54-1572590
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

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

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

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

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

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

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

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)														
<b>d</b> Other exempt purpose expenditures	4,006,075													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)	4,006,075													
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns	350,304													
<table><thead><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></tbody></table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000													
Over \$17,000,000	\$1,000,000													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)	87,576													
<b>h</b> Subtract line 1g from line 1a If zero or less, enter -0-														
<b>i</b> Subtract line 1f from line 1c If zero or less, enter -0-														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
<b>2a</b> Lobbying nontaxable amount	424,985	428,895	361,945	350,304	1,566,129
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					2,349,194
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount	106,246	107,224	90,486	87,576	391,532
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					587,298
<b>f</b> Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

		(a)		(b)
		Yes	No	Amount
<b>1</b>	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			
<b>a</b>	Volunteers?			
<b>b</b>	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b>	Media advertisements?			
<b>d</b>	Mailings to members, legislators, or the public?			
<b>e</b>	Publications, or published or broadcast statements?			
<b>f</b>	Grants to other organizations for lobbying purposes?			
<b>g</b>	Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b>	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b>	Other activities?			
<b>j</b>	Total. Add lines 1c through 1i			
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b>	If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b>	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

**Part IV Supplemental Information**

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

Return Reference	Explanation
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efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493319081297	
<div>SCHEDULE D (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div>		<div>Supplemental Financial Statements</div> <div>► 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.</div> <div>Information about Schedule D (Form 990) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>.</div>			<div>OMB No 1545-0047</div> <div>2016</div> <div>Open to Public Inspection</div>
<div>Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION INC GROUP RETURN</div>				<div>Employer identification number 54-1572590</div>	
<div>Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.</div> <div>Complete if the organization answered "Yes" on Form 990, Part IV, line 6.</div>					
		(a) Donor advised funds		(b) Funds and other accounts	
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
<div>Part II Conservation Easements.</div> <div>Complete if the organization answered "Yes" on Form 990, Part IV, line 7.</div>					
1 Purpose(s) of conservation easements held by the organization (check all that apply) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or education) <input type="checkbox"/> Preservation of an historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space</div>					
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year					
				Held at the End of the Year	
a Total number of conservation easements				2a	
b Total acreage restricted by conservation easements				2b	
c Number of conservation easements on a certified historic structure included in (a)				2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register				2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►					
4 Number of states where property subject to conservation easement is located ►					
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►					
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$					
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements					
<div>Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.</div> <div>Complete if the organization answered "Yes" on Form 990, Part IV, line 8.</div>					
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items					
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items					
(i) Revenue included on Form 990, Part VIII, line 1				► \$	
(ii) Assets included in Form 990, Part X				► \$	
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items					
a Revenue included on Form 990, Part VIII, line 1				► \$	
b Assets included in Form 990, Part X				► \$	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					
			Cat No 52283D Schedule D (Form 990) 2016		

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

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

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

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

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

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

☐ Yes

☐ No

b

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

☐

Part V

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

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	3,114,796	2,952,855	2,516,448	2,116,429	
b Contributions	200,000	200,000	400,000		
c Net investment earnings, gains, and losses	160,144	-38,059	69,536	400,019	
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	16,507		33,129		
g End of year balance	3,458,433	3,114,796	2,952,855	2,516,448	

2

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

a

Board designated or quasi-endowment ▶ 100 000 %

b

Permanent endowment ▶

c

Temporarily restricted endowment ▶

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

3a

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

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

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

3b

Yes

No

4

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

Part VI

Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				

Schedule D (Form 990) 2016

Part VII

Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b.  
See Form 990, Part X, line 12.

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

Part VIII

Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c.  
See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 )	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.  
See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	0

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	

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

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	

**Part XIII Supplemental Information**

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

Return Reference	Explanation
See Additional Data Table	



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

Return Reference	Explanation

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 54-1572590  
**Name:** AMERICAN PSYCHOLOGICAL ASSOCIATION INC  
GROUP RETURN

**Supplemental Information**

Return Reference	Explanation
SCH D, PART V, LINE 4	DIVISION 53 USES THESE FUNDS TO SUPPORT STUDENT DISSERTATION RESEARCH

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.  
▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization  
AMERICAN PSYCHOLOGICAL ASSOCIATION INC  
GROUP RETURN

Employer identification number  
54-1572590

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

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

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . 6

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

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) TARGETED RESEARCH GRANT	2	40,000			
(2) ROUTH GRANT	1	5,000			
(3) ABIDIN RESEARCH GRANT	1	20,000			
(4) RESEARCH GRANT FOR DIVERSITY ISSUES	1	2,000			
(4)					
(5)					
(6)					
(7)					

**Part IV Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
DIVISION 15,	Early Career Grant awardees are required to complete an annual report listing the major accomplishments achieved (key findings, publications, awards, etc ) as a result of the grant. The report must include the objectives of the project, the activities undertaken to accomplish the stated goals and objectives, the accomplishments and outcomes attributable to the funding, a listing of the final expenditures of the funds and how they were utilized to achieve the objectives, and any future plans that could be attributed to the funding received from the early career grant.
DIVISION 16,	Progress from development of the internship site to accreditation is monitored for all the GSPI grants with a report each at mid-winter and annual meetings of the executive board.
DIVISION 26,	The Cummings Center foR the History of Psychology supplies an annual report of the Center's activities. The APA provided a summary of the Museum Day Live! event and the resulting historical display.
DIVISION 29,	GRANTS OFFERED ARE UNRESTRICTED GRANTS. CALLS FOR GRANT PROPOSALS ARE DISTRIBUTED ANNUALLY, OUTLINING ELIGIBILITY, GOALS, SUBMISSION REQUIREMENTS, AND EVALUATION CRITERIA. DISTRIBUTION IS VIA PROFESSIONAL LISTSERVS, ON THE ASSOCIATION WEBSITE, AND IN THE OFFICIAL PUBLICATION. GRANT APPLICATIONS ARE BLIND-REVIEWED, AND GRANT RECIPIENTS ARE REQUIRED TO SUPPLY A FINAL REPORT AT THE RESEARCH'S CONCLUSION.
DIVISION 40,	At the end of the grant period, the recipient organization must provide a report that details all the activities that took place in the context of this grant, along with a detailed account of expenditures and return of any unused funds. Copies of conference presentations and journal publications of research that was conducted with grant support must also be provided at that time. The overall purpose of the grant is to (a) support early career neuropsychologists in their research and (b) to socialize them into the division by having them serve on divisional committees.
DIVISION 53,	THE APPLICATION IS REVIEWED BASED ON STANDARDS ESTABLISHED BY THE SOCIETY. THE APPLICATION PROCESS REQUIRES THE APPLICANT TO SPECIFY HOW THE FUNDS WILL BE USED. AWARDEES ARE REQUIRED TO REPORT ON THE USE OF FUNDS WHICH IS REVIEWED BY THE SOCIETY ACCORDING TO ITS ESTABLISHED STANDARDS. THE DIVISION SPECIFIES THAT FUNDS MAY NOT BE USED FOR INDIRECT COSTS. THE AWARDEE MUST SUBMIT A BUDGET OF ACTUAL EXPENSES.
DIVISION 54,	Grant awardees provide detailed annual progress reports for board review to monitor activities and ensure appropriate use of funds.

Additional Data

Software ID:  
Software Version:  
EIN: 54-1572590  
Name: AMERICAN PSYCHOLOGICAL ASSOCIATION INC  
GROUP RETURN

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AUBURN UNIVERSITY 127 INGRAM HALL AUBURN, AL 36849	63-6000724	501(C)(3)	6,000				EARLY CAREER AWARD
CONNECTICUT COLLEGE 270 MOHEGAN AVE NEW LONDON, CT 06320	06-0646587	501(C)(3)	6,000				EARLY CAREER AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DUQUESNE UNIVERSITY 600 FORBES AVE PITTSBURGH, PA 15282	25-1035663	501(C)(3)	5,650				DEVELOPMENT OF INTERNSHIP SITE
EMORY UNIVERSITY 1599 CLIFTON RD NE ATLANTA, GA 30322	58-0566256	501(C)(3)	15,000				RESEARCH GRANT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF CALIFORNIA 9500 GILMAN DRIVE LA JOLLA, CA 92093	95-6006144	501(C)(3)	15,000				Research Grant
UNIVERSITY OF KANSAS 1000 SUNNYSIDE AVE LAWRENCE, KS 66045	48-6029925	501(C)(3)	15,000				SUPPORT TRAINING AND EDUCATION

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2016**

**Open to Public Inspection**

Name of the organization

AMERICAN PSYCHOLOGICAL ASSOCIATION INC  
GROUP RETURN

Employer identification number

54-1572590

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART I, LINE 6	THIS NUMBER REPRESENTS THE ELECTED MEMBERS OF THE GOVERNING BODIES OF THE VARIOUS DIVISIONS THIS NUMBER IS NOT REPRESENTATIVE OF ALL VOLUNTEERS AS IT DOES NOT INCLUDE VOLUNTEERS WHO MAY HAVE SERVED THE DIVISIONS IN OTHER WAYS



**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART III, LINE 1	DIVISIONS OF THE APA DIVISIONS SUPPORT AND ENCOURAGE THE EDUCATION, SCIENTIFIC STUDY, PROMOTION OF HUMAN WELFARE AND INFORMATION DISSEMINATION RELATED TO VARIED DISCIPLINES OF PSYCHOLOGY, AND THE ADVANCEMENT OF THOSE PSYCHOLOGY DISCIPLINES IN SERVING THE PUBLIC

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART III, LINE 4D	OTHER PROGRAM SERVICES INCLUDE VARIOUS TASK FORCES AND COMMITTEES WORKING ON PROGRAMMATIC ISSUES

**990 Schedule O, Supplemental Information**

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

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 3	DIVISIONS 12 AND 29 ARE THE ONLY TWO DIVISIONS THAT DELEGATED 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

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	<p>DIVISION 27 ADopted procedures for a) streamlining some decision-making processes in the Executive Committee, b) entering into formal collaborative relationships with other organizations, c) sponsoring initiatives outside of our organization, and d) developing our annual budget DIVISION 29 One more voting position was added to the Board of Directors DIVISION 47 Updated documents with the name change of the division to the Society for Sport, Exercise &amp; Performance Psychology, Student representatives are now voting members DIVISION 53 Bylaws changes were made 1) To clarify that SCCAP Members, Fellows and Associates use the definition in the Bylaws of APA 2) To extend the rights of SCCAP Affiliates to give these affiliates the right to run for elected office (with the exception of Representative to APA Council), serve in appointed positions, vote on SCCAP matters and in SCCAP elections (with the exception of Representative to APA Council), and serve on SCCAP committees and task forces on SCCAP committees and task forces</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE DIVISIONS ARE MEMBERSHIP ORGANIZATIONS WHOSE MEMBERS ELECT THE GOVERNING BODIES

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	THE DIVISIONS ARE MEMBERSHIP ORGANIZATIONS WHOSE MEMBERS ELECT THE GOVERNING BODIES

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	APA MANAGEMENT PERFORMS A THOROUGH REVIEW OF A DRAFT OF THE 990 BOARDS OF THE DIVISIONS WERE 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 RETURN AND TO THE APA BOARD OF DIRECTORS PRIOR TO IT BEING FILED WITH THE IRS



# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO ALL DIVISIONS AND OFFICERS ARE REQUIRED, ON A MEETING BY MEETING BASIS, TO RECUSE THEMSELVES FROM ANY CONFLICT IN VIOLATION OF THI S POLICY

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	The organizations top management officials, officers, and key employees are not compensate d except for token compensation for the Division 2 executive director

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UP ON REQUEST AT THE OFFICES OF AMERICAN PSYCHOLOGICAL ASSOCIATION

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART XI, LINE 9	OTHER CHANGES IN NET ASSETS   DIVISION 27 BEGINNING NET ASSETS   \$1,544,855

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION ADMINISTRATIVE SERVICES TOTAL FEES 499424

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION EDITORIAL SERVICES TOTAL FEES 266078

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION PHOTOGRAPHY/VIDEO PRODUCTION TOTAL FEES 26785

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION OTHER FEES TOTAL FEES 222203