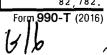


Extended to August 15, 2018

Form <b>990-T</b>	E		anization Bus			ax Returi	7	OMB No 1545-0687
	Forca		year beginning OCT 1, 20		and ending SEP	30 2017	[ ][]	<b>31016</b>
•			Form 990-T and its instru				<del></del> 4	ZU 10
Department of the Treasury nternal Revenue Service	▶		ers on this form as it may				). F	open to Public Inspection for 01(c)(3) Organizations Only
Check box if address changed			Check box if name of				[] Emplo	yer identification number byees' trust, see
B Exempt under section	Print	American Plannir	ng Association				52	-1134021
x 501(c)(3()	_ or	Number, street, and roo	m or suite no. If a P.O. bo	x, see in	structions.			ted business activity codes structions)
408(e) 220(e)	Type	205 N. Michigan	Avenue, No. 1200	•			(366 111	su delions y
408A 530(a)		City or town, state or pr	ovince, country, and ZIP of	r foreig	n postal code		7	
529(a)		Chicago, IL 606	501	_			54180	0
Book value of all assets at end of year	F Grou	up exemption number (Se	ee instructions.)	▶	3192			
15,933,937.	G Che	ck organization type 🕨	x 501(c) corporatio	n [	501(c) trust	401(a) trust		Other trust
H Describe the organization	ı's prım	ary unrelated business ac	tivity. > s	ee St	atement 1			
During the tax year, was	the corp	oration a subsidiary in ar	affiliated group or a pare	nt-subs	diary controlled group?	<b></b>	Yes	x No
If "Yes," enter the name a	nd iden	tifying number of the pare	ent corporation.					
The books are in care of	<b>&gt;</b> 7	Ann M. Simms			Telepho	one number 🕨 (	312) 4	31-9100
Part I Unrelated	d Trac	de or Business In	come		(A) Income	(B) Expense	S	(C) Net
1a Gross receipts or sale	S							
<b>b</b> Less returns and allow	vances		c Balance	1c				
2 Cost of goods sold (S	ichedule	e A, line 7)		2				
3 Gross profit. Subtract	line 2 fi	rom line 1c		3				
4a Capital gain net incom	ne (attac	ch Schedule D)		4a		·		
<b>b</b> Net gain (loss) (Form	4797, F	Part II, line 17) (attach For	m 4797)	4b				
c Capital loss deduction				4c				
, , ,		lips and S corporations (a	ittach statement)	5	315.			315.
6 Rent income (Schedu		_		6				
7 Unrelated debt-finance		` ,		7				<del></del>
		and rents from controlled	• , ,	8				<del></del>
			organization (Schedule G)	-				
10 Exploited exempt activ	-	, ,		10	94,102.		,380.	27,722.
11 Advertising income (S				11	147,650.	37	,885.	109,765.
•		ns; attach schedule) Se	e Statement 2	12	456,360.	104	265	456,360.
13 Total. Combine lines Part II Deductio			oro (Con material and f	13	698,427.		,265.	594,162.
(Except for d	contribi	utions deductions mu-	ere (See instructions for st be directly connecte	d with	•	s income )		
14 Compensation of off	icers, di	rectors, and trustees (Sci	RECEIVI	ED	<b>\</b>		14	
			1,72		78		15	
<ul><li>16 Repairs and mainten</li><li>17 Bad debts</li></ul>	ance		8 AUG 17 2	การ	ő		16	
18 Interest (attach sche	dule)		& AUG 17 2	.010	RS-0.		18	
19 Taxes and licenses	uuio,		00001				19	
	ons (Se	e instructions for limitatio	OGDEN,	ent-5-	See Statemen	t 3	20	9,198.
21 Depreciation (attach	•		,		21		<del>  </del>	
, ,		n Schedule A and elsewh	ere on return		22a		22b	
23 Depletion					L <u>::-</u> L		23	
24 Contributions to defe	erred co	mpensation plans					24	
25 Employee benefit pro		•					25	<del></del>
26 Excess exempt expe	-	chedule I)					26	26,337.
27 Excess readership co		•					27	109,765.
28 Other deductions (at		<u>.</u>			See Statemen	t <b>4</b>	28	278,537.
29 Total deductions A	dd lines	14 through 28					29	423,837.
30 Unrelated business t	axable i	ncome before net operati	ng loss deduction. Subtrai	ct line 2	9 from line 13		30	170,325.
Net operating loss de	eduction	n (limited to the amount o	n line 30)		See Statemen	t 6	31	86,543.
32 Unrelated business t	axable ı	ncome before specific de	duction Subtract line 31 f	rom line	30		32	83,782.
•			instructions for exceptions	,			33	1,000.
	taxable	income Subtract line 33	3 from line 32 If line 33 is	greater	than line 32, enter the sm	naller of zero or		
line 32							34	82 782.



	The state of the s		<u>-                                      </u>
Part !			
35	Organizations Taxable as Corporations. See instructions for tax computation.		
•	Controlled group members (sections 1561 and 1563) check here  See instructions	and:	
а	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that of	rder):	
	(1) S (2) S (3) S		
b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)		
	(2) Additional 3% tax (not more than \$100,000)		
c	Income tax on the amount on line 34	<b>•</b>	35c 16,390
36	Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount	int on line 34 from:	
	Tax rate schedule or Schedule D (Form 1041)	<b>&gt;</b>	36
37	Proxy tax See instructions	, <b>&gt;</b>	37
38	Alternative minimum tax		38
39	Tax on Non-Compliant Facility Income See instructions		39
40	Total Add lines 37, 38 and 39 to line 35c or 36, whichever applies		40 16,390
Part I	V Tax and Payments		
41a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	41a	
	Other credits (see instructions)	41b	
	General business credit Attach Form 3800	41c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	41d 7,837.	1
	Total credits Add lines 41a through 41d		41e 7,83°
42	Subtract line 41e from line 40	·	42 8,559
43	Other taxes. Check if from Form 4255 Form 8611 Form 8697 Form	8866 Other (attach schedule)	43
44	Total tax Add lines 42 and 43	cooc Control (attach solicatio)	44 8,555
	Payments: A 2015 overpayment credited to 2016	45a	7,7
	2016 estimated tax payments	45b 6,774.	
	Tax deposited with Form 8868	45c 50,000.	
	Foreign organizations: Tax paid or withheld at source (see instructions)	45d 50,000.	
	Backup withholding (see instructions)	<del></del>	
	•	45e	
	Credit for small employer health insurance premiums (Attach Form 8941)	45f	
9	Other credits and payments Form 2439	45.	
40	Form 4136 Other Total	► 45g	56 88
46	Total payments Add lines 45a through 45g		46 56,77
47	Estimated tax penalty (see instructions). Check if Form 2220 is attached	_	47 9
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed		48
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	•	49 48,11
50	Enter the amount of line 49 you want: Credited to 2017 estimated tax	9,119. Refunded	50 39,00
Part \			
51	At any time during the 2016 calendar year, did the organization have an interest in or a signati	•	Yes No
	over a financial account (bank, securities, or other) in a foreign country? If YES, the organizat	·	
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of t	he foreign country	
	here		x
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, o	r transferor to, a foreign trust?	X
	If YES, see instructions for other forms the organization may have to file.		
53	Enter the amount of tax-exempt interest received or accrued during the tax year > \$		<u> </u>
0.	Under penalties of perury, I declare that I have examined this return, including accompanying schedules a correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which pre-	nd statements, and to the best of my knov eparer has any knowledge	wledge and belief, it is true,
Sign		Ma	ay the IRS discuss this return with
Here		ecutive Officer the	preparer shown below (see
	agnature of officer Date Title	ins	structions)? X Yes N
	Print/Type preparer's name Preparer's signature	Date Check if	PTIN
Paid		self- employed	
Prepa	rer Wayne Harder Vaun Harde	8-10-19	P00294296
Use C	Formula manner & DOM TVO TVD	Firm's EIN ▶	42-0714325
USE C	1 S. WACKER DRIVE, STE 800		
	Firm's address  CHICAGO, IL 60606	Phone no 3:	12-634-3400
		1	5 000 T (00)

Form **990-T** (2016)

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Schedule A - Cost of Good	s Sold. Enter	method of inven	tory valuation N/A				
1. Inventory at beginning of year	1		6 Inventory at end of year	г	6		
2 Purchases	2		7 Cost of goods sold Subtract line 6				
3 Cost of labor	3		from line 5 Enter here	and in Part I,			
4 a Additional section 263A costs			line 2		7	<u> </u>	
(attach schedule)	4a		8 Do the rules of section	263A (with respect to		Yes	No
b Other costs (attach schedule)	4b		property produced or a	equired for resale) apply to			
5 Total Add lines 1 through 4b	5		the organization?				Х
Schedule C - Rent Income (see instructions)	(From Real	Property and	d Personal Property	Leased With Real	Proper	ty)	
1 Description of property							
(1)							
(2)							
(3)							
(4)							
		ed or accrued		3(a) Deductions d	rectly con-	ected with the income	e in
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	e than	of rent for p	and personal property (if the percenta personal property exceeds 50% or if at is based on profit or income)			) (attach schedule)	
(1)							
(2)							
(3)							
(4)							
Total	0.	Total		0.			
(c) Total income Add totals of columns		ter		(b) Total deductio			
here and on page 1, Part I, line 6, column		<b></b>	· · · · · · · · · · · · · · · · · · ·	0 . Part I, line 6, column (I			0 .
Schedule E - Unrelated Del	ot-Financed	I Income (see	instructions)				
			2 Gross income from	3 Deductions direct to debt-	ly connecte financed pr		
1 Description of debt-fi	nanced property		or allocable to debt- financed property	(a) Straight line depreciation	on	(b) Other deduction	
	<b>,</b>		manoes property	(attach schedule)		(attach schedule	9
(1)							
(2)							
(3)	<del></del> .						
(4)							
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property n schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)		8 Allocable dedu (column 6 x total of 3(a) and 3(b)	columns
(1)			%		-		_
(2)			%				
(3)			%				
(4)			%				
		-		Enter here and on page 1 Part I, line 7, column (A)		Enter here and on part I, line 7, colum	
Totals			<b>&gt;</b>		0.		0
Total dividends-received deductions in	ncluded in columi	า 8					0



Schedule F - Interest, A				ontrolled O				- 1200 1121			
1. Name of controlled organizate	identi	nployer fication mber	3 Net unre (loss) (see i	lated income instructions)	4. Tota paym	ments made Inch		5. Part of column 4 that is included in the controlling organization's gross income		6. Deductions directly connected with income in column 5	
(1)			-						$\dashv$		
(2)											
(3)											
(4)											
Nonexempt Controlled Organiz	zations	-			<u> </u>						
7 Taxable income	8. Net unrelated inco (see instruction		9 Total o	f specified payr made	nents	10. Part of column in the controllingross				uctions directly connected ncome in column 10	
(1)											
(2)											
(3)		<u></u>									
(4)					Ì	·					
Totals					•	Add colum Enter here and line 8, co		1, Part I,	Enter he	I columns 6 and 11 re and on page 1, Part I, ne 8, column (B)	
Schedule G - Investme		Section	n 501(c)(7	'), (9), or	(17) Org	ganization					
	iption of income			2 Amount of	ıncome	3 Deduction directly connect (attack asked)	ted	4 Set-a		5 Total deductions and set-asides	
(1)					_	(attach schedu	ne)	<u> </u>	<u>-</u> _	(col 3 plus col 4)	
(2)	<del></del>									<del>                                     </del>	
(3)							-+				
(4)	<del></del>						-	<del></del>	<u> </u>		
(4)				Enter here and	on page 1.	<del></del>	L			Enter here and on page	
Totals				Part I, line 9, co	lumn (A)					Part I, line 9, column (B)	
Schedule I - Exploited	Exempt Activit	y Incom	ne, Other	Than Ac	○.∤ Ivertisiı	ng Income		···· <u>·</u>		0	
(see instru	ctions)	<del></del>								<del></del>	
1 Description of exploited activity	2 Gross unrelated business income from trade or business	directly with pr of un	openses connected roduction irelated ss income	4 Net incomfrom unrelated business (cominus colum gain, comput through	trade or olumn 2 n 3) If a e cols 5	5 Gross inco from activity the is not unrelate business inco	nat ed	6. Expo attributa colum Stmt 9	ble to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1) Mailing List Sales	12,157.		6,513.		5,644.				4,259	. 4,259	
(2) Online Advertising	81,945.		59,867.	2	2,078.				23,434	. 22,078	
(3)											
(4)	Enter here and on		ere and on							Enter here and	
Totala	page 1, Part I, line 10, col (A)		1, Part I, ), col (B)							on page 1 Part II, line 26	
Schedule J - Advertising	94,102.	inetrilictio	66,380.							26,337	
Part I Income From F				solidated	Basis					<u> </u>	
				1 -			<del></del>				
1 Name of periodical	2 Gross advertising income	adv	3. Direct vertising costs	or (loss) (c	tising gain of 2 minus ain, compute nrough 7	5 Circulati income	ion	6 Reade costs		7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1) Planning Magazine	147,6	550.	37,885	1		1,202,	021.	2,41	5,569.		
(2)				_		<u></u>					
(3)				_							
(4)											
Totals (carry to Part II, line (5))	<b>▶</b> 147,6	550.	37,885	:	109,765	1,202,	021.	2,415	5,569.	109,76	
				-						Form <b>990-T</b> (201	

## Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	Advertising gain     or (loss) (col. 2 minus     col. 3). If a gain, compute     cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)				_		
(2)						
(3)						
(4)						
Totals from Part I	147,650.	37,885.		<u> </u>		109,765.
	Enter here and on page 1, Part I, line 11, col. (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	147,650.	37,885.				109,765.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

	1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)			%	
(2)			%	
(3)			%	
(4)			%	
Fotal. Enter here an	nd on page 1, Part II, line 14		<b>•</b>	0

Form 990-T (2016)

**Alternative Minimum Tax - Corporations** 

Attach to the corporation's tax return

▶ Information about Form 4626 and its separate instructions is at www irs gov/form4626

OMB No 1545-0123

•	nal Revenue Service	▶ Information about Form 4626 and its separate instruc	ctions is at www irs gov/form4626		1 20 10
Nam	e				Employer identification number
	American Plan	ning Association			52-1134021
	Note. See the instru	ctions to find out if the corporation is a small corporation exempt			
	from the alternative	mınımum tax (AMT) under section 55(e).			
1	Taxable income or (	loss) before net operating loss deduction		1	169,325.
2	Adjustments and p	· · · · · · · · · · · · · · · · · · ·		<u> </u>	<del></del>
	a Depreciation of post			2a	
	•	fied pollution control facilities		2b	
		ing exploration and development costs		2c	
		ulation expenditures (personal holding companies only)		2d	
	e Adjusted gain or los			2e	
	Long-term contracts		•	21	<del> </del>
	•	pital construction funds		29	<del> </del>
	=	action (Blue Cross, Blue Shield, and similar type organizations only)		2h	<del></del>
	• •			2i	
		ivities (personal service corporations only)		$\vdash$	
		losely held corporations and personal service corporations only)		2j 2k	
	Loss limitations				
	Depletion	was the second s		21	<del> </del>
	•	income from specified private activity bonds		2m	<del> </del>
	n Intangible drilling co		0 0	2n	5,806.
	Other adjustments a	·	See Statement 12 *	20	<del> </del>
3	•	rnative minimum taxable income (AMTI) Combine lines 1 through 20		3	175,131.
4	-	trnings (ACE) adjustment;	1 4-1 125 121	1	
		the ACE worksheet in the instructions	4a 175,131	4	
1		line 4a If line 3 exceeds line 4a, enter the difference as a			
	negative amount. Se		4b   0	∔	l
		5% (0.75) Enter the result as a positive amount	4c	4	
		any, of the corporation's total increases in AMTI from prior	1		
		its over its total reductions in AMTI from prior year ACE	} }	-	}
	•	structions. Note: You must enter an amount on line 4d	11	ļ	
	(even if line 4b is po	sitive)	40	4	
	e ACE adjustment			Ì	
		or more, enter the amount from line 4c		}	
		than zero, enter the <b>smaller</b> of line 4c or line 4d as a negative amount	ŗ	4e	0.
5		1 4e. If zero or less, stop here, the corporation does not owe any AMT		5	175,131.
6		perating loss deduction. See instructions	See Statement 13	6	144,604.
7		m taxable income Subtract line 6 from line 5. If the corporation held a	i residual		
_	interest in a REMIC,			7	30,527.
8		out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on	line 8c).	}	
i		from line 7 (if completing this line for a member of a controlled	1 1		
	•	ons). If zero or less, enter -0-	8a 0	4	
	b Multiply line 8a by 2		8b 0	4	
		t line 8b from \$40,000 (if completing this line for a member of a contro	lled		
		ons) If zero or less, enter -0-		8c	40,000.
9	Subtract line 8c from	n line 7 If zero or less, enter -0-		9	0.
10	Multiply line 9 by 20	0% (0 20)		10	0.
11	Alternative minimur	n tax foreign tax credit (AMTFTC) See instructions		11	
12	Tentative minimum	tax. Subtract line 11 from line 10		12	0.
13	Regular tax hability	before applying all credits except the foreign tax credit		13	<u> </u>
14	Alternative minimu	m tax Subtract line 13 from line 12. If zero or less, enter -0- Enter her	e and on		
	Form 1120, Schedu	le J, line 3, or the appropriate line of the corporation's income tax retur	<u> </u>	14	0.
.IWA	For Paperwork Red	uction Act Notice, see separate instructions			Form 4626 (2016)

\* See also

See Statement 10 See Statement 11

1,3 4 1



, , , , , , , , , , , , , , , , , , ,	djusted Current Earning. ► See ACE Worksheet	• • •		
Pre-adjustment AMTI. Enter the amount from I	ne 2 of Form 4626		1	175,131.
	118 S 01 F01111 4020		<del> -'- </del>	
		2a		
a AMT depreciation		24		
b ACE depreciation:	25/13			
(1) Post-1993 property	2b(1)			
(2) Post-1989, pre-1994 property	2b(2)		1	
(3) Pre-1990 MACRS property	2b(3)		1 1	
(4) Pre-1990 original ACRS property	2b(4)	j	] ]	
(5) Property described in sections		ļ		
168(f)(1) through (4)	2b(5)	<del></del>		
(6) Other property	[2b(6)]	<del> </del>	] [	
(7) Total ACE depreciation Add lines 2b(1)	• ,, ,	[2b(7)]		
c ACE depreciation adjustment. Subtract line 2b(	·		2c	
3 Inclusion in ACE of items included in earnings a	ind profits (E&P).	1 - 1	1 1	
a Tax-exempt interest income		3a	——∤	
<b>b</b> Death benefits from life insurance contracts		3b		
c All other distributions from life insurance contra	, ,	3c		
d Inside buildup of undistributed income in life in		3d		
e Other items (see Regulations sections 1.56(g)-	1(c)(6)(ııı) through (ıx)		{	
for a partial list)		3e		
f Total increase to ACE from inclusion in ACE of		through 3e	3f	
4 Disallowance of items not deductible from E&P	•	1 1	ļ ļ	
a Certain dividends received		4a		
<b>b</b> Dividends paid on certain preferred stock of public utilit	ies that are deductible under section 247	(as	ł J	
affected by P.L. 113-295, Div. A, section 221(a)(41)(A), E		4b		
c Dividends paid to an ESOP that are deductible t	inder section 404(k)	4c		
d Nonpatronage dividends that are paid and dedu	ctible under section		i l	
1382(c)		4d		
e Other Items (see Regulations sections 1.56(g)-	1(d)(3)(ı) and (ıı) for a			
partial list)		4e		
f Total increase to ACE because of disallowance		dd lines 4a through 4e	4f	
5 Other adjustments based on rules for figuring E	&P:		] ]	
a Intangible drilling costs		5a		
<b>b</b> Circulation expenditures		5b		
c Organizational expenditures		5c		
d LIFO inventory adjustments		5d		
e Installment sales		5e		
f Total other E&P adjustments Combine lines 5a	•		5f	
6 Disallowance of loss on exchange of debt pools			6	
7 Acquisition expenses of life insurance compani	es for qualified foreign contracts		7	
8 Depletion			8	
9 Basis adjustments in determining gain or loss f	- · ·		9	
10 Adjusted current earnings Combine lines 1, 2	c, 3f, 4f, and 5f through 9. Enter the	result here and on line 4a of		
Form 4626			10	175,131.

Form 990-T Description of Organization's Primary Unrelated Statement Business Activity

Advertising, Career Listing Services, Mailing List Sales, Partnership Income To Form 990-T, Page 1

Form 990-T	Other Income	Statement	2
Description		Amount	
Division Income Career and Job Listing Service	es		320. 040.
Total to Form 990-T, Page 1, 1	line 12	456,	360.
Form 990-T	Contributions	Statement	3
Description/Kind of Property	Method Used to Determine FMV	Amount	
Charitable Contributions	N/A	327,	930.
Total to Form 990-T, Page 1, 1	line 20	327,	,930.
Form 990-T	Other Deductions	Statement	4
Description		Amount	
Career and Job Listing Service	es	278	,537.
Total to Form 990-T, Page 1, 1	278,537.		

, <b>.</b>	٨	

Form 990-T	Contributions Summary		Statement	5
Qualified Contribut	tions Subject to 100% Limit			
Carryover of Prior For Tax Year 2012 For Tax Year 2013 For Tax Year 2014 For Tax Year 2015	2 3 4			
Total Carryover Total Current Year		2,830,589 327,930		
Total Contributions Taxable Income Limi	s Available itation as Adjusted	3,158,519		
Excess 10% Contribu Excess 100% Contrib Total Excess Contri	outions	3,149,321 0 3,149,321		
Allowable Contribut	tions Deduction		9,	198
Total Contribution	Deduction		9,	198

<b>→</b>	ر .	
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Form 990-T	Net	Operating	Loss	Deducti	on	\$	Statement	6
Tax Year Loss Sustai	ned	Loss Previou Appli	sly		oss naining		Available This Year	
09/30/06       212,1         09/30/08       422,8         09/30/09       638,5         09/30/10       148,7         09/30/11       258,5	56. 80. 53.	422 638 148	,156. ,856. ,580. ,753.		0. 0. 0. 0. 86,543.		(	0. 0. 0. 0.
NOL Carryover Available	This	Year			86,543.		86,54	3.
Form 990-T	Incom	e (Loss)	from I	artners	hips		Statement	7
Partnership Name		,	Gross	Income	Deductions	S	Net Incomo	
KKR & Co. L.P.		•		315.		0.		315.
Total to Form 990-T, Page	ge 1,	line 5		315.		0.		315.
		xpenses D of Unrela			cted with Income	\$	Statement	8
Description				ivity mber	Amount		Total	
Mail List Direct Costs	_	SubTotal	_	1	6,	513.	6,	513.
Online Advertising	-	SubTotal	_	2	59,	867.	59,	867.
Total of Form 990-T, Sci	hedule	I, Colum	n 3			-	66,	380.

	hedule I - Expent th Production of				Statement 9
Description			Activity Number	Amount	Total
Mail List Direct Online Advertisin	- Sub	Total -	1	4,259.	4,259.
Total of Form 990		Total - Column	2		23,434.

A,	ز.

Forn	n 4626	AMT Contribution Limitation	Statement	10
	and Domest	exable income before NOL, charitable contributions, cic Production Activities Deduction (DPAD) er AMT adjustment and preference items other than ACE, charitable contributions and DPAD	178,	523
	NOL ar	ment AMTI before ACE, charitable deductions, ad DPAD	178,	523
6) 7) 8)	Line 5 les Multiply 1 Enter exce in AMTI ACE adjust If line 6 from li If line 6	at charitable contributions (line 3 plus line 4).  Is sline 3 (enter excess as a negative amount)  Line 6 by 75%. Enter result as a positive amount.  Ess of the corporation's prior year net increases  I due to ACE	178,	523
11)	AMTI with (line Contribut for NO not pr above,	nout charitable contributions, NOL and DPAD 3 plus line 9)	178, 17, 3,193,	852
13)		cion deduction to calculate 90% AMTI limitation OL (lesser of line 11 or line 12)	17,	852
15)	line 1 NOL limit	purposes of 90% NOL Limitation (line 10 less)	160, 144, 239,	604
17)	AMT NOL (	lesser of line 15 or line 16)	144	604
19) 20)	plus s 10% of li AMT chari	charitable deduction limitation (line 10 special deductions less AMT NOL on line 17)	3,	, 919 , 392 , 392 , 198
		-		, 136
44)	AMI COILL	ribution adjustment (line 21 less line 20) =		

Form 4626	AMT Contributions		Statement	11
Carryover of Prior Y For Tax Year 2011 For Tax Year 2012 For Tax Year 2013 For Tax Year 2014 For Tax Year 2015	Years Unused Contributions	2,865,626		
Total Carryover Current Year Contrib	outions —		2,865, 327,	
Total Contributions 10% of Taxable Incom	ne as Adjusted		3,193,	556 392
Excess Contributions	1		3,190,	164
Allowable Contributi	ons		3,	392

American	Planning	Association
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148,753.

258,561.

AMT NOL Carryover Available this Year

09/30/10

09/30/11

52-1134021

Form 4626	(	Other AMT Adjusti	ments	Statement	12
Descriptio	n			Amount	
Charitable	_ Contributions			5	,806.
Total to F	orm 4626, Line 2o			5	,806.
Form 4626	Alternati	ive Minimum Tax 1	NOL Deduction	Statement	13
Form 4626	Alternat:	Loss Previously Applied	NOL Deduction  Loss Remaining	Statement	13
		Loss Previously	Loss	Statement	13
Tax Year	Loss Sustained	Loss Previously Applied	Loss Remaining	Statement	13

148,753.

18,608.

0.

239,953.

239,953.

## Form **8827**

Department of the Treasury Internal Revenue Service

## **Credit for Prior Year Minimum Tax - Corporations**

Attach to the corporation's tax return.

▶ Information about Form 8827 and its instructions is at www.irs.gov/form8827

OMB No. 1545-0123

2016

sexti s

Name	Initititiation about rottii 0027 and its institutions is at www.its.gov/totiii0027	Employer	dentification number
American Plan	ning Association	52-1	134021
1 Alternative minimum	ax (AMT) for 2015. Enter the amount from line 14 of the 2015 Form 4626	1	6,751.
2 Minimum tax credit ca	rryforward from 2015. Enter the amount from line 9 of the 2015 Form 8827	2	1,086.
3 Enter any 2015 unallo	wed qualified electric vehicle credit (see instructions)	3	
4 Add lines 1, 2, and 3	2016 contacione to table mine allemate to a contacione allemate to a contacione and a contacione allemate to a contacione allemate allemate to a contacione allemate	4	7,837.
instructions)	s 2016 regular income tax liability minus allowable tax credits (see	5	16,396.
•	mall corporation* exempt from the AMT for 2016 (see instructions)?		
	he excess of line 5 over \$25,000. If line 5 is \$25,000 or less, enter -0- 4626 for 2016 and enter the tentative minimum tax from line 12	6	0.
7a Subtract line 6 from li	ne 5. If zero or less, enter -0-	7a	16,396.
<b>b</b> For a corporation elec	ting to accelerate the minimum tax credit, enter the bonus depreciation		
	the minimum tax credit (see instructions)	7b	
c Add lines 7a and 7b		7c	16,396.
	ne 4 or line 7c. If the corporation had a post-1986 ownership change	1 1	
	excess credits, see instructions	8a	7,837.
•	n tax credit Enter the smaller of line 4 or line 7a here and on Form 1120, Schedule J, Part I, line 5d		
, .,	of your return). If the corporation had a post-1986 ownership change or has pre-acquisition		
	structions. If you made an entry on line 7b, go to line 8c. Otherwise, skip line 8c	8b	7,837.
	line 8a. This is the refundable amount for a corporation electing to accelerate		
	tL Include this amount on Form 1120, Schedule J, Part II, line 19c (or the applicable line of		
your return)		8c	
	arryforward to 2017 Subtract line 8a from line 4. Keep a record of this		
amount to carry forwa	rd and use in future years	9	·