

PUBLIC DISCLOSURE COPY

Form **990****Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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.

Go to www.irs.gov/Form990 for instructions and the latest information.**2024****Open to Public Inspection**

A For the 2024 calendar year, or tax year beginning , 2024 , and ending , 20	
B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending	C Name of organization AMERICAN PSYCHOLOGICAL ASSOCIATION 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: ARTHUR C. EVANS SAME AS C ABOVE H(a) Is this a group return for subordinates? ☐ Yes ☒ No H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list. See instructions. H(c) Group exemption number
I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527	D Employer identification number 53-0205890 E Telephone number (202) 336-5500 G Gross receipts \$ 199,453,212
J Website: WWW.APA.ORG	
K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other	L Year of formation: 1925 M State of legal domicile: DC

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: AMERICAN PSYCHOLOGICAL ASSOCIATION IS A NATIONAL MEMBERSHIP ORGANIZATION CREATED TO PROMOTE THE ADVANCEMENT, COMMUNICATION, AND APPLICATION OF PSYCHOLOGICAL SCIENCE AND KNOWLEDGE TO BENEFIT SOCIETY AND IMPROVE LIVES.		
	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	180
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	180
	5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	612
	6	Total number of volunteers (estimate if necessary)	6	720
		7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a
b		Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	919,898
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	4,943,166	5,004,315
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	124,431,261	128,944,386
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,265,524	7,629,842
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,653,744	4,697,710
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	138,293,695	146,276,253
	14	Benefits paid to or for members (Part IX, column (A), line 4)	3,694,938	3,571,323
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	80,567,475	84,439,091
	b	Total fundraising expenses (Part IX, column (D), line 25)	0	0
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	60,146,266	57,340,630
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	144,408,679	145,351,044
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	(6,114,984)	925,209
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	253,609,458	249,938,568
	22	Net assets or fund balances. Subtract line 21 from line 20	202,601,309	197,182,268
			51,008,149	52,756,300

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 MICHELLE ASLAN, CFO Type or print name and title	Date
	Print/Type preparer's name JAKE COOK Preparer's signature JAKE COOK Date 11/17/2025 Check ☐ if self-employed PTIN P01240455	Firm's EIN 13-5381590 Phone no. (703) 893-0600
Paid Preparer Use Only	Firm's name BDO USA Firm's address 8401 GREENSBORO DR STE 800, MCLEAN, VA 22102-3599	

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** (2024)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐ Yes ☒ No**1** Briefly describe the organization's mission:

(SEE ON 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 \$ 53,240,419 including grants of \$ 0) (Revenue \$ 114,115,359)
(SEE ON SCHEDULE O)**4b** (Code:) (Expenses \$ 10,249,689 including grants of \$ 70,083) (Revenue \$ 7,450,205)
EDUCATION

THE APA COMMISSION ON ACCREDITATION PLAYED A STRONG ROLE IN THE AREA OF QUALITY ASSURANCE FOR THE 1,299 ACCREDITED PROGRAMS IN HEALTH SERVICE PSYCHOLOGY. APA ALSO PLAYS AN IMPORTANT ROLE IN SHAPING THE EDUCATIONAL EXPERIENCE OF TOMORROW'S PSYCHOLOGISTS AND IN PROVIDING CONTINUING PROFESSIONAL EDUCATION FOR TODAY'S PRACTITIONERS. CONTINUING EDUCATION IS OFFERED THROUGH 595 PROGRAMS ON A VARIETY OF TOPICS AND FORMATS INCLUDING WEB DELIVERED, BOOK-BASED AND JOURNAL ARTICLE-BASED PROGRAMS. THERE ARE CURRENTLY OVER 932 APPROVED SPONSORS OF CONTINUING EDUCATION.

4c (Code:) (Expenses \$ 6,142,374 including grants of \$ 24,438) (Revenue \$ 4,415,502)
MEMBERSHIP OFFICE

THE APA MEMBERSHIP OFFICE INCLUDES MEMBERSHIP MARKETING, THE SERVICE CENTER, AND MEDIA & EVENT SALES. MEMBERSHIP MARKETING DRIVES RECRUITMENT, RETENTION, AND ENGAGEMENT THROUGH STRATEGIC CAMPAIGNS USING DIGITAL AND TRADITIONAL CHANNELS. IN 2024, MEMBERSHIP LAUNCHED THE NEW SUPPORTER CATEGORY, INTRODUCED THE APA COMMUNITY (AN EXCLUSIVE SPACE FOR MEMBERS TO CONNECT AND COLLABORATE), AND MODIFIED THE MEMBERSHIP DUES STRUCTURE. THE SERVICE CENTER ACTS AS THE PRIMARY CONTACT POINT FOR MEMBER AND CUSTOMER INQUIRIES, HANDLING TRANSACTIONS AND SUPPORT. MEDIA & EVENT SALES CONNECTS ADVERTISERS, SPONSORS, AND PARTNERS WITH APA'S AUDIENCE THROUGH UNIQUE MEDIA AND EVENT OPPORTUNITIES. THE MEMBERSHIP OFFICE RELIES ON RESEARCH TO UNDERSTAND MEMBER NEEDS AND DELIVERS TAILORED CONTENT, PRODUCTS, SERVICES, AND EXPERIENCES. AS OF THE END OF 2024, APA HAD OVER 173,000 MEMBERS, AFFILIATES, AND SUPPORTERS.

4d Other program services (Describe on Schedule O.)

(Expenses \$ 40,814,627 including grants of \$ 3,476,802) (Revenue \$ 1,730,808)

4e Total program service expenses 110,447,109

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 1,929	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c ✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	612
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	✓
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	✓
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	✓
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	✓
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	✓
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17	

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 180 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 on Schedule O.		
b Enter the number of voting members included on line 1a, above, who are independent 1b 180		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2	✓	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3		✓
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		✓
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		✓
6 Did the organization have members or stockholders? 6	✓	
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a	✓	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b	✓	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? 8a	✓	
b Each committee with authority to act on behalf of the governing body? 8b	✓	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9		✓

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, CA, (CONTINUED ON SCHEDULE O)

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

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

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

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☒**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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			
(1) ARTHUR C. EVANS CEO	36.5 1.0			✓				917,168	0	265,699
(2) JAIME L. DIAZ-GRANADOS DEPUTY CEO	36.5 1.0				✓			1,010,217	0	105,021
(3) DEANNE M. OTTAVIANO GENERAL COUNSEL	37.5 0.0				✓			634,124	0	287,631
(4) IAN D. KING CHIEF OF STRATEGIC IMPLEMENTATION AND MEMBERSHIP	36.5 1.0				✓			458,712	0	324,907
(5) JASPER SIMONS CHIEF PUBLISHING OFFICER	37.5 0.0				✓			490,412	0	278,401
(6) TONY HABASH CHIEF INFORMATION OFFICER	37.5 0.0				✓			540,701	0	204,779
(7) ALICIA C. AEBERSOLD CHIEF COMMUNICATIONS OFFICER	37.5 0.0					✓		423,564	0	126,012
(8) MICHELLE ASLAN CFO	36.5 1.0			✓				358,376	0	115,122
(9) MAYSA AKBAR CHIEF DIVERSITY OFFICER	37.5 0.0					✓		403,093	0	48,279
(10) MITCHELL J. PRINSTEIN CHIEF OF PSYCHOLOGY STRATEGY AND INTEGRATION	37.5 0.0					✓		384,605	0	27,560
(11) CATHERINE L. GRUS CHIEF EDUCATION OFFICER	37.5 0.0					✓		342,304	0	42,467
(12) JARED L. SKILLINGS CHIEF OF PROFESSIONAL PRACTICE	26.5 11.0					✓		337,606	0	43,304
(13) CYNTHIA DE LAS FUENTES PRESIDENT	11.0 1.0	✓						82,500	0	0
(14) MICHAEL L. HENDRICKS TREASURER (THRU 10/2024)	16.0 1.0	✓						39,600	0	0

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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(15) KATHLEEN S. BROWN RECORDING SECRETARY (THRU 10/2024); TREASURER (AS OF 10/24)	11.0 1.0	✓						34,100	0	0
(16) DEBRA M. KAWAHARA PRESIDENT-ELECT	9.0 1.0	✓						30,800	0	0
(17) THEMA S. BRYANT-DAVIS PAST PRESIDENT	18.0 1.0	✓						27,500	0	0
(18) ARLENE NORIEGA CLT CHAIR	9.0 1.0	✓						16,500	0	0
(19) ELIZABETH F. LOUIS MEMBER-AT-LARGE	9.0 1.0	✓						16,500	0	0
(20) HIDEKO SERA MEMBER-AT-LARGE	9.0 1.0	✓						16,500	0	0
(21) LINDSAY N. PATTERSON PUBLIC MEMBER	9.0 1.0	✓						16,500	0	0
(22) LUZ MARIA GARCINI MEMBER-AT-LARGE	9.0 1.0	✓						16,500	0	0
(23) MARY ANN MCCABE MEMBER-AT-LARGE	9.0 1.0	✓						16,500	0	0
(24) NOELLE LORRAINE LEFFORGE CLT CHAIR-ELECT	1.0 0.0	✓						16,500	0	0
(25) (SEE PART VII CONTINUATION SHEET)										
1b Subtotal								6,630,882	0	1,869,182
c Total from continuation sheets to Part VII, Section A								49,500	0	0
d Total (add lines 1b and 1c)								6,680,382	0	1,869,182
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								200		

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

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
SALESFORCE.COM, INC., 415 MISSION STREET, 3RD FLOOR, SAN FRANCISCO, CA 94105	CUSTOMER RELATIONSHIP MANAGEMENT	483,374
SHERIDAN PRESS, INC., 450 FAME AVENUE, HANOVER, PA 17331	PRINTING AND PUBLISHING SERVICES	317,668
MOLECULAR CONNECTIONS PRIVATE LIMITED, 750 FIRST STREET, NE, WASHINGTON, DC 20002	DATA SCIENCE SERVICES	162,676
LUMINA DATAMATICS, INC., 600 CORDWAINER DRIVE, UNIT 203, NORWELL, MA 02061	TECHNOLOGY SOLUTIONS	139,802
SHERIDAN RANDOM LAKE, INC., 100 INDUSTRIAL DRIVE, RANDOM LAKE, WI 53075	PRINTING AND PUBLISHING SERVICES	114,321
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		5

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
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	4,948,909			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	55,406			
	g	Noncash contributions included in lines 1a-1f	1g	\$			
	h	Total. Add lines 1a-1f		5,004,315			
Program Service Revenue				Business Code			
	2a	LICENSING FEES	541900	92,419,800	92,419,800		
	b	BOOKS AND JOURNAL SUBSCRIPTIONS	111000	16,723,356	15,490,844	1,232,512	
	c	PUBLICATION SALES	511120	6,815,546	6,815,546		
	d	SERVICE AND APPLICATION FEES	611710	5,808,718	5,808,718		
	e	MEMBERSHIP FEES	611600	3,774,851	3,774,851		
	f	All other program service revenue	900099	3,402,115	3,402,115	0	0
	g	Total. Add lines 2a-2f		128,944,386			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		2,257,874		635,450	1,622,424
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties		999,842			999,842
	6a	Gross rents	(i) Real 26,744,000				
	b	Less: rental expenses	24,633,516				
	c	Rental income or (loss)	2,110,484	0			
	d	Net rental income or (loss)		2,110,484		493,838	1,616,646
	7a	Gross amount from sales of assets other than inventory	(i) Securities 33,915,411				
	b	Less: cost or other basis and sales expenses	26,857,839	1,685,604			
	c	Gain or (loss)	7,057,572	(1,685,604)			
	d	Net gain or (loss)		5,371,968			5,371,968
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a				
	b	Less: direct expenses	8b				
	c	Net income or (loss) from fundraising events					
	9a	Gross income from gaming activities. See Part IV, line 19	9a				
	b	Less: direct expenses	9b				
	c	Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less returns and allowances	10a				
	b	Less: cost of goods sold	10b				
	c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue				Business Code			
	11a	APA OTHER REVENUE	900099	1,249,712			1,249,712
	b	PARKING REVENUE	900099	202,608			202,608
	c	MISCELLANEOUS	900099	126,959			126,959
	d	All other revenue	900099	8,105	0	2,846	5,259
	e	Total. Add lines 11a-11d		1,587,384			
12	Total revenue. See instructions			146,276,253	127,711,874	2,364,646	11,195,418

Part IX Statement of Functional Expenses

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

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,287,093	3,287,093		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	274,230	274,230		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	10,000	10,000		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	6,370,770	4,921,636	1,449,134	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	61,209,321	47,286,274	13,923,047	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,640,172		3,640,172	
9 Other employee benefits	8,447,762	(535)	8,448,297	
10 Payroll taxes	4,771,066		4,771,066	
11 Fees for services (nonemployees):				
a Management				
b Legal	787,088	75,109	711,979	
c Accounting	246,690		246,690	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	381,707		381,707	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	13,071,563	10,461,379	2,610,184	0
12 Advertising and promotion	3,113,196	3,118,031	(4,835)	
13 Office expenses	7,523,583	7,424,398	99,185	
14 Information technology	6,095,286	2,421,107	3,674,179	
15 Royalties	6,267,714	6,281,947	(14,233)	
16 Occupancy	8,660,634	298,468	8,362,166	
17 Travel	3,767,347	3,656,179	111,168	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	3,919,526	3,669,801	249,725	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,120,431	1,199,370	1,921,061	
23 Insurance	1,199,161		1,199,161	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a <u>ALLOCATED COSTS</u>	4,413,667	16,418,362	(12,004,695)	
b <u>HONORARIA/STIPENDS</u>	3,580,387	3,585,518	(5,131)	
c <u>BANK COMMERCE FEES</u>	529,607	4,456	525,151	
d <u>CORPORATE DUES/ MEMBERSHIP</u>	345,787	346,690	(903)	
e All other expenses	(9,682,744)	(4,292,404)	(5,390,340)	0
25 Total functional expenses. Add lines 1 through 24e	145,351,044	110,447,109	34,903,935	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	750	1	750
	2 Savings and temporary cash investments	38,773,647	2	48,168,174
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	20,538,078	4	17,255,712
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	4,942,830	8	4,236,700
	9 Prepaid expenses and deferred charges	5,260,295	9	6,415,756
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 197,216,196		
	b Less: accumulated depreciation	10b 138,493,508	65,708,712	10c 58,722,688
	11 Investments—publicly traded securities	76,969,426	11	75,117,265
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	41,415,720	15	40,021,523
16 Total assets. Add lines 1 through 15 (must equal line 33)	253,609,458	16	249,938,568	
Liabilities	17 Accounts payable and accrued expenses	22,185,781	17	23,766,337
	18 Grants payable		18	
	19 Deferred revenue	42,636,507	19	39,852,195
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	16,262,910	21	16,547,364
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	116,990,425	23	112,023,450
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	4,525,686	25	4,992,922
	26 Total liabilities. Add lines 17 through 25	202,601,309	26	197,182,268
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	51,008,149	27	52,756,300
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	51,008,149	32	52,756,300
33 Total liabilities and net assets/fund balances	253,609,458	33	249,938,568	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	146,276,253
2	Total expenses (must equal Part IX, column (A), line 25)	2	145,351,044
3	Revenue less expenses. Subtract line 2 from line 1	3	925,209
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	51,008,149
5	Net unrealized gains (losses) on investments	5	267,370
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	555,572
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	52,756,300

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

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		✓
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. ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	✓	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for 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 on Schedule O.	✓	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	✓	
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 on Schedule O and describe any steps taken to undergo such audits	✓	

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

[illegible]

[illegible]

[illegible]

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (Check all that apply)						(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			
(87) JEFFREY N. YOUNGGREN	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(88) JENNIFER KIM PENBERTHY	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(89) JENNIFER LEIGH GROSCUP	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(90) JENNIFER LEIGH SMITH	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(91) JENNIFER LODI-SMITH	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(92) JESSICA LEONARD	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(93) JILL C. FODSTAD	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(94) JOANNA OMEGA SHADOW	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(95) JOANNE BRODER SUMERSON	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(96) JODIE B. ULLMAN	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(97) JOEL B. WIEMAN	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(98) JORGE WONG	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(99) JOSEPH COMATY	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(100) JULIE ANN SUHR	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(101) JULIE RADICO	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(102) JULIE YURIE TAKISHIMA-LACASA	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(103) JUNE E. FEDER	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(104) JUSTIN ELLIOTT KARR	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(105) KAREN J. GIESEKE	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(106) KARI ANN SCOVAL-HENDRICKSON	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									
(107) KIM SKERVEN	1.0	✓						0	0	0
COUNCIL OF REPRESENTATIVES	0.0									

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (Check all that apply)						(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			
(108) KIMBERLY B. KAHN COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(109) KRISTINE LEE LOKKEN COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(110) KRITIKA DWIVEDI COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(111) KURT F. GEISINGER COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(112) LAIRD R.O. EDMAN COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(113) LANA LEE HAWKINS COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(114) LAURA FILLINGAME KNUDTSON COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(115) LAURA L. FAYNOR-CIHA COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(116) LAUREN ELISE CHAPPLE COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(117) LAWRENCE B. BEER COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(118) LINDA A. REDDY COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(119) LINDA C. HATZENBUEHLER COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(120) LINDA M. WOOLF COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(121) LISA ANN FERDINAND COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(122) LISA S. LOMBARD COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(123) LORI JANE BUTTS COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(124) LUCINDA L. DEGRANGE COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(125) LYNN H. COLLINS COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(126) MAGGIE LEE SYME COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(127) MARGARET BULL KOVERA COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0
(128) MARK A. MCDANIEL COUNCIL OF REPRESENTATIVES	1.0 0.0	✓						0	0	0

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (Check all that apply)						(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			
(129) MARK A. STAAL ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(130) MARK SIRKIN ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(131) MARY ELIZABETH PAYNE ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(132) MARY LOUISE CASHEL ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(133) MARY MORRISSEY ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(134) MARY P. DONAHUE ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(135) MELANIE M. VANDYKE ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(136) MELISSA SMITH ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(137) MERRY BULLOCK ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(138) MICHAEL E. LAMB ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(139) MICHELE C. MCKINNIE ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(140) MICHELE DENISE RIBEIRO ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(141) MICHU FU ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(142) MILO DODSON ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(143) MILTON A. FUENTES ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(144) MIRA CHARLOTTE JOURDAN, PH.D. ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(145) NANCY A. PIOTROWSKI ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(146) NANCY M. SIDUN ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(147) NATALIE WHITE GAUGHF ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(148) NNAMDI POLE, PH.D. ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0
(149) OLIVIA D. MOOREHEAD-SLAUGHTER ----- COUNCIL OF REPRESENTATIVES	1.0 ----- 0.0	✓						0	0	0

[illegible]

[illegible]

[illegible]

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public
Inspection

Name of the organization

AMERICAN PSYCHOLOGICAL ASSOCIATION

Employer identification number

53-0205890

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

The organization is not a private foundation because it is: (For lines 1 through 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).)
- 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)(vii)**. (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 33¹/₃% 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 33¹/₃% 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 on 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		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 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 2024 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	%
16a 33¹/₃% support test—2024. 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 33¹/₃% support test—2023. 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—2024. 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—2023. 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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,230,914	3,640,512	4,611,160	4,943,166	5,004,315	20,430,067
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	123,457,517	122,037,889	121,415,702	123,105,862	128,944,386	618,961,356
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	125,688,431	125,678,401	126,026,862	128,049,028	133,948,701	639,391,423
7a Amounts included on lines 1, 2, and 3 received from disqualified persons . .	0	0	0	0	0	0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support. (Subtract line 7c from line 6.)						639,391,423

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6	125,688,431	125,678,401	126,026,862	128,049,028	133,948,701	639,391,423
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	27,317,226	27,046,425	27,429,899	28,303,377	29,366,266	139,463,193
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	1,378,676	1,279,650	750,950	658,808	726,719	4,794,803
c Add lines 10a and 10b	28,695,902	28,326,075	28,180,849	28,962,185	30,092,985	144,257,996
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	(5,063,383)	250,977	456,297	1,213,120	1,584,537	(1,558,452)
13 Total support. (Add lines 9, 10c, 11, and 12.)	149,320,950	154,255,453	154,664,008	158,224,333	165,626,223	782,090,967
14 First 5 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

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	81.75 %
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	81.38 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	18.00 %
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	18.85 %
19a 33¹/₃% support tests—2024. 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 33¹/₃% support tests—2023. 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 box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 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 Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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 Part VI when and how the organization made the determination.</i>		
c 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 Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
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 Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 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 Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on 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 Part VI.</i>		
10a 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 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>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (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?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
2a			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

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 (*explain in Part VI*). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required— <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020 . . .			
b Excess from 2021 . . .			
c Excess from 2022 . . .			
d Excess from 2023 . . .			
e Excess from 2024 . . .			

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.)

Part VI

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.)

Return Reference - Identifier	Explanation						
SCHEDULE A, PART III, LINE 12 - OTHER INCOME	Other Income Type	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	(1) OTHER INCOME	672,363	250,977	456,297	1,213,120	1,584,537	4,177,294
	(2) EXTINGUISHMENT OF DEBT	(5,735,746)	0	0	0	0	(5,735,746)

Schedule B
(Form 990)

(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

AMERICAN PSYCHOLOGICAL ASSOCIATION

Employer identification number

53-0205890

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 $\frac{1}{3}$ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization AMERICAN PSYCHOLOGICAL ASSOCIATION	Employer identification number 53-0205890
---	---

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	----- ----- -----	\$ <u>4,396,833</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
<u>2</u>	----- ----- -----	\$ <u>393,202</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
<u>3</u>	----- ----- -----	\$ <u>109,663</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
<u>4</u>	----- ----- -----	\$ <u>49,258</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization AMERICAN PSYCHOLOGICAL ASSOCIATION	Employer identification number 53-0205890
---	---

Part II

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----

Name of organization AMERICAN PSYCHOLOGICAL ASSOCIATION	Employer identification number 53-0205890
---	---

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

----- ----- -----	----- ----- -----
-------------------------	-------------------------

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

----- ----- -----	----- ----- -----
-------------------------	-------------------------

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

----- ----- -----	----- ----- -----
-------------------------	-------------------------

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

----- ----- -----	----- ----- -----
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SCHEDULE C
(Form 990)

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.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

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 I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-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 organization AMERICAN PSYCHOLOGICAL ASSOCIATION	Employer identification number (EIN) 53-0205890
---	---

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

- Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."
- Political campaign activity expenditures. See instructions \$
- Volunteer hours for political campaign activities. See instructions

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

- Enter the amount of any excise tax incurred by the organization under section 4955 \$
- Enter the amount of any excise tax incurred by organization managers under section 4955 \$
- If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ 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).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities \$
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$
- Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$
- Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- Enter the names, addresses, and EINs 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-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures	145,351,044													
e	Total exempt purpose expenditures (add lines 1c and 1d)	145,351,044													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000													
<table border="1"> <thead> <tr> <th>IF the amount on line 1e, column (a) or (b) is:</th> <th>THEN 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:	THEN 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:	THEN the lobbying nontaxable amount is:														
not over \$500,000	20% of the amount on line 1e.														
over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	☐ Yes ☐ No													

4-Year Averaging Period Under Section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount			1,000,000	1,000,000	2,000,000
b Lobbying ceiling amount (150% of line 2a, column (e))					3,000,000
c Total lobbying expenditures					0
d Grassroots nontaxable amount			250,000	250,000	500,000
e Grassroots ceiling amount (150% of line 2d, column (e))					750,000
f Grassroots lobbying expenditures					0

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

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

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

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

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

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

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

Part IV Supplemental Information

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

SCHEDULE D
(Form 990)

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

AMERICAN PSYCHOLOGICAL ASSOCIATION

Employer identification number

53-0205890

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

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

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

Part II Conservation Easements

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

1 Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area ☐ Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, 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?	☐ Yes ☐ No
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 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	☐ Yes ☐ No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

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

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

1a If the organization elected, as permitted under FASB 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 FASB 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 FASB ASC 958 relating to these items.	
a Revenue included on Form 990, Part VIII, line 1	\$
b Assets included in Form 990, Part X	\$

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

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

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other

c ☐ Preservation for future generations

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.

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

a Board designated or quasi-endowment

b Permanent endowment

c Term 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? ☐ Yes ☐ No

(ii) Related organizations? ☐ Yes ☐ No

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐ 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	3,108,587	6,596,734		9,705,321
b Buildings	55,427,405	91,015,004	103,694,533	42,747,876
c Leasehold improvements		4,045,259	2,619,659	1,425,600
d Equipment		31,035,568	26,362,103	4,673,465
e Other		5,987,639	5,817,213	170,426
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				58,722,688

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, line 12, col. (B)) . . .		

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, line 13, col. (B)) . . .		

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) RESTRICTED CASH	17,752,281
(2) RENT ABATEMENTS	13,474,916
(3) OTHER ASSETS	4,948,220
(4) DEFERRED LEASING	3,730,672
(5) DEPOSITS AND ADVANCES	115,434
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	40,021,523

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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED COMPENSATION	7,218,132
(3) DEFERRED FINANCING COST	(1,612,911)
(4) INTERCOMPANY ACCOUNTS	(612,299)
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	4,992,922

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 FASB 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.

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

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

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

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

Part XIII Supplemental Information

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.

[SEE STATEMENT](#)

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 - Identifier	Explanation
SCHEDULE D, PART IV, LINE 2B - EXPLANATION OF ESCROW AGREEMENT	APA IS AFFILIATED WITH 54 DIVISIONS THAT REPRESENT MAJOR SCIENTIFIC AND PROFESSIONAL INTERESTS. THE DIVISIONS OPERATE INDEPENDENTLY FROM APA. UPON REQUEST, APA WILL ACT AS A COLLECTION AGENT FOR DUES AND ASSESSMENTS PAID BY THE DIVISIONS' MEMBERS. AMOUNTS COLLECTED AND HELD BY APA ON BEHALF OF THE DIVISIONS ARE INCLUDED IN CURRENT ASSETS AND CURRENT LIABILITIES IN THE ACCOMPANYING CONSOLIDATED STATEMENTS OF FINANCIAL POSITION. CASH AND CASH EQUIVALENTS AND INVESTMENTS HELD ON BEHALF OF THE DIVISIONS TOTALED \$16,515,130 AND \$16,188,228 AS OF DECEMBER 31, 2024 AND 2023, RESPECTIVELY.
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	APA RECOGNIZES TAX LIABILITIES WHEN MANAGEMENT'S BELIEF THAT TAX RETURN POSITIONS ARE SUPPORTABLE. APA BELIEVES THAT CERTAIN POSITIONS MAY NOT BE FULLY SUSTAINED UPON REVIEW BY TAX AUTHORITIES. BENEFITS FROM TAX POSITIONS ARE MEASURED AT THE LARGEST AMOUNT OF BENEFIT THAT IS GREATER THAN 50% LIKELY OF BEING REALIZED UPON SETTLEMENT. TO THE EXTENT THAT THE FINAL TAX OUTCOME OF THESE MATTERS IS DIFFERENT THAN THE AMOUNTS RECORDED, SUCH DIFFERENCES IMPACT INCOME TAX EXPENSE IN THE PERIOD IN WHICH SUCH DETERMINATION IS MADE. INTEREST AND PENALTIES, IF ANY, RELATED TO ACCRUED LIABILITIES FOR POTENTIAL TAX ASSESSMENTS ARE INCLUDED IN INCOME TAX EXPENSE. APA IS GENERALLY NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS ENDED DECEMBER 31, 2020 AND PRIOR. MANAGEMENT HAS EVALUATED APA'S TAX POSITIONS AND HAS CONCLUDED THAT APA HAS TAKEN NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE.

SCHEDULE F
(Form 990)

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION

Employer identification number
53-0205890

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTMAKING		10,000
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	0	0			10,000
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			10,000

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			CENTRAL AMERICA AND THE CARIBBEAN	SPONSORSHIP	10,000	WIRE			
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **0**

3 Enter total number of other organizations or entities **1**

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ☐ Yes ☒ No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes ☒ No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* ☐ Yes ☒ No

Part V

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Return Reference - Identifier	Explanation
SCHEDULE F, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS	INDIVIDUALS AND/OR ORGANIZATIONS RECEIVING DISBURSEMENTS FROM THE ORGANIZATION IN FURTHERANCE OF ITS EXEMPT PROGRAMS ARE ADEQUATELY INVESTIGATED TO ENSURE THAT THEY ARE QUALIFYING RECIPIENTS. PROCEDURES ARE FOLLOWED TO CONFIRM THAT DISCRIMINATION DOES NOT FACTOR IN ASSIGNING GRANTS.
SCHEDULE F, PART I, LINE 3 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN - ACCRUAL
SCHEDULE F, PART II, LINE 1 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN - ACCRUAL

SCHEDULE I
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN PSYCHOLOGICAL ASSOCIATION

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Employer identification number

53-0205890

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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CONSUMER TECHNOLOGY ASSOCIATION 1919 SOUTH EADS STREET, ARLINGTON, VA 22202	54-1963355	501(C)(6)	120,000				CONFERENCE SPONSORSHIP
(2) TIDES FOUNDATION P.O. BOX 889389, LOS ANGELES, CA 90088	51-0198509	501(C)(3)	100,000				DONATION
(3) NATIONAL ACADEMY OF SCIENCES 500 5TH STREET, NW, WASHINGTON, DC 20001	53-0196932	501(C)(3)	100,000				CONFERENCE SPONSORSHIP
(4) INTERNATIONAL BRAIN BEE 1121 14TH STREET, NW, WASHINGTON, DC 20005	82-4069083	501(C)(3)	25,000				CONFERENCE SPONSORSHIP
(5) OREGON STATE UNIVERSITY PO BOX 1086, CORVALLIS, OR 97339	48-1278540	501(C)(3)	22,567				CONFERENCE SPONSORSHIP
(6) DUWAMISH TRIBAL SERVICES 4705 W MARGINAL WAY SW, SEATTLE, WA 98106	91-1122115	501(C)(3)	10,000				DONATION
(7) DREXEL UNIVERSITY 3201 ARCH STREET, PHILADELPHIA, PA 19104	23-1352630	501(C)(3)	10,000				DONATION
(8) UNIVERSITY OF SOUTH ALABAMA 307 UNIVERSITY BLVD N., MOBILE, AL 36688	63-0477348	501(C)(3)	10,000				DONATION
(9) CAPITAL AREA FOOD BANK 4900 PUERTO RICO AVE., WASHINGTON, DC 20017	52-1167581	501(C)(3)	7,500				DONATION
(10)							
(11)							
(12)							

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	8
3	Enter total number of other organizations listed in the line 1 table	1

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

Cat. No. 50055P

Schedule I (Form 990) (Rev. 12-2024)

Part III

Grants and Other Assistance to Individuals in the United States (continued)

(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, FIV, appraisal, other)	(f) Description of non-cash assistance
(7) CECF CONVENTION GRANT	20	7,600			
(8) APAGS LEADER TRAVEL AWARD	15	7,500			
(9) ACHIEVEMENT AWARD	3	6,000			
(10) DISTINGUISHED CONTRIBUTION AWARD	6	6,000			

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

Return Reference - Identifier	Explanation
SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS	INDIVIDUALS AND/OR ORGANIZATIONS RECEIVING DISBURSEMENTS FROM THE ORGANIZATION IN FURTHERANCE OF ITS EXEMPT PROGRAMS ARE ADEQUATELY INVESTIGATED TO ENSURE THAT THEY ARE QUALIFYING RECIPIENTS. PROCEDURES ARE FOLLOWED TO CONFIRM THAT DISCRIMINATION DOES NOT FACTOR IN ASSIGNING GRANTS.

**SCHEDULE J
(Form 990)**

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

AMERICAN PSYCHOLOGICAL ASSOCIATION

Employer identification number

53-0205890

Part I Questions Regarding Compensation

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

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	ARTHUR C. EVANS	(i) 853,184	35,345	28,639	237,378	28,321	1,182,867	0
	CEO	(ii) 0	0	0	0	0	0	0
2	JAIME L. DIAZ-GRANADOS	(i) 646,754	67,481	295,982	76,935	28,086	1,115,238	0
	DEPUTY CEO	(ii) 0	0	0	0	0	0	0
3	DEANNE M. OTTAVIANO	(i) 608,114	0	26,010	237,000	50,631	921,755	0
	GENERAL COUNSEL	(ii) 0	0	0	0	0	0	0
4	IAN D. KING	(i) 437,031	0	21,681	276,502	48,405	783,619	0
	CHIEF OF STRATEGIC IMPLEMENTATION AND MEMBERSHIP	(ii) 0	0	0	0	0	0	0
5	JASPER SIMONS	(i) 438,968	50,395	1,049	230,679	47,722	768,813	0
	CHIEF PUBLISHING OFFICER	(ii) 0	0	0	0	0	0	0
6	TONY HABASH	(i) 515,740	0	24,961	159,750	45,029	745,480	0
	CHIEF INFORMATION OFFICER	(ii) 0	0	0	0	0	0	0
7	ALICIA C. AEBERSOLD	(i) 398,603	0	24,961	91,899	34,113	549,576	0
	CHIEF COMMUNICATIONS OFFICER	(ii) 0	0	0	0	0	0	0
8	MICHELLE ASLAN	(i) 333,518	0	24,858	82,775	32,347	473,498	0
	CFO	(ii) 0	0	0	0	0	0	0
9	MAYSА AKBAR	(i) 379,044	0	24,049	20,700	27,579	451,372	0
	CHIEF DIVERSITY OFFICER	(ii) 0	0	0	0	0	0	0
10	MITCHELL J. PRINSTEIN	(i) 383,556	0	1,049	20,700	6,860	412,165	0
	CHIEF OF PSYCHOLOGY STRATEGY AND INTEGRATION	(ii) 0	0	0	0	0	0	0
11	CATHERINE L. GRUS	(i) 340,498	0	1,806	20,673	21,794	384,771	0
	CHIEF EDUCATION OFFICER	(ii) 0	0	0	0	0	0	0
12	JARED L. SKILLINGS	(i) 268,208	0	69,398	16,559	26,745	380,910	0
	CHIEF OF PROFESSIONAL PRACTICE	(ii) 0	0	0	0	0	0	0
13								
14								
15								
16								

Part III

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

Return Reference - Identifier	Explanation
SCHEDULE J, PART I, LINE 4B - SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	APA PROVIDES AN EXECUTIVE SUPPLEMENTAL COMPENSATION AND TRANSITIONAL BENEFIT ALLOWANCE TO ELIGIBLE EMPLOYEES. JAIME L. GRANADOS-DIAZ \$272,983 JARED L. SKILLINGS \$68,793
SCHEDULE J, PART II, COLUMN (B)(II)	THE BONUS AND INCENTIVE COMPENSATION THAT IS REFLECTED IN SCHEDULE J, PART II, SECTION B(II) CONSIST OF PERFORMANCE BONUSES, INCENTIVE COMPENSATION, AND COMMISSIONS.

Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION	Employer identification number 53-0205890
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Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION	AMERICAN PSYCHOLOGICAL ASSOCIATION IS A NATIONAL MEMBERSHIP ORGANIZATION CREATED TO PROMOTE THE ADVANCEMENT, COMMUNICATION, AND APPLICATION OF PSYCHOLOGICAL SCIENCE AND KNOWLEDGE TO BENEFIT SOCIETY AND IMPROVE LIVES. APA FULFILLS THESE OBJECTIVES BY UTILIZING PSYCHOLOGY TO MAKE A POSITIVE IMPACT ON CRITICAL SOCIETAL ISSUES, ELEVATING THE PUBLIC'S UNDERSTANDING OF, REGARD FOR, AND USE OF PSYCHOLOGY, PREPARING THE DISCIPLINE AND PROFESSION OF PSYCHOLOGY FOR THE FUTURE, AND STRENGTHENING APA'S STANDING AS AN AUTHORITATIVE VOICE FOR PSYCHOLOGY.

**SCHEDULE O
(Form 990)**

(Rev. January 2025)

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 Form 990-EZ.****Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

AMERICAN PSYCHOLOGICAL ASSOCIATION

Employer identification number

53-0205890

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 4A - PROGRAM SERVICE DESCRIPTION	PUBLISHING OFFICE IN 2024, THE APA JOURNALS PROGRAM PUBLISHED MORE THAN 63,480 PAGES OF CONTENT REPRESENTING MORE THAN 5,190 ARTICLES IN 515 JOURNAL ISSUES. DURING 2024, APA JOURNALS SIGNED TWO NEW JOURNALS TO ITS PORTFOLIO. STARTING IN 2025, APA WILL PUBLISH JOURNAL OF PEDIATRIC NEUROPSYCHOLOGY IN COLLABORATION WITH THE AMERICAN ACADEMY OF PEDIATRIC NEUROPSYCHOLOGY. STARTING IN 2026, APA WILL PUBLISH THE NEW EDUCATIONAL PSYCHOLOGY FOR POLICY AND PRACTICE IN COLLABORATION WITH DIVISION 15, EDUCATIONAL PSYCHOLOGY. BY THE END OF 2024, PSYCARICLES, THE ELECTRONIC DATABASE PRODUCT CONTAINING FULL-TEXT JOURNAL CONTENT, CONTAINED OVER 244,386 ARTICLE RECORDS, DATING BACK TO 1894. MORE THAN 208,370 RECORDS WERE RELEASED INTO THE PSYCINFO DATABASE IN 2024, BRINGING THE TOTAL NUMBER OF RECORDS IN THE DATABASE TO MORE THAN 5.6 MILLION, AND THE TOTAL NUMBER OF CITED REFERENCES IN THE DATABASE TO ALMOST 165 MILLION. PSYCINFO ALSO INCLUDES THE METADATA RECORDS FOR THE PSYCARICLES AND PSYCBOOKS DATABASES. THE NUMBER OF JOURNALS COVERED BY PSYCINFO AT THE END OF 2024 WAS 2,351 - 54 NEW JOURNALS WERE ADDED, AND 42 JOURNALS WERE DROPPED PRIMARILY DUE TO PROBLEMS RECEIVING THE JOURNAL OR TO JOURNAL'S CEASING PUBLICATION. PSYCTESTS, THE RESEARCH DATABASE ON PSYCHOLOGICAL TESTS, MEASURES, SCALES, SURVEYS, AND OTHER ASSESSMENTS, GREW BY 33,355 NEW RECORDS TOTALING MORE THAN 74,862 RECORDS AT THE END OF 2024. IN 2024, PSYCNET, THE DELIVERY PLATFORM FOR APA'S SCHOLARLY CONTENT, HOSTED MORE THAN 2.5 MILLION USER SESSIONS, WITH MORE THAN 72 MILLION REQUESTS FOR APA JOURNAL ARTICLES, BOOKS & CHAPTERS RESOLVED TO PSYCNET IN THE PAST YEAR FROM LINKS FOLLOWED BY RESEARCHERS, STUDENTS, CLINICIANS, AND GENERAL PUBLIC ON GOOGLE SCHOLAR, PUBMED, RESEARCHGATE, SOCIAL MEDIA, AND VARIOUS DISCOVERY SERVICES. DURING 2024, APA PUBLISHED 46 SCHOLARLY AND TRADE TITLES, ONE THREE-VOLUME REFERENCE HANDBOOK (APA HANDBOOK OF HEALTH PSYCHOLOGY) AND 20 MAGINATION PRESS (APA'S CHILDREN'S BOOK IMPRINT) TITLES. IN ADDITION, APA BOOKS RELEASED TITLES TO PROQUEST EBOOK CENTRAL, EBSCO, OVERDRIVE, REDSHELF, AND VITALSOURCE, JSTOR, AND AMAZON KINDLE. MAGINATION PRESS BOOKS ARE FOUND ON ONLINE READING PLATFORM EPIC! (129 DIGITAL BOOKS), AS EBOOKS ON AMAZON KINDLE AND AVAILABLE AS DIGITAL COPIES ON VARIOUS ONLINE BOOKSHOPS AND LIBRARY PLATFORMS SUCH AS OVERDRIVE, B&N, OR BOOKSHOP.ORG (233 BOOKS). IN 2024, MAGINATION PRESS RELAUNCHED THE BESTSELLING WHAT TO DO SERIES -- TWO BOOKS FROM THE ORIGINAL FIVE PUBLISHED IN 2005 (WHAT TO DO WHEN YOU WORRY TOO MUCH AND WHAT TO DO WHEN YOUR TEMPER FLARES), TWO POPULAR BOOKS FROM THE PAST FEW YEARS (WHAT TO DO WHEN MISTAKES MAKE YOU QUAKE AND WHAT TO DO WHEN THE NEWS SCARES YOU), PLUS TWO BRAND NEW BOOKS (WHAT TO DO WHEN YOU PANIC AND WHAT TO DO WHEN CLIMATE CHANGE SCARES YOU). AS OF DECEMBER 2024, MORE THAN 2 MILLION COPIES OF THE 7TH EDITION OF THE PUBLICATION MANUAL HAVE BEEN SOLD, INCLUSIVE OF ALL EBOOK AND PRINT FORMATS. THE APA STYLE TEAM ALSO RELEASED ELECTRONIC VERSIONS OF THE PUBLICATION MANUAL AND THE CONCISE GUIDE TO APA STYLE ON BOOKSHARE THAT WERE OPTIMIZED FOR ACCESSIBILITY TO PROVIDE PEOPLE WITH PRINT DISABILITIES GLOBAL EQUITABLE ACCESS TO THESE RESOURCES. APA RELEASED 10 INDIVIDUAL VIDEO TITLES IN BOTH DVD AND IN STREAMING FORMAT (THROUGH OUR DISTRIBUTORS), AND ADDED 23 VIDEOS TO APA PSYCTHERAPY, APA'S DATABASE OF STREAMING PSYCHOTHERAPY VIDEOS. AT THE END OF 2024, THE PSYCBOOKS DATABASE CONTAINED 74,862 BOOK AND CHAPTER RECORDS. ACADEMIC WRITER INSTITUTIONAL LICENSES ARE ACTIVELY BEING SOLD BOTH IN THE U.S. AND INTERNATIONALLY, AND NEW FEATURES RELEASED OVER THE PAST YEAR CATERED TO THIS MARKET. FOR EXAMPLE, QUIZZES WERE ADDED TO ALL QUICK GUIDES AND TUTORIALS. CERTIFICATES OF COMPLETION WERE ALSO LAUNCHED, ALLOWING STUDENTS TO TRACK THEIR LESSON PROGRESS AND SHARE IT WITH INSTRUCTORS. PSYCLEARN PLUS IS AN ONLINE DELIVERY PLATFORM FOR COURSE MATERIALS IN UNDERGRADUATE PSYCHOLOGY. IT EMPLOYS EVIDENCE-BASED LEARNING SCIENCE PRINCIPLES TO MAKE CHALLENGING CONCEPTS MORE ENGAGING AND APPROACHABLE, HELPING STUDENTS DEEPEN THEIR UNDERSTANDING OF COURSE MATERIAL AND BUILD LEARNING SKILLS. IN THE FALL OF 2024 APA PUBLISHING BEGAN TRANSITIONING FROM THE COGBOOKS PLATFORM AND ENTERED INTO AN AGREEMENT WITH VITALSOURCE TO SUPPORT THE PSYCLEARN PRODUCTS ON THEIR ACROBATIQ PLATFORM. THE GOAL IS TO RELEASE THE FOUR PSYCLEARN PRODUCTS (RESEARCH METHODS, STATISTICS FOR THE BEHAVIORAL SCIENCES, INTRODUCTION TO SOCIAL PSYCHOLOGY, AND A COMBINED APPROACH TO RESEARCH METHODS AND STATISTICS) BY

Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION	Employer identification number 53-0205890
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Return Reference - Identifier	Explanation
	SUMMER 2025 APA PUBLISHING MAINTAINS AN AGREEMENT WITH CAMBRIDGE UNIVERSITY PRESS & ASSESSMENT (CUPA) TO MARKET AND SELL PSYCLEARN GLOBALLY. PSYCLEARN ESSENTIALS PIVOTED TO RELEASING SHORT COURSES FOR THE GLOBAL UPSKILLING MARKET ON MOOC PLATFORMS. IN 2024, APA RELEASED 7 SPECIALIZATIONS IN COURSERA CONSISTING OF 3-4 COURSES PER SPECIALIZATION TOTALING 22 COURSES AND 3 PROGRAMS IN EDX TOTALING 8 COURSES.
FORM 990, PART III, LINE 4D - DESCRIPTION OF OTHER PROGRAM SERVICES	(EXPENSES \$40,814,627 INCLUDING GRANTS OF \$3,476,802)(REVENUE \$1,730,808) PRACTICE DIRECTORATE THE APA PRACTICE DIRECTORATE PROMOTES THE PRACTICE OF PSYCHOLOGY AND ADVOCATES TO INCREASE PUBLIC ACCESS TO HIGH-QUALITY, EVIDENCE-BASED, AND INNOVATIVE PSYCHOLOGICAL SERVICES. WE EQUIP PSYCHOLOGISTS TO BE LEADERS AND SPECIALISTS IN MENTAL AND BEHAVIORAL HEALTH CARE TO IMPROVE POPULATION HEALTH AND DECREASE HEALTH DISPARITIES. WE SUPPORT AND PARTNER WITH NUMEROUS APA BOARDS, COMMITTEES, AND WORKGROUPS WHOSE EFFORTS BENEFIT PSYCHOLOGY, PSYCHOLOGISTS, AND THE PUBLIC. THIS PROGRAM IS FOR THE EXECUTIVE OFFICE OF THE CHIEF OF PROFESSIONAL PRACTICE AND DEPUTY CHIEF OF PROFESSIONAL PRACTICE, OFFICE OF INDEPENDENT PRACTICE, AND RELATED ACTIVITIES AND STAFF. COMMUNICATIONS APA COMMUNICATIONS OVERSEES THE ASSOCIATION'S BRAND, CONTENT, AND MESSAGING, SERVING AS THE PRIMARY POINT OF CONTACT FOR MEDIA AND THE PUBLIC. COMMUNICATIONS PROMOTES THE ADVANCEMENT AND APPLICATION OF PSYCHOLOGICAL SCIENCE TO BENEFIT SOCIETY AND IMPROVE LIVES. WORKING CLOSELY WITH THE CEO AND ALL APA OFFICES, APA COMMUNICATIONS CRAFTS AND DISSEMINATES CONTENT FOR PSYCHOLOGISTS, MEDIA, AND THE GENERAL PUBLIC. PRODUCTS INCLUDE NEWS AND FEATURE CONTENT, SOCIAL MEDIA, WEBSITES, VIDEOS, PODCASTS, AND ADVERTISING. IN 2024, APA'S DIGITAL FOOTPRINT EXPANDED SIGNIFICANTLY. THE MAIN APA WEBSITE (WWW.APA.ORG) DREW 2.8 MILLION MONTHLY VISITORS, WHILE ALL APA AFFILIATED WEBSITES DREW A TOTAL OF 3.3 MILLION VISITORS MONTHLY. SOCIAL MEDIA FOLLOWERSHIP INCREASED TO 2.2 MILLION. NOTABLY, APA RESOURCES CLAIMED THE TOP UNPAID GOOGLE SEARCH POSITION FOR OVER 16,000 PSYCHOLOGY-RELATED KEYWORDS. APA'S AWARD-WINNING MONITOR ON PSYCHOLOGY MAGAZINE REACHED A COMBINED 200,000 READERS VIA PRINT (70K) AND DIGITAL (130K). AND APA GARNERED MORE THAN 53,000 MEDIA MENTIONS AND SPEAKING OF PSYCHOLOGY PODCAST EPISODES WERE DOWNLOADED OR STREAMED MORE THAN 3.5 MILLION TIMES IN 2024. APA COMMUNICATIONS ALSO MANAGES THE ASSOCIATION'S ANNUAL CONVENTION, ATTRACTING AROUND 9,000 ATTENDEES, AND OVERSEES INTERNAL COMMUNICATIONS AND STAFF ENGAGEMENT INITIATIVES. THROUGH THESE DIVERSE CHANNELS, COMMUNICATIONS CONTINUES TO EXPAND THE REACH AND IMPACT OF PSYCHOLOGICAL KNOWLEDGE. SCIENCE IN 2024 THE DIRECTORATE ISSUED ITS BIWEEKLY NEWSLETTER THAT PROVIDES PSYCHOLOGICAL SCIENTISTS WITH THE MOST RELEVANT NEWS AND INFORMATION TO HELP THEM WITH RESEARCH; AND ITS BIWEEKLY NEWSLETTER THAT HIGHLIGHTS APA JOURNAL ARTICLES SELECTED AS NOTEWORTHY AND IMPACTFUL FOR THE FIELD BY APA JOURNAL EDITORS. THE DIRECTORATE CONTINUED TO HOST ITS WEBINAR SERIES TO HIGHLIGHT CONVERSATIONS AMONG SCIENTISTS ON IMPORTANT ISSUES IN THE FIELD (8 WEBINARS REACHING MORE THAN 7,000 REGISTRANTS) AND HOSTED 10 FREE SCIENCE TRAINING SESSIONS (REACHING MORE THAN 15,000 REGISTRANTS) FOCUSED ON RESEARCH METHODS AND ANALYSIS. THE DIRECTORATE AWARDED RESEARCH GRANTS TO GRADUATE STUDENTS AND CONTINUED A SUMMER RESEARCH FELLOWSHIPS FOR COLLEGE STUDENTS. IN ADDITION, THE DIRECTORATE HOSTED A STUDENT AWARD WINNERS POSTER SHOWCASE AT THE ANNUAL CONVENTION. THE DIRECTORATE COMPLETED AND DISSEMINATED A CAREER GUIDE, PUBLISHED A NEW WEBPAGE ON BECOMING AND BEING A PSYCHOLOGICAL SCIENTIST, EXECUTED AND PROMOTED THE 2024 WORK IN AMERICA SURVEY, AND HOSTED ITS PROGRAM OF SCIENCE SUMMITS AT THE APA ANNUAL CONVENTION TO HIGHLIGHT SCIENCE IN KEY AREAS IMPACTING SOCIETY. THE DIRECTORATE ORGANIZED AND SUPPORTED THE WORK TO PRODUCE THE APA HEALTH ADVISORY ON THE SCIENCE BEHIND HOW SOCIAL MEDIA AFFECTS YOUTH.

**SCHEDULE O
(Form 990)**

(Rev. January 2025)

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 Form 990-EZ.****Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

AMERICAN PSYCHOLOGICAL ASSOCIATION

Employer identification number

53-0205890

Return Reference - Identifier	Explanation
FORM 990, PART VI, LINE 1A - VOTING MEMBERS	THE APA IS GOVERNED BY A COUNCIL OF REPRESENTATIVES COMPRISED OF 180 MEMBERS WHICH MEETS TWICE A YEAR, AND ITS SMALLER BOARD OF DIRECTORS WHICH IS COMPRISED OF THE PRESIDENT, THE PRESIDENT-ELECT, THE PAST PRESIDENT, THE RECORDING SECRETARY, AND THE TREASURER (BOARD LEADERS); THE CHIEF EXECUTIVE OFFICER (WITHOUT VOTE); THE APAGS PAST CHAIR OR OTHER DESIGNEE FROM THE APAGS EXECUTIVE COMMITTEE; THE CHAIR AND CHAIR-ELECT OF ANY LEADERSHIP GROUP ELECTED BY COUNCIL; AND SIX MEMBERS-AT-LARGE. THE PRESIDENT AND MEMBERS-AT-LARGE OF THE BOARD OF DIRECTORS ARE MEMBERS OF THE ASSOCIATION ELECTED BY A PREFERENTIAL BALLOT BY THE VOTING MEMBERS OF THE ASSOCIATION; THE RECORDING SECRETARY AND TREASURER ARE ELECTED BY A PREFERENTIAL BALLOT BY THE VOTING MEMBERS OF COUNCIL. ALL MEMBERS OF THE BOARD OF DIRECTORS ARE ALSO MEMBERS OF THE COUNCIL OF REPRESENTATIVES. THE BOARD OF DIRECTORS MEETS IN PERSON APPROXIMATELY FOUR TIMES A YEAR, IN ADDITION TO BI-MONTHLY MEETINGS BY VIDEO. ALL VOTING BOARD MEMBERS ARE INDEPENDENT EXCEPT TWO. THE BOARD OF DIRECTORS IS THE ADMINISTRATIVE AGENT OF COUNCIL, SUPERVISES THE WORK OF THE CHIEF EXECUTIVE OFFICER OF THE ASSOCIATION, AND EXERCISES GENERAL SUPERVISION OVER THE AFFAIRS OF THE ASSOCIATION. IN THE INTERVAL BETWEEN THE ANNUAL MEETINGS OF THE COUNCIL, THE BOARD OF DIRECTORS HAS AUTHORITY TO TAKE SUCH ACTIONS AS ARE NECESSARY FOR THE CONDUCT OF THE ASSOCIATION'S AFFAIRS IN ACCORDANCE WITH THE BYLAWS AND THE POLICIES OF COUNCIL. IF AN EMERGENCY IS DECLARED BY A MAJORITY OF THE BOARD OF DIRECTORS, THE BOARD HAS THE POWER TO TAKE ACTIONS AS THOUGH SUCH ACTIONS WERE TAKEN BY THE COUNCIL.
FORM 990, PART VI, LINE 2 - FAMILY/BUSINESS RELATIONSHIPS AMONGST INTERESTED PERSONS	AS AN ASSOCIATION OF PSYCHOLOGISTS, OUR MEMBERS ROUTINELY DO BUSINESS WITH EACH OTHER, INCLUDING COUNCIL MEMBERS DOING BUSINESS WITH EACH OTHER. EXISTING PROCEDURES REGARDING CONFLICTS OF INTERESTS GOVERN THESE ISSUES. COUNCIL MEMBERS ARE EDUCATED ABOUT HOW TO IDENTIFY AND MANAGE CONFLICTS OF INTEREST. SEE NEXT PAGE FOR DESCRIPTION OF CONFLICT OF INTEREST POLICY. - BUSINESS RELATIONSHIP
FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS	THE APA IS A MEMBERSHIP ORGANIZATION WHOSE MEMBERS ELECT THE GOVERNING BODY AND APPROVE CHANGES TO THE BYLAWS.
FORM 990, PART VI, LINE 7A - MEMBERS OR STOCKHOLDERS ELECTING MEMBERS OF GOVERNING BODY	THE APA IS A MEMBERSHIP ORGANIZATION WHOSE MEMBERS ELECT THE GOVERNING BODY AND APPROVE CHANGES TO THE BYLAWS.
FORM 990, PART VI, LINE 7B - DECISIONS REQUIRING APPROVAL BY MEMBERS OR STOCKHOLDERS	THE APA IS A MEMBERSHIP ORGANIZATION WHOSE MEMBERS ELECT THE GOVERNING BODY AND APPROVE CHANGES TO THE BYLAWS.
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	THE APA AUDIT SUBCOMMITTEE PERFORMS A THOROUGH REVIEW OF A DRAFT OF THE IRS FORM 990, AS DOES MANAGEMENT. AFTER THEIR REVIEWS THE RETURN IS FINALIZED AND CIRCULATED, VIA E-MAIL, TO THE BOARD OF DIRECTORS AND COUNCIL OF REPRESENTATIVES BEFORE IT IS FILED WITH THE IRS.
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY GOVERNING ITS COUNCIL OF REPRESENTATIVES AND BOARD OF DIRECTORS. EACH YEAR NEW APA COUNCIL AND BOARD MEMBERS RECEIVE TRAINING FROM APA'S OFFICE OF GENERAL COUNSEL REGARDING APA'S CONFLICT OF INTEREST POLICY, HOW TO IDENTIFY A CONFLICT OF INTEREST AND HOW TO HANDLE POSSIBLE CONFLICTS OF INTEREST WHEN THEY ARISE. IN ADDITION EACH YEAR ALL GOVERNANCE MEMBERS RECEIVE AN EDUCATIVE SET OF MATERIALS REGARDING CONFLICTS OF INTEREST AND SELF EVALUATION WORKSHEETS TO TEST AWARENESS. EACH GOVERNANCE MEMBER IS REQUIRED TO COMPLETE A WRITTEN AFFIRMATION THAT THEY WILL ABIDE BY THE CONFLICT OF INTEREST POLICY AND TO DISCLOSE INTEREST OR RELATIONSHIPS THAT MAY POSE CONFLICTS. AT EACH MEETING OF THE COUNCIL, ALL MEMBERS ARE REMINDED THAT THEY ARE SUBJECT TO THE CONFLICT OF INTEREST POLICY, WHICH IS PRINTED IN THE ASSOCIATION RULES AND POSTED ON APA'S WEBSITE. ALL APA EMPLOYEES ARE REQUIRED TO SIGN A STAFF CONFLICT OF INTEREST CERTIFICATE ANNUALLY WHERE THEY DISCLOSE ANY POTENTIAL OR ACTUAL CONFLICTS FOR REVIEW AND APPROVAL OR DENIAL BY SENIOR MANAGEMENT IN CONSULTATION WITH THE OFFICE OF GENERAL COUNSEL.
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	THE APA IS GOVERNED BY A COUNCIL OF REPRESENTATIVES COMPRISED OF 180 VOTING MEMBERS THAT MEETS TWICE A YEAR, AND ITS SMALLER 16 MEMBER BOARD OF DIRECTORS. THE FULL BOARD SETS COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER (CEO) BASED ON, AMONG OTHER THINGS, COMPARABILITY DATA FROM AN INDEPENDENT COMPENSATION CONSULTANT, PERFORMANCE MEASURES, AND A REVIEW FOR REASONABLENESS.

**SCHEDULE O
(Form 990)**

(Rev. January 2025)

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 Form 990-EZ.****Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

AMERICAN PSYCHOLOGICAL ASSOCIATION

Employer identification number

53-0205890

Return Reference - Identifier	Explanation
FORM 990, PART VI, LINE 15B - PROCESS TO ESTABLISH COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES	THE APA IS GOVERNED BY A COUNCIL OF REPRESENTATIVES COMPRISED OF 180 VOTING MEMBERS THAT MEETS TWICE A YEAR, AND ITS SMALLER 16 MEMBER BOARD OF DIRECTORS. THE BOARD OF DIRECTORS SETS COMPENSATION FOR SENIOR MANAGEMENT UNDER A COMPENSATION POLICY. THE FULL BOARD SETS COMPENSATION FOR THE DEPUTY CEO (DCEO) AND THE CHIEF FINANCIAL OFFICER (CFO), BASED ON, AMONG OTHER THINGS, COMPARABILITY DATA FROM AN INDEPENDENT COMPENSATION CONSULTANT, PERFORMANCE MEASURES, AND A REVIEW FOR REASONABLENESS. FOR COMPENSATION OF ASSOCIATION SENIOR EXECUTIVES OTHER THAN THE DCEO AND CFO, THE CEO MAKES COMPENSATION RECOMMENDATIONS TO THE PERSONNEL AND COMPENSATION COMMITTEE (PCC) OF THE BOARD OF DIRECTORS BASED PRIMARILY ON PERFORMANCE AND COMPARABILITY DATA. IN ADDITION THE PCC REVIEWS, ON BEHALF OF THE BOARD, THE CONTRACT PERIOD AND COMPENSATION FOR ANY OTHER KEY EMPLOYEES OF THE ASSOCIATION AS DEFINED IN THE INSTRUCTIONS TO THE 990. CONFIDENTIAL CONTEMPORANEOUS MINUTES OF THE DELIBERATIONS AND DECISIONS OF THE BOARD AND PCC ARE SECURELY MAINTAINED. THE BOARD LEADERS RECEIVE HONORARIA FOR SERVICE ON THE BOARD. THESE HONORARIA ARE ESTABLISHED BY THE COUNCIL OF REPRESENTATIVES AND SET OUT IN THE COUNCIL OF REPRESENTATIVES "SELECTED SPENDING POLICY" GUIDELINES. THE BOARD OF DIRECTORS DOES NOT HAVE A ROLE IN REVIEWING, SETTING, OR RECOMMENDING THE AMOUNT OF ITS OWN HONORARIA. COUNCIL MEMBERS DO NOT RECEIVE HONORARIA.
FORM 990, PART VI, LINE 17 - STATES WITH WHICH A COPY OF THIS FORM 990 IS REQUIRED TO BE FILED	FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MS, NC, ND, NH, NJ, NM, NY, OR, PA, RI, SC, TN, UT, VA, WI, WV
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	THE BYLAWS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST AND ON APA'S WEBSITE.
FORM 990, PART VII, SECTION A - OFFICERS	THE PERSONS LISTED AS PRESIDENT, TREASURER, PAST PRESIDENT, PRESIDENT ELECT, AND RECORDING SECRETARY ARE MEMBERS OF THE BOARD OF DIRECTORS WHO HAVE LEADERSHIP ROLES WITH THE BOARD. THEY ARE NOT OFFICERS UNDER THE BYLAWS AND THEIR SERVICES TO APA ARE PROVIDED SOLELY AS PART OF THEIR BOARD LEADERSHIP RESPONSIBILITIES.
FORM 990, PART VII, SECTION A, LINE 1A, COLUMN (D) - REPORTABLE COMPENSATION FROM THE ORGANIZATION	AMOUNTS PAID TO BOARD MEMBERS ARE FOR HONORARIA ASSOCIATED WITH BOARD ROLES, EDITORIAL FEES AND OTHER HONORARIA.

SCHEDULE R
(Form 990)

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

AMERICAN PSYCHOLOGICAL ASSOCIATION

Employer identification number

53-0205890

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) APA 750 LLC 750 1ST STREET NE, WASHINGTON, DC 20002	REAL ESTATE RENTAL	DE	16,719,294	53,527,418	AMERICAN PSYCHOLOGICAL ASSOCIATION
(2) APA TEN G LLC (52-1890269) 750 1ST STREET NE, WASHINGTON, DC 20002	REAL ESTATE RENTAL	DE	10,258,779	55,599,300	AMERICAN PSYCHOLOGICAL ASSOCIATION
(3) CONFERENCE CENTER LLC 750 1ST STREET NE, WASHINGTON, DC 20002	REAL ESTATE RENTAL	DE	95,495	167,855	APA 750 LLC
(4)					
(5)					
(6)					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) APA SERVICES, INC. (52-2262136) 750 1ST STREET NE, WASHINGTON, DC 20002	MEMBERSHIP	DC	501(C)(6)		N/A		✓
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Cat. No. 50135Y

Schedule R (Form 990) (Rev. 1-2025)

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V–UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)-----												
(2)-----												
(3)-----												
(4)-----												
(5)-----												
(6)-----												
(7)-----												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)-----									
(2)-----									
(3)-----									
(4)-----									
(5)-----									
(6)-----									
(7)-----									

Part V **Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?

		Yes	No
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	✓
b	Gift, grant, or capital contribution to related organization(s)	1b	✓
c	Gift, grant, or capital contribution from related organization(s)	1c	✓
d	Loans or loan guarantees to or for related organization(s)	1d	✓
e	Loans or loan guarantees by related organization(s)	1e	✓
f	Dividends from related organization(s)	1f	✓
g	Sale of assets to related organization(s)	1g	✓
h	Purchase of assets from related organization(s)	1h	✓
i	Exchange of assets with related organization(s)	1i	✓
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	✓
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	✓
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l	✓
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	✓
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	✓
o	Sharing of paid employees with related organization(s)	1o	✓
p	Reimbursement paid to related organization(s) for expenses	1p	✓
q	Reimbursement paid by related organization(s) for expenses	1q	✓
r	Other transfer of cash or property to related organization(s)	1r	✓
s	Other transfer of cash or property from related organization(s)	1s	✓
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		

	(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
(1)	APA SERVICES, INC.	N	1,467,966	FMV
(2)	APA SERVICES, INC.	O	2,790,549	FMV
(3)	APA SERVICES, INC.	Q	4,258,515	FMV
(4)				
(5)				
(6)				

Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered “Yes” on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V–UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1).....													
(2).....													
(3).....													
(4).....													
(5).....													
(6).....													
(7).....													
(8).....													
(9).....													
(10).....													
(11).....													
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