We had many accomplishments to be proud of in 2015; we continued to experience strong membership growth, expanded our international reach, developed new resources to help our members be more effective in their practice, and more. This does not happen in a vacuum. Our successes are made possible through the decisive action and hard work of our devoted community.

Additionally, I began my tenure as AACAP President this year, giving me a front row seat to see the successful management, production, and running of our world-class products, programs, and events. Leading AACAP is a mission that I embrace with enthusiasm, dedication, and respect. The fact that children and families benefit every day from infrastructures and resources crafted and supported by AACAP is an inspiration, obligation, as well as a source of pride. What we create and what we do is relevant and valued all around the world.

I've been a member of this great organization for over thirty years and am well aware of the high expectations to which it is held — and rightly so. I have no doubt that we will continue to work hard to meet those expectations. To do so, leadership will act judiciously and rigorously to maintain an unwavering dedication to the sustainability of our measures. That is why I'd like to extend my special thanks to the capable leadership, membership, and volunteers who keep our professional organization moving forward.

The pages of the 2015 Annual Report provide the perfect opportunity not just to highlight our collective successes, they also allow me to recognize all of the individuals who have helped in making this year such a tremendous success. I am especially grateful to Heidi Fordi, AACAP Executive Director, Paramjit T. Joshi, MD, AACAP Immediate Past-President, and, of course, the outstanding and energetic AACAP staff for their support of my Presidential Initiative: Integrated Mental Health Care.

As I see it, the planets are aligned at this moment in a way that makes achieving the integration of mental health and medical care for children a very real possibility. Demand for our services has never been greater, and our commitment to providing the best care possible is as high as ever. Make no mistake about it: integrated care is a fundamental change from the way we currently do things. However, it is a positive change, and now is the time to charge forward towards integrated care in order to better the lives of children and their families.

How we function as a team — the AACAP team — is the basis for our success. Each one of you has something to contribute, and I appreciate each way you advance our shared mission. I will continue to count on your support, and as your president, I give you my pledge that together we will do all we can for our professional organization and our specialty.

Now, let us celebrate our successes in 2015, and then into the future we go!

Very sincerely,
Gregory K. Fritz, MD
President, AACAP
The mission of AACAP is the promotion of the healthy development of children, adolescents, and families through advocacy, education, and research, and to meet the professional needs of child and adolescent psychiatrists throughout their careers.

— Approved by AACAP Membership, December 2014

MESSAGE FROM THE EXECUTIVE DIRECTOR

I would like to extend my sincerest gratitude to all those who contributed to make 2015 such a successful year for AACAP. It is thanks to the volunteered time, effort, and support of our members, allies, donors, and staff that our community continues to set the standard of, and strive for, excellence of care in child and adolescent psychiatry.

From the dedication of the established to the enthusiasm of the new, our members are both the purpose and driving force of our organization. I am proud to announce that our membership continues to flourish, with 2015 marking our best membership year yet. AACAP now boasts over 9,000 members across over 60 countries. Our new International Member category also continues to develop, creating a renewed diversity in our membership, programming, points of view, and ideas.

AACAP’s international expansion is a testament to the success of the Presidential Initiative of Paramjit T. Joshi, MD, AACAP International: Partnering for the World’s Children. It has been an honor and a pleasure to work alongside her throughout her tenure. Thank you to Dr. Joshi for all that she has done to cultivate relationships across borders, making possible a much-needed, worldwide conversation on improving the health of children everywhere.

At AACAP’s 62nd Annual Meeting in San Antonio, Gregory K. Fritz, MD, assumed the presidential mantle and delved into his plans to move AACAP forward during his two-year term. He is confident that a new level of collaboration between pediatricians, primary care providers, psychologists, and other mental healthcare professionals could more effectively serve those in need. Dr. Fritz intends to make strides towards meeting that need with his initiative, Integrated Mental Health Care, through advocacy, education, evaluation, and creation of a resource center.

There are approximately 8,300 practicing child and adolescent psychiatrists in the United States but over 15 million children in need of the expertise of one. The numbers demonstrate that the work of our members is undeniably essential. It is through integrated care and the formation of a more varied and vibrant mental healthcare team that we will be able to address the workforce shortage of child and adolescent psychiatrists. I look forward to the work that AACAP and Dr. Fritz will do together to respond to, and one day overcome, the challenges facing our specialty.

I have the privilege to observe the positive change that can be affected through meaningful relationships in our community. One such example came to fruition this year, after years of cultivation. In 2015, AACAP received the largest single gift by a donor in our history. The gift was made by a mentee in honor of his mentor.

The relationship between Frank A. Roberto, MD, and John E. Schowalter, MD, began when Dr. Roberto was a pediatric resident, with Dr. Schowalter as his supervisor. The generosity of both of these individuals, and the resulting impacts they have made on the lives of others, will positively influence the specialty for generations to come.

Thank you to every AACAP donor who made a contribution in 2015. It is the culmination of each individual donation that allows us to make a difference in the lives of children, adolescents, and their families. We truly appreciate your demonstrations of support.

In 2015, we built upon existing relationships and cultivated new alliances. It is the interaction and the interaction of all those who care about AACAP and children’s mental health that make progress possible. Without you, the accomplishments in the following pages would not have been conceivable. Your support of AACAP has brought about milestones from 1953 to 2015, with each step forward steadily culminating in our rewrite of the narrative of children’s mental health. I am so excited to see what we will accomplish together in 2016.

Most sincerely,

Heidi B. Fordi
Executive Director
Working with AACAP members across the nation in 2015, we educated officials at all levels of government. Our focus remained on demonstrating the importance of children’s mental health issues through our federal and state legislative initiatives, trainings, and annual events. Our efforts emphasized the need to address the critical workforce shortage of child and adolescent psychiatrists; ensure the quality of care for children with mental illness; and increase access to prevention, early intervention, and treatment programs.

**LEGISLATIVE CONFERENCE**

In April 2015, AACAP welcomed over 200 attendees from over 41 states, the District of Columbia, and Puerto Rico to Capitol Hill in Washington, D.C. This represented an 11% increase from 2014 in geographic attendance at the newly rebranded Legislative Conference. Our AACAP members, families, and youth advocates delivered a proactive message to improve children’s mental health to nearly 200 Congressional offices. Their tailored message of addressing the child and adolescent psychiatrist workforce shortage and the need for comprehensive mental health reform was well-received and echoed throughout the halls of Congress.

AACAP recognized the particular efforts of one legislator for his work to improve children’s mental health: Representative Tim Murphy (R-PA), who received AACAP’s 2015 Friends of Children’s Mental Health Award during the festivities.

The success of AACAP is dependent on the efforts and enthusiasm of its members, staff, and coalition partners to improve children’s mental health policy.
NEW ADVOCACY COMMITTEE
To help advance AACAP’s overall advocacy efforts and public policy agenda, AACAP’s Executive Council approved the creation of an Advocacy Committee, currently chaired by Debra E. Koo, MD, and Karen Pierce, MD.

The new committee was officially launched at the Annual Meeting in San Antonio, Texas. The committee provides important leadership and oversight of the Advocacy Liaison program to assist ROCAPs in their state advocacy efforts. In addition, the committee members stand ready to help interested ROCAPs develop strategies and take action to become engaged with advocacy efforts in their states.

MEMBER ADVOCACY
Each year, AACAP offers Advocacy and Collaboration Grants to help fund advocacy activities of AACAP regional organizations. Activities are designed to promote the improvement of children’s mental health in a state or community. These grants assure that regional organizations continue to advance the mission of AACAP and educate their regions on children’s mental health through collaboration with allied patient and professional organizations.

In 2015, these grants enabled 10 regional organizations to implement vital projects. CAs worked with practitioners on the ways integrated care can improve children’s mental health care, launched coalition training workshops, developed tools to increase collaboration among regional pediatricians, and much more.

PUBLIC POLICY FELLOWSHIP THROUGH THE CENTER FOR MENTAL HEALTH SERVICES
For the fifth straight year, AACAP joined with the Substance Abuse and Mental Health Services Administration (SAMHSA) to offer a child psychiatry fellow the opportunity to work with the Systems of Care Committee and the Center for Mental Health Services (CMHS). Our selected trainee dedicated one day a week to learning about public sector service and community-based child and adolescent psychiatry policies and practices. For 2015-2016, our fellow was Milangel T. Concepcion-Zayas, MD, from Children’s National Medical Center.

SIGNATURE AACAP CLINICAL PRACTICE PRODUCTS
Demand for the CASII and ECSII continued to grow in 2015, particularly among state agencies and community behavioral health centers. Last year, AACAP conducted in-person trainings on the proper use of the instrument in Arizona, Florida, Minnesota, and Connecticut. In addition, large-scale training requests are being planned for the Illinois Department of Child and Family Services.

AACAP is in negotiations with several respected and capable EHRI providers to further integrate the CASII and ECSII electronically into the behavioral health care space. We also continue to modernize the instruments by implementing updates to the current e-training platform for CASII.

DISTINGUISHED MEMBER AWARDS
AACAP Simon Wile Leadership in Consultation Award
Susan Beckwith Turkel, MD
Honors Presentation: The Importance of Liaison in Collaborative Care

AACAP Irving Phillips Award for Prevention
Joan Luby, MD
Honors Presentation: Seizing Early Experience and Brain Development: Opportunities for Treatment

AACAP George Tarjan, MD Award for Contributions in Developmental Disabilities
John N. Constantino, MD
Honors Presentation: Risk, Resilience, and Intervention in Autism: Implications of Quantitative Trait Studies Across the Lifespan

AACAP Norbert and Charlotte Rieger Psychodynamic Psychotherapy Award
Daniel S. Schechter, MD
Honors Presentation: Traumatically Neked Intersubjectivity

AACAP advocates making their voices heard.
AACAP works to educate the next generation of child and adolescent psychiatry leaders by recruiting more medical students and residents to the specialty through fellowships, grants, and mentorship programs.

WORKFORCE SHORTAGE

There are approximately 8,700 child and adolescent psychiatrists available to serve the needs of an estimated 74 million children in the United States. Of those children, approximately 20% of youth ages 13 to 18 and 13% of youth ages 8 to 15 experience severe mental disorders in a single given year. As the population of children is expected to grow from 74 million children in 2010 to 80 million in 2050, there will be an increasing need for mental health services.

AACAP’s Department of Research, Training & Education works to close the workforce gap and better serve America’s children through research and workforce development programs that aim to recruit higher numbers of medical students and residents to join the field. As part of these efforts, AACAP continues to disseminate important information contained within the 2013 Workforce Study, which found an ongoing workforce crisis in the number of child and adolescent psychiatrists available to treat the growing demand of American youth in need of mental health services. AACAP plans to update all workforce study data in Spring 2016.

MENTORSHIP

AACAP provides an ongoing mentorship program along with a variety of formal and informal mentorship opportunities at AACAP’s 62nd Annual Meeting. The Mentorship Network connects medical students, residents, and early career psychiatrists with mentors across the country. During 2015, more than 370 medical students, residents, and early career psychiatrists signed up for a mentor, and 261 AACAP members volunteered to serve as mentors. Given the extreme shortages in our specialty, it is integral to our continued success that we provide trainees with superior mentorship so that they can help close the workforce gaps in child and adolescent psychiatry.
PROFESSIONAL DEVELOPMENT OPPORTUNITIES
Medical students and residents received funding for the following research fellowships and Annual Meeting award opportunities.

Jeanne Spurlock Minority Medical Student Fellowships
AACAP’s Jeanne Spurlock Research Fellowship in Substance Abuse and Addiction for Minority Medical Students, supported by the National Institute on Drug Abuse (NIDA), provided four medical students with the opportunity to gain research experience in the field of child and adolescent psychiatry. After completing the summer fellowship, the recipients participated in Annual Meeting activities and provided a poster presentation on their experiences.

Summer Medical Student Fellowships
AACAP’s Summer Medical Student Fellowships in Child and Adolescent Psychiatry, supported by AACAP’s Campaign for America’s Kids (CFAK), were awarded to ten medical students to explore the field of child and adolescent psychiatry. Under the guidance of senior child and adolescent psychiatrist mentors, the fellowship recipients spent the summer in clinical and research settings and attended the Annual Meeting to present their findings.

AACAP summer fellowships give medical students the opportunity to gain exposure to the field of child and adolescent psychiatry, which they often do not receive in medical school. The fellowship programs are highly competitive and have a positive impact on the career paths of all recipients.

ACADEMIC PAPER AWARDS
AACAP recognized the best academic paper published by a child and adolescent psychiatry resident during training with the following award.

AACAP Robinson-Cunningham Award for Best Paper By a Resident
Danielle Baribeau, MD
Publications: Examining and Comparing Social Perception Abilities Across Childhood Onset Neurodevelopmental Disorders

DISTINGUISHED MEMBER AND JOURNAL AWARDS
AACAP administrators Distinguished Member and Journal Awards recognizing child and adolescent psychiatrists and AACAP members who have made significant contributions to the field. Awardees receive honoraria, are honored at the Distinguished Awards Luncheon, and make an honors presentation about their work during the Annual Meeting.

AACAP Elaine Schlosser Lewis Award for Research in Attention-Deficit Disorder
Kathleen Myers, MD, MPH
Honors Presentation: Telehealth Technologies to Improve the Quality of Care for Children with ADHD Living in Underserved Communities

Klingenstein Third Generation Foundation Award for Research in Depression or Suicide
Eva Szegethy, MD, PhD
Honors Presentation: Efficacy Trial of Two Psychotherapies for Depression in Youth with Inflammatory Bowel Disease

AACAP Norbert and Charlotte Rieger Award for Scientific Achievement
James S. Hudziak, MD
Honors Presentation: Prescribing Wellness: The Role of Music, Mindfulness and Exercise in Child Psychiatry

Activities offered at the Annual Meeting included:
Career Development Forum
Thirty experts representing diverse specialties within child and adolescent psychiatry volunteered to talk one-on-one with trainees.

ECP Mentorship Forum
A panel of four early career psychiatrists (ECPs) presented on the importance of mentorship for ECPs, including the benefits of mentorship to both the mentors and mentors, early career challenges, and qualities of a successful mentorship. Mentors had the opportunity to network with mentors with expertise in a variety of fields, including, but not limited to: administration/systems/business of medicine, work-life balance, international medical graduates, teaching and education initiatives, research and academics, private practice, and entering the workforce.

Medical Student and Resident Networking Hour
More than 150 trainees networked with peers at an informal meet and greet.

Two Day Mentorship Program
Over 100 trainees were paired with 60 child and adolescent psychiatrists to build relationships, share ideas, address challenges, and reflect on work-life balance. The sessions also included Ted-like presentations on Wellness by Geri Fox, MD, the Resident Trainee Experience in Mexico by Diana Guizar, MSC, and Valeria Melina Angulo Franco, MD, and AACAP Advocacy by Scott Foley, MD.

MEDICAL STUDENT TRAINING
AACAP works with the Klingenstein Third Generation Foundation (KTGF) to administer the KTGF Medical Student Program (MSP), a coordinated network of 14 medical schools across the country. Each school selected to participate as an MSP carries out a unique, customized program that encourages medical students to pursue child and adolescent psychiatry as a career specialty. The programs are designed to provide medical students with exposure to clinical experiences, research, advocacy, and mentorship. The MSPs also participate in many other important projects including the KTGF National Medical Student Conference (NMSC), special lectures, and networking opportunities with child and adolescent psychiatry leaders.

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The landscape for receiving funding for mentored research experience is constantly changing. AACAP seeks to diversify the Research Initiative funding portfolio by securing support from private foundations and other donors interested in strengthening the field of child and adolescent psychiatry research.

RESEARCH GRANTS
A wide range of mentored research and training opportunities were created this year for child and adolescent psychiatry residents and junior faculty interested in establishing careers in research. As federal dollars have decreased, AACAP sponsors continue to provide support for child and adolescent psychiatry research through AACAP’s Endowment and AACAP’s Campaign for America’s Kids (CFAK).

NIDA FUNDED K12 GRANT
AACAP collaborates with the National Institutes of Health’s (NIH) National Institute on Drug Abuse (NIDA) to produce new child and adolescent psychiatry researchers in the substance abuse and addiction field through a Career Development (K12) Award. Since its inception in 1996, this successful program has produced 18 child and adolescent psychiatry researchers. AACAP was successful in securing new funds through its competitive renewal application that was submitted in 2014. In May 2015, AACAP received its notice of grant award for the 2015-2020 grant period.
The overall aims of AACAP's Physician Scientist Program in Substance Abuse, supported by NIDA, are to increase the number of child and adolescent psychiatrists with independently funded addiction research careers, expand clinical and research training in child and adolescent substance abuse in trainees' home and academic institutions, and create a sustainable infrastructure and national network of mentors and academic research institutions to support addiction research training.

The AACAP-NIDA K12 grant has been highlighted as a model grant for assisting junior faculty in developing independent research careers. The grant of over $6 million awarded over 5 years, provides research and salary support as well as research stipend for six child and adolescent psychiatrists with a commitment to becoming independent researchers in the field of substance use disorders.

Paula Riggs, MD, will continue to serve as the Principal Investigator for this critically important and successful program. In year one of this award, AACAP will recruit and accept applications from potential scholars. A Request for Proposals (RFP) was sent out with a December 15 proposal due date. AACAP plans to select scholars in early 2016.

**RESIDENT AWARD**

The NIDA-AACAP Resident Training Award in Substance Abuse and Addiction, supported by NIDA, provides up to $18,000 in training support to two awardees, in addition to a mentor stipend of up to $2,000.

The NIDA-AACAP Resident Training Award in Substance Abuse and Addiction, supported by NIDA, is to increase the number of child and adolescent psychiatrists with independently funded addiction research careers, expand clinical and research training in child and adolescent substance abuse in trainees' home and academic institutions, and create a sustainable infrastructure and national network of mentors and academic research institutions to support addiction research training.

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AACAP’s Annual Meeting, Douglas R. Hansen, MD, Annual Review Course, Pediatric Psychopharmacology Update Institute, Journal of the American Academy of Child and Adolescent Psychiatry, and online CME programs educate physicians in the newest research on childhood mental, emotional, developmental, and behavioral disorders.

ANNUAL MEETING
Each year, AACAP’s Annual Meeting provides an update on the latest research and developments in child and adolescent psychiatry. In 2015, more than 3,600 people attended AACAP’s 62nd Annual Meeting, with special participation of Asociación Mexicana de Psiquiatría Infantil, A.C. (AMPI), in San Antonio, TX. The meeting provided continuing medical education sessions devoted to children’s mental health issues and was led by Boris Birmaher, MD, Program Committee Chair, James J. McGough, MD, Deputy Program Committee Chair, and Jill Zeigenfus Bradford, CMP, MTA, AACAP’s Director of Meetings & Continuing Medical Education.

Highlights from the Annual Meeting include:

• The Community-Based Systems of Care Committee presented its Special Program, entitled Systems of Care and Substance Use Disorders in Youth: Gaps and Successes in the Real World, on Monday, October 26.

• The Local Arrangements Committee sponsored Clinical Practicum 1, chaired by Steven R. Pliszka, MD, entitled We Never Used to See This Before… Dealing With a New Generation of Mental Health Crises, on Tuesday, October 27 at the Clarity Child Guidance Center, San Antonio, TX.

• The Research Committee sponsored the Research Institute (Institute 2), chaired by Timothy E. Wilens, MD, and Kevin M. Gray, MD, entitled What’s Up in Child Addiction Research: A Focus on Methodology, on Tuesday, October 27.

• The Research Committee also sponsored the Research Symposium, chaired by Bradley S. Peterson, MD, and Neal D. Ryan, MD, featuring Mark G. Packard, PhD, and Arthur L. Beaudet, MD, on Tuesday, October 27.

• Bruno Falissard, MD, PhD, was the speaker at the Noshpitz Cline History Lecture, entitled Making Global Child Mental Health a Political Priority, on Wednesday, October 28.

• AACAP President Gregory K. Fritz, MD, gave the keynote address and launched his presidential initiative at the Karl Menninger, MD, Plenary, entitled Child and Adolescent Psychiatry in the Era of Healthcare Reform, on Wednesday, October 28.

• The Town Meeting, entitled Integrated Care: Is It the Future for Child Psychiatry?, was chaired by AACAP President Gregory K. Fritz, MD, and took place on Thursday, October 29.

• Clinical Practicum 2, chaired by Jennifer Saul, MD, entitled The Use of Equine-Assisted Psychotherapy in Children and Adolescents: An Experiential Introduction for Child and Adolescent Psychiatrists, took place on Thursday, October 29.
Module 12: Relevant Updates for Child and Adolescent Psychiatrists,

During 2015, the Lifelong Learning Committee created MAINTENANCE OF CERTIFICATION standards of diagnosis and treatment. Psychiatric topics as well as an update on state-of-the-art stan-

the course provided a review of all major child and adolescent topics, led by Gabrielle A. Carlson, MD, and Robert L. Hendren, DO, by Douglas B. Hansen, MD, ANNUAL REVIEW COURSE.

AACAP hosted 218 attendees, the second largest number in this meeting and sessions at the Annual Meeting. AAAP's 2015 Pediatric Psychopharmacology Update Institute was held in Brooklyn, NY, and saw record attend-

dance with 856 registrants, including 95 international registrants and 120 nurse practitioners. Co-chaired by Laurence Lee Greenhill, MD, and Gabrielle A. Carlson, MD, the Institute focused on partnering with primary care practi-

cioners. Psychopharmacology continues to be a popular topic among AACAP members, drawing large numbers for both this meeting and sessions at the Annual Meeting.

DOUGLAS B. HANSEN, MD, ANNUAL REVIEW COURSE

AACAP hosted 218 attendees, the second largest number in the past eight years, in San Francisco, CA, at AACAP's 2015 Annual Review Course. Co-chaired by Laurence Lee Greenhill, MD, and Robert L. Hendren, DO, the course provided a review of all major child and adolescent psychiatric topics as well as an update on state-of-the-art stan-

dards of diagnosis and treatment.

MAINTENANCE OF CERTIFICATION

During 2015, the Lifelong Learning Committee created Module 12: Relevant Updates for Child and Adolescent Psychiatrists, which offers members the opportunity to fulfill the Maintenance of Certification (MOC) requirements. In addi-
tion to the module, one Institute is held each year during the Annual Meeting, focusing on the topics of the module. This Institute consistently receives high evaluation ratings. Further MOC resources are developed for the membership, including an online Self-Assessment (SA) exam, Self-Assessment Workshops at the Annual Meeting, Performance in Practice (PIP) tools based on AACAP Practice Parameters, peer feedback surveys, and patient feedback surveys, including the patient feedback tools in Spanish. They are available on the AACAP website. AACAP will continue to provide opportuni-
ties to meet members’ MOC requirements.

CONTINUING MEDICAL EDUCATION

AACAP is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education (CME) for physicians. AACAP's Accreditation with Commendation status represents AACAP's commitment to plan, implement, and evaluate activities that provide child and adolescent psychiatrists and allied health professionals the ability to affect change in how they treat patients.

ONLINE CME PROGRAMS

AACAP offers opportunities for online education, such as AACAP's online CME provided through the Journal of the American Academy of Child and Adolescent Psychiatry, which offers one hour of credit per issue. Approximately 250 CME certifi-
cates are issued each month for these activities.

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AACAP Connect is an online companion to JAAACAP. Published quarterly, and led by 2014-2015 John F. McDermott Assistant Editor-in-Residence and inaugural JAAACAP Connect Editor-in-Chief Michelle S. Horner, DO, the Connect editorial team works with students, trainees, early career, and seasoned physicians, regardless of previous publication experience, to develop brief science-based and skill-building articles.

JOURNAL OF THE AMERICAN ACADEMY OF CHILD AND ADOLESCENT PSYCHIATRY (JAAACAP)

JAAACAP is recognized worldwide as the leading scientific journal dedicated exclusively to the study of child and adolescent mental health. JAAACAP is led by Editor-in-Chief Andrés Martin, MD, MPH, Riva Arieli Ritvo Professor at the Yale Child Study Center, and published by Elsevier. JAAACAP is the #1 journal in pediatrics as reported in the 2014 Journal Citation Reports published by Thomson Reuters. At 7.260, JAAACAP's 2014 impact factor (IF) is up from 6.334 in the previous year, and now ranks 10th of 140 psychiatry journals and 1st of 119 pediatrics journals. This is the Journal's highest IF of all time and marks its first year above 7.0.

AACAP JOHN F. MCDERMOTT, MD, ASSISTANT EDITOR-IN-RESIDENCE FOR THE JOURNAL OF THE AMERICAN ACADEMY OF CHILD AND ADOLESCENT PSYCHIATRY

The John F. McDermott Assistant Editor-in-Residence Award, established in 2006 in honor of Editor Emeritus John F. McDermott, MD, (1986-1996), provides the opportunity for an early career child and adolescent psychiatrist to join the JAAACAP editorial team for two years. The nomination process for the 2016-2017 John F. McDermott Assistant Editor-in-Residence began in late 2014 and final selection was made in Spring 2015. Oliver M. Stroehl, MD, will serve as the next John F. McDermott Assistant Editor-in-Residence.

AACAP Assembly of Regional Organizations together in San Antonio
BECOME A HERO

When you give, you create a better future – today.

“I feel honored that part of my estate will help AACAP to support future child psychiatrists throughout their careers. AACAP has acted as a professional family for me since 1976, always there in times of stress, celebration, or learning. Our generation’s donations will guarantee the continuation of AACAP’s important work. Donations of any amount are welcomed by AACAP. Please join me so that our pledged gifts can be added together to achieve even more impact throughout the coming decades.”

–Michael J. Maloney, MD

Becoming a donor is a powerful decision.

When you choose to donate to AACAP, you are telling us you trust us and believe in us to help create better lives for children with mental illnesses. You are telling us you believe we are the best solution to assure that our nation’s youth get the mental health services they need to achieve their best lives.

2015 was remarkable for the way the power of your donations helped effect important change.

This could not be possible without your generous gifts. Here’s how your support has made a difference and how your contribution will continue to create an impact as you help us look to the future.

LIFE MEMBERS FUND

In 2015, AACAP’s Life Members Fund raised over $36,000 to support their two grant awards initiatives: AACAP’s Education Outreach Program for Child and Adolescent Psychiatry Residents and AACAP’s Life Members Mentorship Grants for Medical Students. Because of these generous donations, 40 medical students and residents attended AACAP’s 62nd Annual Meeting and were mentored by our Life Members in San Antonio. This was the fifth consecutive year that our beloved Life Members funded more grantees than the previous year!

“...I feel honored that part of my estate will help AACAP to support future child psychiatrists throughout their careers. AACAP has acted as a professional family for me since 1976, always there in times of stress, celebration, or learning. Our generation’s donations will guarantee the continuation of AACAP’s important work. Donations of any amount are welcomed by AACAP. Please join me so that our pledged gifts can be added together to achieve even more impact throughout the coming decades.”

–Michael J. Maloney, MD
The 1953 Society continued to be an important fundraising initiative for AACAP in 2015. 1953 Society gifts will preserve, secure, and advance AACAP’s future to remain champions of children with mental illness for decades to come.

We were incredibly fortunate that in 2015 these six AACAP members informed us of their 1953 Society gifts:

Anonymous (3)
Michael J. Maloney, MD & Dr. Marta Pisarska
1953 Member since 1976
The Roberto Family
Diane K. Shrier, MD & Adam Louis Shrier, D.Eng, JD
1953 Member since 1970
We are very grateful to you for choosing to leave AACAP in your will. You are connected by a shared purpose and a shared vision of AACAP as a driving power behind the global progress child psychiatrists are achieving for children with mental illnesses.

The Center for the Advancement of Psychiatry (NorthJersey)
Michael J. Maloney, MD & Dr. Marta Pisarska
1953 Member since 2015
We are very grateful to you for choosing to leave AACAP in your will. You are connected by a shared purpose and a shared vision of AACAP as a driving power behind the global progress child psychiatrists are achieving for children with mental illnesses.

The second annual 1953 Society Reception, a private event to celebrate and honor all 1953 Society members, was hosted by AACAP Past President Paramjit T. Joshi, MD, on October 30, 2015, at the Annual Meeting in San Antonio. The reception is one of the many ways we celebrate your decision to make this gift in your Will.

There’s a beautiful quote that so poignantly reflects your heart and spirit as 1953 Society members, colleagues, and people: “The true meaning of life is to plant trees, under whose shade you do not expect to sit.”

Perhaps fittingly, a late 19th century, second generation farmer from Manitoba, Canada, Nelson Henderson, is credited with saying this. Most of us would not know who Nelson Henderson is, which is so typical of bequest gifts. They are most often made by “everyday” people. Unknown to the rest of the world, maybe, but known very fondly by the organization to which they have made a bequest gift.

We kindly thank you for making the decision to include us in your Will. You will always be known, and treasured, by us.

An AACAP Life Member with travel grant recipients of Life Member Awards

AACAP CATCHERS IN THE RYE AWARDS

AACAP CATCHERS IN THE RYE HUMANITARIAN AWARD

James and Maureen Hackett
James and Maureen established the Hackett Family Foundation in 1996. Their priority, as donors and community activists, is to act as agents of change in mental health with a focus on awareness and education, research and treatment, and the elimination of the stigma associated with mental health care.

James and Maureen Hackett
2015 AACAP Catchers In The Rye Humanitarian Award winners

Michael S. Jellinek, MD
Michael S. Jellinek, MD, is Professor of Psychiatry and Pediatrics at Harvard Medical School, as well as co-chair of the AACAP Financial Planning Committee. He has written or co-written over 300 original reports, articles, and chapters, and served on the JAACAP editorial board from 1992-2012.

AACAP CATCHERS IN THE RYE AWARD TO AN INDIVIDUAL

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James and Maureen Hackett
2015 AACAP Catchers In The Rye Humanitarian Award winners

Aaron Roberto, MD, and Frank Roberto, MD

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RESEARCH

Investing in the next generation of child psychiatry researchers remains one of the highest priorities for AACAP’s Development team. There is essentially no Federal funding that makes any investment in beginning or mid-career researchers. Private funding is required to fill this gap in order to help expand the number of child psychiatry researchers. The paradox is that we continue to witness unprecedented opportunity in brain research. We must train and support a new generation of child psychiatry researchers and provide the necessary resources to unleash their best research potential, so children with mental illnesses achieve their best life potential.

In 2015, because of a public funding crisis, you responded to a call-to-action to “do more.” You donated nearly $220,000 to support promising research careers, an increase of 10% from 2014 support. AACAP funds three cutting-edge research grant programs with different levels of offered financial support: AACAP’s Junior Investigator Award ($30,000/year for 2 years), AACAP’s Pilot Research Awards ($15,000/year), and AACAP’s Jeanne Spurlock Research Fellowship in Substance Abuse and Addiction for Minority Medical Students ($4,000/year). The latter two grants introduce mental health and addictions research careers to young investigators. The former funds innovative research that provides new insight into the understanding, treatment, and prevention of children’s mental health and addictions disorders.

Please meet your 2015 investments:

Carolina Vidal, MD, Johns Hopkins University
Carrie A. Vaudreuil, MD, Massachusetts General Hospital
Daniel Medeiros Almeida, MD, Cincinnati Children’s Hospital Medical Center
Mirjana Domakonda, MD, New York Presbyterian Hospital of Columbia and Cornell Universities
Rebecca A. Muhle, MD, PhD, Yale University
Chuanzhong Ye, MD, PhD, University of Miami Miller School of Medicine/Jackson Health System
Heather Marie Joseph, DO, University of Pittsburgh Medical Center/Western Psychiatric Institute and Clinic
Ismail Badran, MD, Cincinnati Children’s Hospital Medical Center
Gerrit Ian Van Schalkwyk, MD, Yale University
Jennifer Dwyer, MD, Yale University
Kathryn K. Ridout, MD, PhD, Brown University
George Gianakakos, MS, University of Illinois at Chicago
Joy Jones-Harris, MD, MPH, Loma Linda University/Eisenhower Medical Center
Ningfei F. Li, Medical University of South Carolina
Cindy Parra, Weill Cornell Medical College

Marc Heiser, MD, a Child Fellow at UCLA Semel Institute for Neuroscience and Human Behavior, was awarded a Pilot Research grant in 2015, supported by AACAP’s Campaign for America’s Kids (CFAK). He shared with us how this grant impacted his career and also led to additional funding to advance his research interests:

“Thank you for generously supporting my research into the neural mechanisms of social competence. This award has provided me with a rich experience in translational research using neuroimaging and transcranial magnetic stimulation. It has been my first research experience with patient populations. While very challenging, this work is where my passion lies and I plan on pursuing it further. Using preliminary data collected as part of this study, I was able to successfully apply for and receive a NARSAD Young Investigator Award. I would also like to acknowledge my mentors, Dr. Marco Iacoboni and Dr. Carrien Bearden, without whom this project would not have taken place. Thank you again for your support.”
JOHN E. SCHOWALTER, MD, ENDOWMENT FUND
The recipient of the inaugural AACAP Educational Outreach Program for Child and Adolescent Psychiatry Residents, supported by the John E. Schowalter, MD, Endowment Fund is Desiree N. Shapiro, MD, a child and adolescent psychiatry fellow at the University of California, San Diego. She was presented with the award at the Annual Meeting in San Antonio. Of the 34 travel grant awards supported by AACAP Funds in 2015, Dr. Shapiro scored the highest. This was an extraordinary tribute to the fund’s benefactor, Frank A. Roberto, MD, and his mentor, John E. Schowalter, MD.

Dr. Roberto made a significant initial gift to establish AACAP’s John E. Schowalter, MD, Endowment Fund in 2014 in recognition of his mentor while a pediatric resident at Yale. Then, in 2015, Dr. Roberto announced a historic additional gift to AACAP’s John E. Schowalter, MD, Endowment Fund. It is the largest single gift by a donor in AACAP’s history. Dr. Roberto’s gift inspired another historic gift to the Fund in December, by his mentor, Dr. Schowalter. As Dr. Schowalter explained: “The roots of this action date back to the early 1970’s. At that time, I was a junior faculty member at the Yale Child Study Center. It was before we became a full department, and I had a joint appointment in the Department of Pediatrics. I also supervised pediatric residents and saw pediatric patients. One of my supervisees was Dr. Frank Roberto. To make a long story short, Frank was influenced by my supervision, went on to train in general and child psychiatry, decades later asked me to mentor his then medical student son, Aaron, and Aaron is now becoming a child and adolescent psychiatrist. The bottom line is that, while I was planning my withdrawal from Owl leadership, I felt a strong urge to add something to that Endowment which, like the Life Members Fund, strives to enhance the number and the quality of medical students and general psychiatry residents who enter child and adolescent psychiatry.”

Drs. Shapiro, Roberto, and Schowalter were all honored at a Breakfast Reception in San Antonio on October 29.

PARAMJIT TOOR JOSHI, MD, INTERNATIONAL SCHOLAR AWARDS
The two inaugural recipients of AACAP’s Paramjit Toor Joshi, MD, International Scholar Awards were honored at a Breakfast Reception in San Antonio on October 29, 2015. The recipients were Valeria Melina Angulo Franco, MD, at the National Institute of Psychiatry Ramon de la Fuente Munoz from Mexico City, Mexico, and Anuradha Herath, MD, at Lady Ridgeway Hospital for Children in Sri Lanka.

AACAP received 33 applications for the inaugural AACAP Paramjit Toor Joshi, MD, International Scholar Awards. They were from the following countries: Bangladesh, Brazil, Canada, Egypt, India, Israel, Mexico, New Zealand, Oman, Saudi Arabia, Spain, Sri Lanka, Switzerland, and Uruguay.

AACAP’s Paramjit Toor Joshi, MD, International Scholar Awards provide travel expenses for child psychiatrists and other physicians to attend the Annual Meeting. Awardees share their knowledge and experience with attendees at the meeting. Academically affiliated awardees are also expected to lecture on specific topics of interest that promote mental health awareness to other medical students, residents, and faculty.

BREAK THE CYCLE
In late 2013, Andrés Martin, MD, MPH, a distinguished Professor at the Yale Child Study Center, Medical Director of the Children’s Psychiatric Inpatient Service at Yale-New Haven Children’s Hospital, and editor-in-chief of the Journal of the American Academy of Child and Adolescent Psychiatry, approached AACAP with a vision of cycling coast-to-coast to raise awareness for children’s mental illnesses and raise funds to support critically important programs for AACAP and the specialty.

Since then, significant progress has been made, with 2015 marking many milestones for Break the Cycle. This year alone, AACAP received $57,500 in donations to support this initiative’s cause. Furthermore, several AACAP members committed to riding and raising funds in their communities. A staff Steering Committee was also established to help plan, promote, and execute the Break the Cycle ride through close work with many of AACAP’s Regional Organizations (ROCAPs).

The ride will take place in the summer of 2017, starting in Seattle, Washington, and finishing in Washington, DC. The official launch will take place in October 2016 during AACAP’s 63rd Annual Meeting in New York City.
THANK YOU FOR SUPPORTING AACAP

AACAP is committed to the promotion of mentally healthy children, adolescents, and families through research, training, prevention, comprehensive diagnosis and treatment, peer support, and collaboration.

Thank you to the following donors for their generous financial support of our mission:

Gifts Received January 1, 2015 to December 31, 2015

$100,000 - $249,000
AACAP John E. Schowalter, MD, Endowment Fund
Dr. John and Mrs. Ellen Schowalter
$50,000 - $74,999
AACAP Pilot Research Awards
Pfizer
$25,000 - $49,999
AACAP Annual Meeting
Sponsorship – ActionHERO Level
Pfizer

AACAP, E. James Anthony, MD, Fund
Virginia Q. Anthony
AACAP Elaine Schlosser Lewis
Award Fund
Susan Mendik
The Sy Syms Foundation c/o Marcy Syms

AACAP Jeanne Sperulock Minority
Medical Student Fellowship Program
62nd Annual Meeting Support
National Institute on Drug Abuse (NIDA)

AACAP Paranjati Tor Joshi, MD,
International Scholar Awards
Paramaji T. Joshi, MD

AACAP Research Initiative Bronze
Science Founder
Sunovion Pharmaceuticals, Inc.

$10,000 - $24,999
AACAP Annual Meeting App Sponsor
American Professional Agency, Inc.

AACAP Annual Meeting
Sponsorship – SidekickHERO Level
Astellas

AACAP Annual Meeting
Education Grant
Sunovion Pharmaceuticals, Inc.
Please consider a Monthly Hope Maker Gift

- You will be investing in the next generation of child psychiatrists, who will make innovative research, training, and treatment.
- Your recurring monthly gift will allow us to plan ahead with confidence and maintain a consistently excellent level of programming throughout the year.
- Your gift is safe, automatic, and effective.

It's easy to sign up: just visit www.aacap.org/donate or give us a call at 202-966-7300 ext. 140.
## TREASURER’S REPORT: STATEMENT OF FINANCIAL POSITION

Our history of fiscal stability allows us to continue to develop products, programs, and services to help our members be leaders in the field of children’s mental health care.

<table>
<thead>
<tr>
<th>2015</th>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
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<tr>
<td>Cash</td>
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<td>Investments</td>
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<td>Receivables, net</td>
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<tr>
<td>Prepaid expenses</td>
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<tr>
<td>Inventory</td>
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<tr>
<td>Property and equipment, net</td>
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<tr>
<td><strong>Total Assets</strong></td>
<td>$14,717,419</td>
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<table>
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<th>2015</th>
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<tbody>
<tr>
<td><strong>LIABILITIES AND NET ASSETS</strong></td>
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<tr>
<td>Liabilities</td>
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<tr>
<td>Accounts payable and accrued expenses</td>
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<td>Deferred revenue</td>
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<td>Regional Council dues payable</td>
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<td><strong>Total Liabilities</strong></td>
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<th>2015</th>
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<tbody>
<tr>
<td><strong>Net Assets</strong></td>
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<tr>
<td>Unrestricted</td>
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<td>Undesignated</td>
<td>$8,028,762</td>
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<td>Board designated</td>
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<td>8,834,077</td>
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<td>Temporarily restricted</td>
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<td>Permanently restricted</td>
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<tr>
<td>11,960,483</td>
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</tr>
<tr>
<td><strong>Total Liabilities &amp; Assets</strong></td>
<td>$14,717,419</td>
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</tbody>
</table>

## STATEMENT OF ACTIVITIES FOR THE YEAR ENDED DECEMBER 31, 2015

### REVENUE AND SUPPORT:

<table>
<thead>
<tr>
<th></th>
<th>UNRESTRICTED</th>
<th>TEMPORARILY RESTRICTED</th>
<th>PERMANENTLY RESTRICTED</th>
<th>TOTAL</th>
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</thead>
<tbody>
<tr>
<td>Membership dues and fees</td>
<td>$2,962,658</td>
<td>-</td>
<td>-</td>
<td>$2,962,658</td>
</tr>
<tr>
<td>Annual meeting and institutes</td>
<td>2,267,567</td>
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<td>2,267,567</td>
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<td>Journal</td>
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<td>-</td>
<td>1,435,986</td>
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<tr>
<td>Grants and contributions</td>
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<td>576,644</td>
<td>25,000</td>
<td>1,434,558</td>
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<td>Publications</td>
<td>268,690</td>
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<td>268,690</td>
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<tr>
<td>Member benefit royalties</td>
<td>180,330</td>
<td>-</td>
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<td>180,330</td>
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<tr>
<td>Advertising</td>
<td>39,780</td>
<td>-</td>
<td>-</td>
<td>39,780</td>
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<tr>
<td>Training</td>
<td>32,114</td>
<td>-</td>
<td>-</td>
<td>32,114</td>
</tr>
<tr>
<td>Building – rental income</td>
<td>30,360</td>
<td>-</td>
<td>-</td>
<td>30,360</td>
</tr>
<tr>
<td>Investment (loss) gain, net</td>
<td>(226,078)</td>
<td>(66,669)</td>
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<td>(292,747)</td>
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<tr>
<td>Other income</td>
<td>4,796</td>
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<td>4,796</td>
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<tr>
<td>Net assets released from restrictions</td>
<td>675,002</td>
<td>-</td>
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<td>675,002</td>
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<tr>
<td><strong>Total revenue and support</strong></td>
<td>8,504,118</td>
<td>(165,027)</td>
<td>25,000</td>
<td>8,364,091</td>
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### EXPENSES:

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<tr>
<th></th>
<th>UNRESTRICTED</th>
<th>TEMPORARILY RESTRICTED</th>
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<th>TOTAL</th>
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<tbody>
<tr>
<td>Program services:</td>
<td></td>
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</tr>
<tr>
<td>Annual meeting and institutes</td>
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<td>1,602,262</td>
</tr>
<tr>
<td>Components</td>
<td>938,677</td>
<td>-</td>
<td>-</td>
<td>938,677</td>
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<tr>
<td>Government affairs</td>
<td>775,953</td>
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<tr>
<td>Special Funds</td>
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<tr>
<td>Journal</td>
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<tr>
<td>Grants</td>
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<tr>
<td>Membership</td>
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<td>372,259</td>
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<tr>
<td>Clinical practice</td>
<td>329,760</td>
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<td>329,760</td>
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<tr>
<td>Research initiatives</td>
<td>321,114</td>
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<tr>
<td>Communications</td>
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<td>-</td>
<td>168,887</td>
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<td>AACAP News</td>
<td>153,225</td>
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<td>Publications</td>
<td>13,948</td>
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<td>13,948</td>
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<td>Presidential initiatives</td>
<td>7,802</td>
<td>-</td>
<td>-</td>
<td>7,802</td>
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<tr>
<td><strong>Total program services</strong></td>
<td>6,704,868</td>
<td>-</td>
<td>-</td>
<td>6,704,868</td>
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</table>

<table>
<thead>
<tr>
<th></th>
<th>UNRESTRICTED</th>
<th>TEMPORARILY RESTRICTED</th>
<th>PERMANENTLY RESTRICTED</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supporting services:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Central office</td>
<td>873,212</td>
<td>-</td>
<td>-</td>
<td>873,212</td>
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<tr>
<td>Fundraising</td>
<td>352,123</td>
<td>-</td>
<td>-</td>
<td>352,123</td>
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<tr>
<td>Building operations</td>
<td>30,360</td>
<td>-</td>
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<tr>
<td><strong>Total supporting services</strong></td>
<td>1,255,695</td>
<td>-</td>
<td>-</td>
<td>1,255,695</td>
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<table>
<thead>
<tr>
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<th>TOTAL</th>
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</thead>
<tbody>
<tr>
<td><strong>Total expenses</strong></td>
<td>7,960,563</td>
<td>-</td>
<td>-</td>
<td>7,960,563</td>
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<table>
<thead>
<tr>
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<th>TOTAL</th>
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</thead>
<tbody>
<tr>
<td>Change in net assets before other changes</td>
<td>543,555</td>
<td>(165,027)</td>
<td>25,000</td>
<td>403,528</td>
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<tr>
<td>Transfer to permanently restricted net assets</td>
<td>-</td>
<td>(260,000)</td>
<td>260,000</td>
<td>-</td>
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<tr>
<td><strong>Change in net assets</strong></td>
<td>543,555</td>
<td>(425,027)</td>
<td>285,000</td>
<td>403,528</td>
</tr>
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</table>

<table>
<thead>
<tr>
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<th>PERMANENTLY RESTRICTED</th>
<th>TOTAL</th>
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<tbody>
<tr>
<td><strong>NET ASSETS:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Beginning</td>
<td>8,290,522</td>
<td>1,458,163</td>
<td>1,798,270</td>
<td>11,546,955</td>
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<tr>
<td>Ending</td>
<td>8,834,077</td>
<td>1,033,136</td>
<td>2,083,270</td>
<td>11,950,483</td>
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