Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than $500,000 and total assets less than $1,250,000 at the end of the year may use this form

▶ *The organization may have to use a copy of this return to satisfy state reporting requirements*

OMB No 1545-1150

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning , 2009, and ending , 20

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization
American Printing History Association, Inc.

Number and street (or P O box, if mail is not delivered to street address) Room/suite
P.O. Box 4519, Grand Central Station

City or town, state or country, and ZIP + 4
New York, N.Y. 10163-4519

D Employer identification number
23-7441237

E Telephone number
212-930-9220

F Group Exemption Number ▶

• ***Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).***

G Accounting Method ☑ Cash ☐ Accrual Other (specify) ▶

I Website: ▶ www.printinghistory.org

J Tax-exempt status (check only one) — ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

H Check ▶ ☑ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check ▶ ☐ if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if $500,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 60,692

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	8,910
	2	Program service revenue including government fees and contracts	2	8,803
	3	Membership dues and assessments	3	41,348
	4	Investment income	4	1,631
	5a	Gross amount from sale of assets other than inventory 5a		
	b	Less: cost or other basis and sales expenses 5b		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from **gaming**, check here ▶ ☐		
	a	Gross revenue (not including $ _____ of contributions reported on line 1) 6a		
	b	Less: direct expenses other than fundraising expenses 6b		
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
	7a	Gross sales of inventory, less returns and allowances 7a		
	b	Less: cost of goods sold 7b		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe ▶ _____)	8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶	9	60,692
Expenses	10	Grants and similar amounts paid (attach schedule)	10	2,000
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	23,500
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	35,286
	16	Other expenses (describe ▶ **See schedule attached** _____)	16	12,642
	17	**Total expenses.** Add lines 10 through 16 ▶	17	73.428
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	(12,736)
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	168,709
	20	Other changes in net assets or fund balances (attach explanation)	20	(10,568)
	21	Net assets or fund balances at end of year Combine lines 18 through 20 ▶	21	145,405

Part II Balance Sheets. If Total assets on line 25, column (B) are $1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	168,709	22	145,405
23	Land and buildings	0	23	0
24	Other assets (describe ▶ _____)	0	24	0
25	**Total assets**	168,709	25	145,405
26	**Total liabilities** (describe ▶ _____)	0	26	0
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	168,709	27	145,405

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Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose? **To promote the study of the history of printing.**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

28	**Publication of a scholarly journal and newsletter and sponsorship of annual conference and regional meetings for individuals and organizations for the exchange of scholarship on the history of printing, publishing, printing technology, the design of letterforms and their effects on society.** (Grants $ **2000.00**) If this amount includes foreign grants, check here ▶ ☐	28a	73,428
29	(Grants $) If this amount includes foreign grants, check here ▶ ☐	29a	
30	(Grants $) If this amount includes foreign grants, check here ▶ ☐	30a	
31	Other program services (attach schedule) (Grants $) If this amount includes foreign grants, check here ▶ ☐	31a	
32	**Total program service expenses** (add lines 28a through 31a) ▶	32	

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
SEE SCHEDULE ATTACHED				

Part V Other Information (Note the statement requirements in the instructions for Part V.)

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✔
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✔
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but **not** reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
a	Did the organization have unrelated business gross income of $1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✔
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0			
b	Did the organization file **Form 1120-POL** for this year?	37b		✔
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		✔
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 , section 4955 ▶ 0			
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b		✔
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e		✔
41	List the states with which a copy of this return is filed. ▶ **New York**			
42a	The organization's books are in care of ▶ **Stephen Crook, Executive Secretary** Telephone no ▶ **212-930-9220**			
	Located at ▶ **New York Public Library, 476 Fifth Ave, New York, N.Y.** ZIP + 4 ▶ **10018-2788**			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		✔
	If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.**			
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		✔
	If "Yes," enter the name of the foreign country ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**—Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43			
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		✔
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		✔

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51.

			Yes	No
46	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	46		✔
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47		✔
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		✔
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		✔
b	If "Yes," was the related organization a section 527 organization?	49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization If there is none, enter "None "

(a) Name and address of each employee paid more than $100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over $100,000 . . . . ▶ 0

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization If there is none, enter "None."

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over $100,000 . ▶ 0

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

▶ David Goodrich
Signature of officer

May 12, 2010
Date

▶ **David Goodrich, Treasurer**
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▶ ☐	Preparer's identifying number (See instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶		EIN ▶	
		Phone no ▶	

May the IRS discuss this return with the preparer shown above? See instructions . . . . ▶ ☐ Yes ☐ No

SCHEDULE A (Form 990 or 990-EZ)

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.** ▶ ***See separate instructions.***

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization	Employer identification number
American Printing History Association, Inc.	23 7441237

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 11, 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.)

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

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

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

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☑ An organization that normally receives: (1) more than 33⅓ % 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 33⅓ % 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.)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ 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 that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III–Functionally integrated **d** ☐ Type III–Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i)		
(ii) A family member of a person described in (i) above? 11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 IV)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc (see instructions) 12

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . 14 %

15 Public support percentage from 2008 Schedule A, Part II, line 14 . . . . . 15 %

16a **33⅓ % support test—2009.** If the organization did not check the box on line 13, and line 14 is 33⅓ % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **33⅓ % support test—2008.** If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓ % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2009.** 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 IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2008.** 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 IV 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 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	52,515	41,047	55,573	76,972	50,258	276,365
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					8,503	8,503
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	52,515	41,047	55,573	76,972	58,761	284,868
7a Amounts included on lines 1, 2, and 3 received from disqualified persons					5,500	5,500
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						
c Add lines 7a and 7b					5.500	5,500
8 **Public support** (Subtract line 7c from line 6)						279,368

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	52,515	41,047	55,573	76,972	58,761	284,868
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,274	818	2,696	1,712	1,631	8,131
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	1,274	818	2,696	1,712	1,631	8,131
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	17,188	16,443	31,799	25,409	300	91,139
13 **Total support.** (Add lines 9, 10c, 11, and 12)	70,977	58,308	90,068	104,093	60,692	384,138

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	73 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	71 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	2 %
18 Investment income percentage from **2008** Schedule A, Part III, line 17	18	2 %

19a **33⅓ % support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33⅓ %, and line 17 is not more than 33⅓ %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☑

b **33⅓ % support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓ %, and line 18 is not more than 33⅓ %, 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 **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Part III, Line 12, 2009. **Mailing list rental** **$300**

AMERICAN PRINTING HISTORY ASSOCIATION, INC
E.I. # 23-7441237
SUPPORTING SCHEDULES TO FORM 990-EZ
For the year ended December 31, 2009

Part I, Line 10

Mark Samuels Lasner Fellowship in Printing History awarded to Jacob W. Lewis for research on Charles Negre and the development of photogravure printing technique.	$ 2,000

Part I, Line 16

Expenses of Annual Conference held in Newport, Rhode Island, October 16 - 17, 2009, other than fees paid to speakers	$ 4,644
Other meetings and lectures, sponsored by local chapters	4,314
Annual Meeting	1,130
Insurance	1,031
Website	166
Bank charges	512
Supplies and misc. expenses	844
	$ 12,642

Part I, Line 20

Correction of prior years' balances	$ (17,643)
Change in value of investment assets	7,075
Total	$ (10,568)

AMERICAN PRINTING HISTORY ASSOCIATION, INC.
E.I. # 23-7441237

Part IV. List of Officers, Trustees, and Key Employees

(a) Name and address	(b) Title and time devoted	(c) Compen-sation	(d) Benefits	(e) Expense Account
Paul W. Romaine 72 Seaman Avenue, #2D New York, NY 10034-2823	President and Trustee Time as needed	0	0	0
Martin Antonetti Mortimer Rare Book Room Neilson Library, Smith College Northampton, MA 01063	Vice-President for Publications and Trustee Time as needed	0	0	0
Virginia Bartow The New York Public Library 530 West 44th Street New York, NY 10036	Vice-President for Membership and Trustee Time as needed	0	0	0
Alice H.R.H. Beckwith 35 Boston Neck Road North Kingstown, RI 02852	Vice-President for Programs and Trustee Time as needed	0	0	0
Deirdre C Stam 2400 Euclid Avenue, Syracuse, NY 1322	Treasurer and Trustee Time as needed	0	0	0
J. Fernando Pena 512 West 151st Street, #7A New York, NY 10031	Secretary and Trustee Time as needed	0	0	0
Eric Holzenberg The Grolier Club of New York 47 East 60th Street New York, NY 10022	Immediate Past President and Trustee	0	0	0
Elizabeth Campbell Denlinger Carl H. Pforzheimer Collection of Shelley and His Circle, Room 319 Stephen A. Schwarzman Bldg. 476 Fifth Avenue New York, NY 10018	Trustee	0	0	0
Russell Maret 140 E. 71st Street, #5B New York, NY 10021	Trustee	0	0	0
Marcia Reed 3477 Maplewood Avenue Los Angeles, CA 90066	Trustee	0	0	0
Terrence P. Chouinard 11744 Antler Ridge Way Athens, AL 35611	Trustee	0	0	0
Jeffrey Cooper P.O Box 15903, Philadelphia, PA 19103	Trustee	0	0	0

Carl Darrow 453 Hart Road Conway, MA 01341	Trustee	0	0	0
Robert McCamant Sherwin Beach Press 119 W. Hubbard Chicago, IL 60610	Trustee	0	0	0
Steven Escar Smith 1012 Madera Circle, College Station, TX 77840	Trustee	0	0	0
David Whitesell P.O. Box 20616 Worcester, MA 01602	Trustee	0	0	0
William S. Peterson 517 A Street, SE Washington, DC 20003	Editor , PRINTING HISTORY) and Trustee Time as needed	$7,000	0	0
Brian Frykenberg 5 Appletree Lane Andover, MA 01810-4101	Editor, THE APHA NEWSLETTER and Trustee, Time as needed	$2,000	0	0
Mike Denker 12320 Stoney Creek Road Potomac, MD 20854	President, Chesapeake Chapter and Trustee Time as needed	0	0	0
John McBride 1125 Delaware Street Berkeley, CA 94702-1619	President, Northern California Chapter and Trustee Time as needed	0	0	0
Mary Manning Cribari Court San Jose, CA 95135	President, Northern California Chapter and Trustee Time as needed	0	0	0
Kitty Maryatt 1030 Columbia Avenue Claremont, CA 91711	President, Southern California Chapter and Trustee Time as needed	0	0	0
Joel Mason 333 West 18th Street New York, NY 10011	President, New York Chapter and Trustee Time as needed	0	0	0
Robert M. Soorian 101 Central Avenue, Newtonville, MA 02460	President, New England Chapter and Trustee Time as needed	0	0	0
Stephen Crook Berg Collection of English and American Literature (Room 320) Stephen A. Schwarzman Bldg. The New York Public Library 476 Fifth Avenue New York, NY 10018	Executive Secretary Time as needed	$12,000	0	0