

#### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# Form **990**

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047 2009

Open to Public Inspection

A Fo	r the	2009 са	alendar yea	r, or tax year beginning 01-0	11-2009 and ending 12-31-20	09		
		pplicable	Please	C Name of organization FINRA INVESTOR EDUCATION I	FOUNDATION			entification number
	dress ch		use IRS label or	Doing Business As			20-086377 E Telephone no	
	me cha		print or type. See				(202) 728-	8949
	ial retu		Specific Instruc-	Number and street (or P O bo 1735 K STREET NW	x if mail is not delivered to street addi	ess) Room/suite	<b>G</b> Gross receipts	
	mınate		tions.					
	ended			City or town, state or country, WASHINGTON, DC 200061506				
j Api	olication	n pending	E No.		. FF	T	J	
				ne and address of principal ( M GANNON	omcer		his a group retur iates?	n for
				(STREET NW NGTON,DC 200061506				
			*********			1 ' '	all affiliates includ	led? Yes No
<b>I</b> Ta	x-exen	npt status	<b>501(c)</b>	)(4) ◀ (insert no)	)(1) or	1	oup exemption nu	
J W	ebsite	e: ► WW	/W FINRAF	OUNDATION ORG		7		
K For	n of or	ganızatıon	Corporat	tion Trust Association Ot	ner ►	L Year of	formation 2004	State of legal domicile DE
		Sum					I .	
	1	,		e organization's mission or i	_	TO DROVIDE		A MEDICANIC WITH
aı					DUCATION FOUNDATION IS ESSARY FOR FINANCIAL SU			DAMERICANS WITH
Governance								
<u> </u>								
重								
9	2	Check	this box 🛏	if the organization discont	inued its operations or dispose	d of more thar	n 25% of its net	assets
<b>2</b> 6	3	Numbe	r of voting r	nembers of the governing bo	dy (Part VI, line 1a)		. 3	
8	4	Numbe	r of ındepen	dent voting members of the	governing body (Part VI, line 1	.b)	. 4	!
ĝ	5	Total n	umber of en	nployees (Part V , line 2a)			5	
Activities	6			olunteers (estimate if neces			6	
⋖					Part VIII, column (C), line 12		7:	a (
	1	_		ness taxable income from F		•	71	
						Dei	ior Year	Current Year
	8	Contri	hutions and	d grants (Part VIII Jung 1h)			5,000,000	5,000,000
ē				d grants (Part VIII, line 1h)	•	5,000,000	5,000,000	
eur	9			revenue (Part VIII, line 2g)	•	<u> </u>	0	
Raveni	10			me (Part VIII, column (A), li	•	2,530,527	1,274,751	
_	11				5, 6d, 8c, 9c, 10c, and 11e)		0	0
	12				equal Part VIII, column (A), lı	ne	7,530,527	6,274,751
	13				lumn (A), lines 1-3)		4,116,291	3,841,529
	14				ımn (A), line 4)		1,110,231	0,011,029
	15				efits (Part IX, column (A), lines	5_	<u> </u>	
8	13	10)	es, other co	ompensation, employee bein	ents (Fart IX, Column (A), mes		О	0
Expenses	16a	Profes	sional fund	raising fees (Part IX, colum		0	0	
ਡੌ	ь	Total fu	ndraising exp	enses (Part IX, column (D), line 2	5) <b>-</b> 0			
_	17	Other	expenses (	(Part IX, column (A), lines 1	1a-11d, 11f-24f)		6,392,968	7,340,946
	18	Total	expenses /	Add lines 13–17 (must equa	al Part IX, column (A), line 25)		10,509,259	11,182,475
	19	Reven	ue less exp	penses Subtract line 18 from	m line 12		-2,978,732	-4,907,724
<b>8</b> €						_	ng of Current	End of Year
Not Assets or Fund Balances							Year	
Ass IBa	20			rt X, line 16)			76,183,933	73,943,044
<u> </u>	21		-				278,077	1,177,437
	22				. from line 20		75,905,856	72,765,607
Pai	rt II		ature Blo					
					ned this return, including accompanyir of preparer (other than officer) is bas			
				· · · · · · · · · · · · · · · · · · ·				
Sigr		<b>IN</b>				2010	0-11-05	
Here	е	Sign	ature of office	er		Date	2	
			N M GANNON					
		Тур	e or print nam	e and title				
		Preparer	's <b>.</b>		Date	Check If	Preparer's identi	
Paid		signatur				self- empolyed 🕨 🔽	(see instructions	5)
	arer's	Firm's n	ame (or yours	s L ERNST & YOUNG US LLP		. , 1		
Use		ıf self-er	nployed),	<b>-</b>	UE 075 2200		EIN Þ	
	.,	address,	and ZIP + 4	TWO NORTH CENTRAL AVENU	JE STE 2300		Phone no 🕨 (6	502) 322-3000
				PHOENIX, AZ 85004				
May	the IR	S discus	s this retu	rn with the preparer shown a	bove? (see instructions) .			┌Yes ┌No

#### Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

THE MISSION OF THE FINRA INVESTOR EDUCATION FOUNDATION IS TO PROVIDE UNDERSERVED AMERICANS WITH THE KNOWLEDGE, SKILLS AND TOOLS NECESSARY FOR FINANCIAL SUCCESS THROUGHOUT LIFE

<b>4</b> e	Total program serv	ice evnenses <b>k</b> \$	10 678 67	2							
	(Expenses \$	1,104,554 inc	udıng grants o	of\$	) (Revenue \$	)					
4d	Other program serv	vices (Describe in Sch	edule O )								
	INVESTOR TROTECTION	T CAPITALON SEE SCHEDOL									
4c	(Code INVESTOR PROTECTION	) (Expenses \$ N CAMPAIGN - SEE SCHEDUL	2,697,145 F O	including grants of \$	) (Revenue \$	,					
4-	(Codo	\ /Evnances &	2 607 145	uncluding ampts of t	) (Payanya d	\					
	MILITARY FINANCIAL EDUCATION PROJECT - SEE SCHEDULE O										
4b	(Code	) (Expenses \$	3,035,444	including grants of \$	) (Revenue \$	)					
	GRANT PROGRAM - SEE	E SCHEDULE O									
4a	(Code	) (Expenses \$	3,841,529	including grants of \$	3,841,529 ) (Revenue \$	)					
4	Section 501(c)(3) a allocations to others	nd 501(c)(4) organizati s, the total expenses, a	ons and secti nd revenue, if	on 4947(a)(1) trusts a any, for each program s	·	-					
	•	ese changes on Schedu									
3	Did the organization services?	cease conducting, or n	nake sıgnıfıcar	nt changes in how it cor		Yes 🔽 No					
	If "Yes," describe th	ese new services on Sc	hedule 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?										

Part IV	Checklist	of Red	uired	Schedule

			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		Νo
2	Is the organization required to complete Schedule B, Schedule of Contributors? 5	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, 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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		No
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D,  Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ 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.			
	◆ 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.			
	◆ 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12 <b>A</b>	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A Yes			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		l No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
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	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
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		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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) and 501(c)(4) 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		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		Νο
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
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		N o
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>990</b>	(2009)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance							
			Yes	No				
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable							
	<b>1a</b> 21							
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0							
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes					
	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							
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b						
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νo				
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b						
	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		Νο				
	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							
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο				
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo				
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c						
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b						
	Organizations that may receive deductible contributions under section 170(c).							
	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		Νo				
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo				
d	If "Yes," indicate the number of Forms 8282 filed during the year							
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo				
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο				
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g						
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h						
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8						
	Sponsoring organizations maintaining donor advised funds.							
а	Did the organization make any taxable distributions under section 4966?	9a						
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b						
)	Section 501(c)(7) organizations. Enter							
а	Initiation fees and capital contributions included on Part VIII, line 12   10a							

10b

11a

11b

**12b** 

Gross receipts, included on Form 990, Part VIII, line 12, for public use of club

**b** Gross income from other sources (Do not net amounts due or paid to other sources

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

against amounts due or received from them ) . . . . . . . .

**b** If "Yes," enter the amount of tax-exempt interest received or accrued during the

facilities

year

Section 501(c)(12) organizations. Enter

a Gross income from members or shareholders . .

12a

1735 K STREET NW

(202) 728-8949

WASHINGTON, DC 200061506

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 6			
ь	Enter the number of voting members that are independent 1b 5			
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		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the			110
	year by the following		v	
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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 in Schedule O	9		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
Re	venue Code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	103	No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			110
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11		11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in 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		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure	TOD		
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orga	nızatıor	n 🕨
	MARCIA E ASQUITH			

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### 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 Use Schedule J-2 if additional space is needed

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. See 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

<b>(A)</b> Name and Title	(B) Average hours	rage Position (check all urs that apply)						(D) Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
RICHARD G KETCHUM CHAIRMAN (AS OF 3/16/09)	1 0	х						0	817,361	250,939
MARY L SCHAPIRO CHAIRMAN (THROUGH 1/23/09)	1 0	х						0	7,360,562	10,057
IDALIA P FERNANDEZ BOARD MEMBER	1 0	х						О	0	0
BONNIE G HILL BOARD MEMBER	1 0	х						0	0	0
DAVID W HUNTER BOARD MEMBER	1 0	х						0	0	0
DALLAS L SALISBURY BOARD MEMBER	1 0	х						0	0	0
SHARON P SMITH BOARD MEMBER	1 0	х						0	0	0
JOHN M GANNON PRESIDENT	32 0			х				0	573,990	46,282
EILEEN M FAMIGLIETTI TREASURER	5 0			х				0	409,529	86,971
MARCIA E ASQUITH SECRETARY	1 0			х				0	430,629	95,657
MICHAEL D JONES FORMER PRESIDENT							х	0	1,068,846	0

1b Total .

+	0	10,660,917

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

			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3	Yes	
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? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νο

#### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
GMMB INC PO BOX 415312 BOSTON, MA 022415312	SEE SCHEDULE 0	2,694,958
APPLIED RESEARCH CONSULTING LLC 320 WEST 13TH STREET NEW YORK, NY 10014	SEE SCHEDULE O	589,039
INCHARGE EDUCATION FOUNDATION 2101 PARK CENTER DRIVE ORLANDO, FL 32835	SEE SCHEDULE O	379,000
CARDEN COMMUNICATIONS 800 COMMERCE DRIVE UPPER MARLBORO, MD 20774	SEE SCHEDULE O	257,135
US EXPRESS FREIGHT SYSTEMS 9301 PEPPERCORN PLACE LARGO, MD 20774	SEE SCHEDULE O	161,035
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►7	who received more than	

Form 9								Page <b>9</b>
Part \	<b>/!!!!</b>	Statement of	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
まま	1a	Federated cam	paigns 1a	·				
Contributions, gifts, grants and other similar amounts	ь	Membership du	ies 1 <b>b</b>					
S, Ç	C	Fundraising eve	ents <b>1c</b>					
無った	d	Related organiz	zations 1d	5,000,000				
<u>⊮</u>	e	Government grant	s (contributions) 1e					
io S	f	All other contribution	ons, gifts, grants, and <b>1f</b>					j i
(한 축	g		ibutions included in					
늘	-	lines 1a-1f\$_						
ပ္ပန	h	Total. Add lines	s 1a-1f	🟲	5,000,000			
				Business Code				
Program Service Revenue	2a							
.¥ ₽	ь							
- P	c							
er M	d							
<u>ج</u>	e							
ura.	f	All other progra	am service revenue					
ڏ ک		T-4-1 0 dd l	- 2- 26		0			
	g 3		s 2a-2f		0			
			ar amounts)		1,274,751			1,274,751
	4		stment of tax-exempt bond		0			
	5	Royalties			0			
			(ı) Real	(II) Personal				
	6a	Gross Rents						
	ь	Less rental expenses						
	c	Rental income						
	d	or (loss) Net rental inco	me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	3,150,000					
	b	Less cost or other basis and	3,150,000					
		sales expenses Gaın or (loss)						
	d		[ss)	<u> </u>	0			
	8a		rom fundraising		9			
Other Revenue		events (not inc \$ of contributions	luding					
<u>u</u>	<u>.</u>	1	a 					
즂	b c		penses <b>b</b> (loss) from fundraising		0			
•	9a	Gross income f	rom gaming activities ne 19					
	b c		a penses b (loss) from gaming acti		0			
	10a		ınventory, less					
	Ь	Less cost of a	oods sold <b>b</b>					
	c	=	(loss) from sales of inv	∟ entory ►	О			
		Miscellaneous		Business Code				
	11a							
	ь		_					
	c							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d		0			
	12	Takal	Coolinghausta	<b>*</b>	U			
	12	iotai revenue.	See Instructions .		6,274,751		0	1,274,751

	990 (2009)				Page <b>10</b>
Pari	Statement of Functional Expenses  Section 501(c)(3) and 501(c)(4) organizations m	ust complete all c	columns.		
A	Il other organizations must complete column (A) but are not required to			(D).	
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	3,841,529	3,841,529		· ·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	0			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0			
9	Other employee benefits	0			_
10	Payroll taxes	0			
11	Fees for services (non-employees)				
а	Management	3,034,891	2,701,322	333,569	0
ь	Legal	2,218	0	<del>                                     </del>	0
c	Accounting	39,950	0	<del>'  </del>	0
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	3,900	0	3,900	0
g	Other	0		3,500	
12	Advertising and promotion	2,903,105	2,890,587	12,518	0
13	Office expenses	697,882	684,143	<del>                                     </del>	0
14	Information technology	37,050	10,000	<del>  '  </del>	0
15	Royalties	233,760	232,593	<del>                                     </del>	0
16	Occupancy	67,766	67,766	<del>                                     </del>	0
17	Travel	188,786	160,055	+	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	100,033	20,731	
19	Conferences, conventions, and meetings	121,978	87,216	34,762	0
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0			
23	Insurance	0			
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	ALL OTHER EXPENSES	9,660	3,461	6,199	0
b					_
c					
d	_				
e					-
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	11,182,475	10,678,672	503,803	0
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	-1,102,113		333,003	
	campaign and fundraising solicitation				

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,457,107	1	1,045,472
	2	Savings and temporary cash investments	51,344,377	2	44,415,458
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	4,546	4	115,158
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$ Complete Part II of			
		Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
8	8	Inventories for sale or use		8	
⋖∣	9	Prepaid expenses and deferred charges	53,306	9	181,663
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	ь	Less accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	23,324,597	11	28,170,522
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	0	15	14,771
	16	Total assets. Add lines 1 through 15 (must equal line 34)	76,183,933	16	73,943,044
	17	Accounts payable and accrued expenses .	256,235	17	658,046
	18	Grants payable	9,500	18	519,044
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
<u>8</u>	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
굨		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	12,342	25	347
	26	Total liabilities. Add lines 17 through 25	278,077	26	1,177,437
ě		Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 through 29, and lines 33 and 34.			
au	27	Unrestricted net assets	75,905,856	27	72,765,607
- B	28	Temporarily restricted net assets		28	
필	29	Permanently restricted net assets		29	
훒		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete			
or Fund Balance		lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ř	33	Total net assets or fund balances	75,905,856	33	72,765,607
~	34	Total liabilities and net assets/fund balances	76,183,933	34	73,943,044

#### Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	<b>2</b> c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis 🔽 Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493316009250

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes," to Form 990, Part TV. line 6. 7. 8. 9. 10. 11. or 12.

erna	l Revenue Service		orm 990. ► See separate instructions.		Inspection
	me of the organi RA INVESTOR EDUCA			Employer identif	ication number
LTIN	RA INVESTOR EDUC	ATION FOUNDATION		20-0863779	
Pa			dvised Funds or Other Similar F	unds or Accoun	ts. Complete if the
	organiz	ation answered "Yes" to Form 99	(a) Donor advised funds	(b) Funds an	d other accounts
	Total number a	t end of year	(a) Bonor advised idinas	(b) i alius ali	a other accounts
		ributions to (during year)			
		ts from (during year)			
		e at end of year			
	_		sors in writing that the assets held in do organization's exclusive legal control?	noradvised	┌ Yes ┌ No
	used only for c	- · · · · · · · · · · · · · · · · · · ·	donor advisors in writing that grant fund efit of the donor or donor advisor, or for a	•	┌ Yes
aı	rt III Conse	rvation Easements. Complete	ıf the organization answered "Yes"	to Form 990, Part	IV, line 7.
	Preservati Protection Preservati Complete lines	conservation easements held by the or on of land for public use (e g , recreating of natural habitat on of open space 2a-2d if the organization held a qualing last day of the tax year	on or pleasure) Preservation of a	certified historic str	•
	easement on ti	ie last day of the tax year		Held at t	he End of the Year
a	Total number o	f conservation easements		2a	
b	Total acreage i	restricted by conservation easements		2b	
c	Number of cons	servation easements on a certified his	toric structure included in (a)	2c	
d	Number of cons	servation easements included in (c) a	cquired after 8/17/06	2d	
	Number of cons	servation easements modified, transfe	rred, released, extinguished, or terminat	ted by the organization	on during
	the taxable yea	ar <b>&gt;</b>			
	Number of stat	es where property subject to conserva	ation easement is located ►		
		nization have a written policy regarding the conservation easements it holds?	the periodic monitoring, inspection, hai	ndling of violations, a	nd   Yes   No
	Staff and volun	teer hours devoted to monitoring, insp	pecting and enforcing conservation ease	ments during the yea	r <b>►</b>
	A mount of expe	enses incurred in monitoring, inspecti	ng, and enforcing conservation easemen	ts during the year 🟲	\$
		servation easement reported on line 2 ) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of se	ection	┌ Yes ┌ No
	balance sheet, the organizatio	and include, if applicable, the text of t n's accounting for conservation easen		al statements that de	escribes
a r			ns of Art, Historical Treasures, 'Yes" to Form 990, Part IV, line 8.	, or Other Simila	r Assets.
a	If the organizat art, historical t	ion elected, as permitted under SFAS reasures, or other similar assets held	116, not to report in its revenue statem for public exhibition, education or resea ancial statements that describes these	rch in furtherance of	
b	historical treas	·	116, to report in its revenue statement public exhibition, education, or research		•
	(i) Revenues II	ncluded in Form 990, Part VIII, line 1		<b>►</b> \$	
	(ii) Assets incl	uded in Form 990, Part X		<b>►</b> \$	
		cion received or held works of art, historics required to be reported under SFA	orical treasures, or other similar assets S 116 relating to these items	for financial gain, pro	vide the

Revenues included in Form 990, Part VIII, line 1

**b** Assets included in Form 990, Part X

Par	t III	Organizations Maintaining Co	llections of Art	<u>, His</u>	tori	<u>cal Tr</u>	easur	es, or C	the	r Similar As	sets (c	ontinued)
3		ng the organization's accession and othens (check all that apply)	r records, check any	ofth	ie foll	owing t	that are	a sıgnıfıca	ant us	se of its collec	tion	
а	Γ	Public exhibition		d	Γ	Loan	orexcha	nge prog	rams			
b	Γ	Scholarly research		e	Γ	Other						
c	Preservation for future generations											
4		vide a description of the organization's co : XIV	ollections and explai	ın hov	v the	/ furthe	er the or	ganızatıor	ı's ex	empt purpose	ın	
5		ing the year, did the organization solicit o ets to be sold to raise funds rather than t			,					ılar	☐ Yes	┌ No
Pa	rt IV	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	d "Ye	es" to Form !	₹90,	
1a		he organization an agent, trustee, custod uded on Form 990, Part X?						other ass	ets n	ot	┌ Yes	┌ No
b	If"Y	es," explain the arrangement in Part XIV	/ and complete the t	follow	ıng ta	able		Г		Δ.	nount	
С	Pos	unning halance						-	1c		- Iount	
	_	linning balance						-	1d			
d		ditions during the year						}				
e •		tributions during the year						}	1e			
f		ling balance						L	1f			
2a		the organization include an amount on Fo		21?							│ Yes	☐ No
b		es," explain the arrangement in Part XIV				1 .03 *	-0 -	005		T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Pa	rt V	Endowment Funds. Complete	f the organization (a)Current Year		were Prior \			orm 990, Years Back		t IV, line 10. Three Years Back	(e)Four V	'ears Back
1a	Bea	inning of year balance	(a)cancile real	(0)	, 1101	cui	(C) WO	. cars back	(4)	ee rears back	(C) Our 1	cars back
		ntributions							+			
c		estment earnings or losses							+			
d		nts or scholarships										
e	Oth	er expenditures for facilities programs										
f	Adn	ninistrative expenses										
g	End	of year balance										
2	Prov	vide the estimated percentage of the yea	r end balance held a	ıs								
а	Boa	rd designated or quasi-endowment 🕨	%									
ь	Perr	manent endowment 🕨 %										
c	Terr	m endowment 🕨 %										
3a		there endowment funds not in the posses	ssion of the organiza	ation t	that a	re held	d and ad	mınıstere	d for t	the	Yes	No
	(i) u	unrelated organizations			•					3a		
b		related organizations		d on S	ched	ule R?			٠	3a	(ii)   b	
4		cribe in Part XIV the intended uses of th										
Pa	rt VI	Investments—Land, Buildings	s, and Equipme	nt. S	ee F	orm 9	90, Par	t X, line	10.	T		
		Description of investment				a) Cost o sıs (ınve	or other estment)	(b)Cost or basis (ot		(c) Accumulat depreciation		Book value
1a	Land											
b	Build	ıngs										
c	Lease	ehold ımprovements										
d	Equip	oment										
е	Othe	r	<u> </u>									
		d lines to to (Column (d) about desiral Fo	000 Part V!	(E)	lim-	10/-11				-		

Part VII Investments—Other Securities. See  (a) Description of security or category	Form 990, Part X, line 12	. (c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
, , , , , , , , , , , , , , , , , , , ,	•	
Part VIII Investments—Program Related. Se	e Form 990, Part X, line 1	
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
(	•	
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Paalivalia
(	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15. ption	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X	ne 15. ption	
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15. ption	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X	ne 15. ption  (5.)  (7.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability	15.)  (, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	(5.) (, line 25. (b) A mount	

Schedule D (Form 990) 2009

PART XI, LINE 8

c Ac 5 To Part XI Complet Part V, II	Supplemental Inf		 t I, line 1	Part III, lı	nes 1a and 4, P		
c Ac 5 To Part XI	dd lines 4a and 4b otal expenses Add lines 3 an  Supplemental Inf		t I, line 1			5	
<b>c</b> A c	dd lines <b>4a</b> and <b>4b</b> otal expenses Add lines <b>3</b> an					-	11,182,475
	•		. [4	<u>њ</u> 		4c	
- •	ther (Describe in Part XIV)		. 4	<b>н</b> ь			
<b>b</b> 01						1	i .
<b>a</b> In	ovestment expenses not inclu	ded on Form 990, Part VIII, line 7b .	. 4	la			
<b>4</b> A r	mounts included on Form 990	, Part IX, line 25, but not on line 1:	_				
<b>3</b> Su	ubtract line <b>2e</b> from line <b>1</b> .					3	11,182,475
<b>e</b> A 0	dd lines <b>2a</b> through <b>2d</b>					2e	2,759,599
<b>d</b> 01	ther (Describe in Part XIV)		. 2	2d		1	
	therlosses		.   2	2c		1	
	rior year adjustments		<u> </u>	2b		1	
	onated services and use of fa	·	.   2	2a	2,759,599		
		not on Form 990, Part IX, line 25				<u> </u>	
	otal expenses and losses per	-		_		1	13,942,074
Part XII		penses per Audited Financial	-			_	
		i <b>4c.</b> (This should equal Form 990, Part	I, line 1	2)		5	6,274,751
	dd lines <b>4a</b> and <b>4b</b>		. <u> </u>			4c	
	ther (Describe in Part XIV)		41			1	
		ided on Form 990, Part VIII, line 7b	.   4a	<b>.</b>			
		D, Part VIII, line 12, but not on line 1	• •			<u> </u>	0,274,731
	_					2e 3	4,527,074 6,274,751
	ther (Describe in Part XIV) dd lines <b>2a</b> through <b>2d</b> .		. 20	g		3.0	4 E27 074
	ecoveries of prior year grants		. 20	_		1	
	onated services and use of fa		21		2,759,599	-	
	et unrealized gains on invest		. 2a		1,767,475	-	
		t not on Form 990, Part VIII, line 12	ı	1			
		r support per audited financial statemer	nts .			1	10,801,825
Part XI		evenue per Audited Financial S		ents Wi	th Revenue		
		per financial statements Combine lines	3 and 9			10	-3,140,249
<b>9</b> Tot	tal adjustments (net) Add Iır	es 4 - 8				9	1,767,475
8 Otl	her (Describe in Part XIV)					8	1,767,475
7 Pri	or period adjustments					7	
6 Inv	vestment expenses					6	
<b>5</b> Do	nated services and use of fac	ilities				5	
<b>4</b> Ne	t unrealized gains (losses) oi	n investments				4	
<b>3</b> Exc	cess or (deficit) for the year	Subtract line 2 from line 1				3	-4,907,724
<b>2</b> Tot	tal expenses (Form 990, Par	: IX, column (A), line 25)				2	11,182,475
<b>1</b> Tot	tal revenue (Form 990, Part \	/III, column (A), line 12)				1	6,274,751

CHANGE IN MARKET VALUE

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990

OMB No 1545-0047

DLN: 93493316009250

Inspection

Name of the organization	INDATION					Employer identification	on number
FINRA INVESTOR EDUCATION FOL	JNDATION					20-0863779	
Part I General Information	n on Grants and	Assistance				•	
<ul> <li>Does the organization maintain the selection criteria used to av</li> <li>Describe in Part IV the organization</li> </ul>	vard the grants or ass	sistance?			_	· · · · · · · · · · · · · · · · · · ·	✓ Yes
Part II Grants and Other A Form 990, Part IV, lin Part IV and Schedule	e 21 for any recipi	ent that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000.	Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							

Part III	Grants and Other Assistance to Individuals in the United States.	Complete if the organization answered "Yes" to Form 990,	, Part IV, line 22
	Use Schedule I-1 (Form 990) if additional space is needed.		

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Suppleme	ental Information. Complete t	his part to provide the information required in Part I, line 2, and any other additional information.
Ident if ier	Return Reference	Explanation
FORM 990, SCHEDULE I	DESCRIPTION OF ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANTS	FOLLOWING APPROVAL OF A GRANT APPLICATION BY THE BOARD OF DIRECTORS, THE FOUNDATION EXECUTES A GRANT AGREEMENT WITH THE APPLICANT THIS AGREEMENT SPECIFIES THE TERMS AND CONDITIONS OF THE GRANT, AS WELL AS THE REPORTING AND PAYMENT SCHEDULE GRANTS ARE DISBURSED IN INSTALLMENTS KEYED TO THE SUBMISSION OF NARRATIVE AND FINANCIAL PROGRESS REPORTS AND THE COMPLETION OF DELIVERABLES, WHICH ARE REVIEWED BY THE FOUNDATION TO ENSURE QUALITY AND COMPLIANCE WITH THE GRANT AGREEMENT AT ITS DISCRETION, THE FOUNDATION MAY ALSO CONDUCT SITE VISITS TO OBSERVE PROJECTS AND EXAMINE OUTCOMES IN ADDITION TO PROGRESS REPORTS, GRANTEES ARE REQUIRED TO COMPLETE A FINAL NARRATIVE AND FINANCIAL REPORT DETAILING PROJECT ACTIVITIES AND ACCOUNTING FOR THE USE OF GRANT FUNDS

Software ID:

Software Version:

**EIN:** 20-0863779

Name: FINRA INVESTOR EDUCATION FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

Form 990,Schedule 1, Pal	t 11, Grants and	d Other Assistance	to dovernments	and Organizations	3 III the Officed Sta	ies	_
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFSCME TRAINING AND EDUCATION INSTITUTE 1625 L STREET NW WASHINGTON,DC 20036	52-1148573	501(C)(3)	100,000				SEE SCHEDULE O
AMERICAN CREDIT ALLIANCE2 S DELMORR AVENUE MORRISVILLE,PA 19067	22-3183518	501(C)(3)	19,000				SEE SCHEDULE O
AMERICAN PUBLIC MEDIA 480 CEDAR STREET ST PAUL,MN 55101	41-0953924	501(C)(3)	284,461				SEE SCHEDULE O
ASPIRA ASSOCIATION 1444 EYE STREET NW WASHINGTON,DC 20005	13-2627568	501(C)(3)	258,603				SEE SCHEDULE O
ASSN FOR FINANCIAL COUNSELING & PLANNING EDUCATION1500 W 3RD AVENUE COLUMBUS, OH 43212	38-2627822	501(C)(3)	159,014				SEE SCHEDULE O
ATHENS-CLARKE COUNTY LIBRARY ENDOWMENT FUND2025 BAXTER STREET ATHENS, GA 30606	58-2200588	501(C)(3)	47,255				SEE SCHEDULE O
CHESAPEAKE PUBLIC LIBRARY FOUNDATION298 CEDAR ROAD CHESAPEAKE,VA 23322	54-1839433	501(C)(3)	50,000				SEE SCHEDULE O
COMMUNITY TELEVISION FOUNDATION OF SOUTH FLORIDA 14901 NE 20 AVENUE MIAMI,FL 33181	59-0737868	501(C)(3)	365,776				SEE SCHEDULE O
COUNCIL ON ECONOMIC EDUCATION122 EAST 42ND STREET SUITE 2600 NEW YORK, NY 10168	13-1623848	501(C)(3)	123,806				SEE SCHEDULE O
CUYAHOGA COUNTY PUBLIC LIBRARY2111 SNOW ROAD PARMA,OH 44134	34-6000819	501(C)(3)	49,500				SEE SCHEDULE O

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant ıf applıcable organization arant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) DURHAM LIBRARY 56-2189129 501(C)(3) SEE SCHEDULE O FOUNDATIONPO BOX 3809 49,840 DURHAM, NC 27702 **ESTES PARK PUBLIC** 74-2385213 501(C)(3) SEE SCHEDULE O LIBRARY FOUNDATIONPO 31,102 BOX 1470 ESTES PARK, CO 80517 20-4781422 501(C)(3) SEE SCHEDULE O EXTENSION FOUNDATION PO BOX 830918 134,851 LINCOLN, NE 68583 54-1254491 501(C)(3) SEE SCHEDULE O FIRST NATIONS DEVELOPMENT INSTITUTE 156,525 703 3RD AVENUE LONGMONT, CO 80501 FLORIDA STATE 59-3211153 501(C)(3) SEE SCHEDULE O UNIVERSITY RESEARCH 102,454 FOUNDATION97 S WOODWARD AVENUE TALLAHASSEE, FL 32306 FRIENDS OF THE FARGO 45-0440375 501(C)(3) SEE SCHEDULE O PUBLIC LIBRARYPO BOX 26,500 1365 FARGO, ND 58103 501(C)(3) FRIENDS OF THE FOND DU 39-1627883 SEE SCHEDULE O LAC PUBLIC LIBRARY32 26,263 SHEBOYGAN STREET FOND DU LAC, WI 54935 FRIENDS OF THE 57-0918036 501(C)(3) SEE SCHEDULE O GEORGETOWN LIBRARY 43,650 INC405 CLEVELAND STREET GEORGETOWN, SC 29440 FRIENDS OF THE 57-0520476 501(C)(3) SEE SCHEDULE O GREENVILLE COUNTY 49,550 LIBRARY SYSTEM 25 HERITAGE GREEN PLACE GREENVILLE, SC 29601 FRIENDS OF THE 30-0127427 501(C)(3) SEE SCHEDULE O LEWISTON LIBRARY INC 44,743 428 THAIN ROAD LEWISTON, ID 83501

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FRIENDS OF THE LOVELAND PUBLIC LIBRARY300 N ADAMS AVENUE LOVELAND, CO 80537	84-1424591	501(C)(3)	15,944				SEE SCHEDULE O			
FRIENDS OF THE NEWTON FREE LIBRARY30 HOMER STREET NEWTON,MA 02459	04-6001404	501(C)(3)	16,322				SEE SCHEDULE O			
INNOVATIONS FOR POVERTY ACTION85 WILLOW STREET BUILDING B NEW HAVEN,CT 06511	06-1660068	501(C)(3)	98,120				SEE SCHEDULE O			
LEARNING POINT ASSOCIATES1120 E DIEHL ROAD NAPERVILLE,IL 60563	37-1161423	501(C)(3)	96,956				SEE SCHEDULE O			
LIBRARY FOUNDATION OF LOS ANGELES630 WEST 5TH STREET LOS ANGELES,CA 90071	95-4368250	501(C)(3)	50,000				SEE SCHEDULE O			
MIDDLE COUNTRY LIBRARY FOUNDATION101 EASTWOOD BOULEVARD CENTERREACH,NY 11720	11-3388626	501(C)(3)	38,700				SEE SCHEDULE O			
NAPERVILLE PUBLIC LIBRARY FOUNDATION 2035 SOUTH NAPER BOULEVEARD NAPERVILLE,IL 60565	36-3209642	501(C)(3)	38,924				SEE SCHEDULE O			
NATIONAL BUREAU ON ECONOMIC RESEARCH 1050 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02138	13-1641075	501(C)(3)	135,249				SEE SCHEDULE O			
NATRONA COUNTY PUBLIC LIBRARY307 E 2ND STREET CASPER,WY 82601	23-7248551	501(C)(3)	8,800				SEE SCHEDULE O			
NEIGHBORHOOD HOUSING SERVICES OF PHOENIX 1405 EAST MCDOWELL ROAD SUITE 100 PHOENIX, AZ 85006	51-0152395	501(C)(3)	40,610				SEE SCHEDULE O			

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (d) A mount of cash (a) Name and address of **(b)** EIN (c) IRC Code section (e) A mount of non-(f) Method of (q) Description of (h) Purpose of grant organization ıf applicable arant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) NORTH CAROLINA STATE 56-6000756 115(A) SEE SCHEDULE O UNIVERSITY (BRAZEL)PO 55,163 BOX 7214 RALEIGH, NC 27695 NORTH CAROLINA STATE 56-6000756 115(A) SEE SCHEDULE O UNIVERSITY (CLARK)2701 58,014 SULLIVAN DRIVE RALEIGH, NC 27695 31-6401599 SEE SCHEDULE O OHIO STATE UNIVERSITY 501(C)(3) RESEARCH FOUNDATION 23,201 1960 KENNY ROAD COLUMBUS, OH 43210 ORANGE COUNTY LIBRARY 50-2045143 501(C)(3) SEE SCHEDULE O DISTRICT101 EAST 49,680 CENTRAL BOULEVARD ORLANDO, FL 32801 PACE UNIVERSITY 13-5562314 501(C)(3) SEE SCHEDULE O SCHOOL OF LAWONE PACE 61,490 PLAZA NEW YORK, NY 10038 06-1283798 PATRONS OF THE NEW 501(C)(3) SEE SCHEDULE O HAVEN LIBRARY INC133 39,182 **ELM STREET** NEW YORK, NY 06510 PIKE COUNTY PUBLIC 80-0415553 501(C)(3) SEE SCHEDULE O LIBRARY DISTRICT 17,181 FRIENDS INCPO BOX 1276 PIKEVILLE, KY 41501 73-6081619 PIONEER LIBRARY SYSTEM 501(C)(3) SEE SCHEDULE O 225 N WEBESTER 39,357 NORMAN, OK 73069 RIVERSIDE COUNTY 52-2127630 501(C)(3) SEE SCHEDULE O LIBRARY FOUNDATION 31,762 3392A DURAHART STREET RIVERSIDE, CA 92507 ROTARY CLUB OF 36-3891070 501(C)(3) SEE SCHEDULE O SCHAUMBURG-HOFFMAN 15,500 ESTATES CHARITAB130 S ROSELLE SCHAUMBURG, IL 60193

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (c) IRC Code section (d) A mount of cash (a) Name and address of **(b)** EIN (e) A mount of non-(f) Method of (q) Description of (h) Purpose of grant ıf applicable valuation organization arant cash non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) REUBEN MCMILLAM FREE 34-6003201 501(C)(3) SEE SCHEDULE O LIBRARY ASSOC305 WICH 28,975 AVENUE YOUNGSTOWN, OH 44503 SACRAMENTO PUBLIC 68-0029756 501(C)(3) SEE SCHEDULE O LIBRARY FOUNDATION828 30,000 I STREET SACRAMENTO, CA 95814 41-0986063 SEE SCHEDULE O SOUTHEASTERN LIBRARIES 501(C)(3) COOPERATING2600 19TH 49.915 STREET NW ROCHESTER, MN 55901 SUFFOK UNIVERSITY LAW 04-2133255 501(C)(3) SEE SCHEDULE O SCHOOL8 ASHBURTON 100,000 PLACE BOSTON, MA 02108 TIMBERLAND REGIONAL 91-1934007 501(C)(3) SEE SCHEDULE O LIBRARY FOUNDATION415 49,522 TUMWATER BOULEVARD SW TUMWATER, WA 98501 TRUSTEES OF DARTMOUTH 02-0222111 501(C)(3) SEE SCHEDULE O COLLEGE11 ROPE FERRY 150,151 ROAD HB6210 HANOVER, NH 03755 94-1156365 501(C)(3) SEE SCHEDULE O TRUSTEES OF LELAND STANFORD JUNIOR 40,152 UNIVERSITY651 SERRA STREET SUITE 220 STANFORD, CA 94305 TRUSTEES OF PRINCETON 21-0634501 501(C)(3) SEE SCHEDULE O UNIVERSITY4 NEW SOUTH 22,203 PRINCETON, NJ 08544 59-2924021 115(A) SEE SCHEDULE O UNIVERSITY OF CENTRAL FLORIDA12201 RESEARCH 64,809 PARKWAY ORLANDO, FL 32826 UNIVERSITY OF KENTUCKY 61-6033693 501(C)(3) SEE SCHEDULE O RESEARCH FOUNDATION 17,800 109 KINKEAD HALL LEXINGTON, KY 40506

Form 990,Schedule 1, Pa	rt 11, Grants an	a Otner Assistance	e to Governments	and Organization	<u>s in the United Sta</u>	tes	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF TENNESSEE121 MORGAN HILL KNOXVILLE,TN 37996	62-6001636	501(C)(3)	204,204				SEE SCHEDULE O
YORK COUNTY LIBRARY SYSTEM159 EAST MARKET STREET YORK,PA 17401	23-7394108	501(C)(3)	21,753				SEE SCHEDULE O

**Compensation Information** 

DLN: 93493316009250

OMB No 1545-0047

Open to Public Inspection

#### Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization FINRA INVESTOR EDUCATION FOUNDATION

**Employer identification number** 20-0863779

	Questions Regarding Compensation					
			Yes	Νo		
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form					
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items					
	First-class or charter travel  Housing allowance or residence for personal use					
	Travel for companions  Payments for business use of personal residence  Tax idemnification and gross-up payments  Health or social club dues or initiation fees					
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)					
	y resonary spending account y resonar services (e.g., maid, chadled), chery					
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or					
	reimbursement orprovision of all 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					
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2				
3	Indicate which, if any, of the following the organization uses to establish the compensation of the					
	organization's CEO/Executive Director Check all that apply					
	✓ Compensation committee ✓ Written employment contract					
	✓ Independent compensation consultant ✓ Compensation survey or study					
	Form 990 of other organizations  Approval by the board or compensation committee					
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization					
7	or a related organization					
а	Receive a severance payment or change-of-control payment?	4a	Yes			
ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?					
С						
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III					
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.					
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any					
	compensation contingent on the revenues of					
а	The organization?	5a		Νo		
b	Any related organization?	5b		Νo		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of					
		l _				
a	The organization?	6a		No_		
b	Any related organization?	6b		No		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7				
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was					
	subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III					
		8				
9	If "Yes" to 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 Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	,	(B) Breakdown of	fW-2 and/or 1099-MI	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
RICHARD G KETCHUM	(ı) (ıı)	0 755,897	0	0 61,464	0 234,218	0 16,721	0 1,068,300		
MARY L SCHAPIRO	(ı) (ıı)	0 79,346	0 1,303,828	0 5,977,388	0 7,691	0 2,366	0 7,370,619		
JOHN M GANNON	(ı) (ıı)	0 249,470	0 145,000	0 179,520	0 30,361	0 15,921	0 620,272		
EILEEN M FAMIGLIETTI	(I) (II)	0 237,093	0 145,000	0 27,436	0 64,842	0 22,129	0 496,500		
MARCIA E ASQUITH	(I) (II)	0 215,505	0 171,000	0 44,124	0 64,042	0 31,615	0 526,286		
MICHAEL D JONES FORMER	(I) (II)	0	0 560,000	0 508,846	0	0	0 1,068,846	508,84	
	'								
	'		<u> </u>						
	'	!							

#### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
COMPENSATION P. INFORMATION L.	ART I, INES 4A ND 4B	LINE 4A) IN CONNECTION WITH MICHAEL JONES' SEPARATION FROM FINRA, HE WAS PAID \$1,068,846 IN 2009 NONE OF THIS SEPARATION AMOUNT WAS PAID BY THE FOUNDATION LINE 4B) FINRA OFFERS TWO NON-QUALIFIED SUPPLEMENTAL EXECUTIVE RETIREMENT PLANS ANNUAL INCREASES IN BENEFIT VALUE, CLIFF VESTING EVENTS, AND PAYOUT DIFFERENTIALS ARE TAXABLE IN THE YEAR IN WHICH THEY OCCUR AND ARE REPORTED IN COLUMN B(III) OF SCHEDULE J, PART II UNVESTED BENEFIT AND CONTRIBUTION ACCRUALS ARE TAX DEFERRED AND ARE REPORTED IN COLUMN C OF SCHEDULE J, PART II 1) FINRA'S SUPPLEMENTAL DEFINED BENEFIT PLAN SA NON-QUALIFIED DEFINED BENEFIT PLAN THAT IS OPEN TO MEMBERS OF A SELECT GROUP OF MANAGEMENT OR HIGHLY COMPENSATED EMPLOYEES SUCH AS THOSE DESCRIBED UNDER 201(2),301(A)(3), AND 401(A)(1) OF ERISA IT IS A FINRA FUNDED PLAN THAT VESTS AT SPECIFIED AGE AND SERVICE MILESTONES THIS PLAN WAS CLOSED TO NEW ENTRANTS AS OF 12/31/05 PARTICIPANTS IN THE SUPPLEMENTAL NON-QUALIFIED DEFINED BENEFIT PLAN THAT HAD A GROSS TAXABLE PAYOUT INCLUDE MARY L SCHAPIRO = \$5,781,375 THIS AMOUNT REPRESENTS THE TAXABLE PAYOUT OF ACCUMULATED BENEFITS EARNED WITHIN THE NON-QUALIFIED DEFINED BENEFIT PLAN OVER THE DURATION OF MS SCHAPIRO'S 13 YEARS OF SERVICE TO FINRA 2) FINRA'S SUPPLEMENTAL DEFINED CONTRIBUTION PLAN IS A NON-QUALIFIED PLAN THAT IS OPEN TO VICE PRESIDENTS AND ABOVE WITH AN ANNUAL BASE PAY ABOVE THE QUALIFIED LIMIT IT IS ONLY OPEN TO THOSE NOT PARTICIPATING IN THE CLOSED NON-QUALIFIED DEFINED BENEFIT PLAN DESCRIBED ABOVE IT IS A FINRA FUNDED PLAN WITH A 3 YEAR VESTING CYCLE PARTICIPANTS IN THE SUPPLEMENTAL NON-QUALIFIED DEFINED CONTRIBUTION PLAN WITH CONTRIBUTIONS VESTING IN 2009 INCLUDE JOHN M GANNON - \$120,609 FOR FURTHER INFORMATION REGARDING THE FOUNDATION'S PARENT OR FUNDATION, THE FINANCIAL INDUSTRY REGULATORY AUTHORITY, INC

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

SCHEDULE O

(Form 990)

Department of the Treasury

Internal Revenue Service

## **Supplemental Information to Form 990**

DLN: 93493316009250
OMB No 1545-0047

Open to Public Inspection

Name of the organization
FINRA INVESTOR EDUCATION FOUNDATION

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

▶ Attach to Form 990.

Employer identification number

INRA INVESTOR EDUC	ATION FOUNDATIO	N 20-0863779
ldentifier	Return Reference	Explanation
VOLUNTEER ACTIVITIES	FORM 990 PART I, LINE 6	FIVE MEMBERS OF THE BOARD OF DIRECTORS SERVE ON A VOLUNTEER BASIS THE BOARD OF DIRECTORS IS RESPONSIBLE FOR APPROVING ALL GRANTS AND PROJECTS
EXEMPT PURPOSE A CHIEV EMENTS	FORM 990, PART III, LINE 4	4A) GRANT PROGRAMS IN 2009, THE FOUNDATION PROVIDED GRANT OPPORTUNITIES THROUGH FOUR GRANT PROGRAMS THE GENERAL GRANT PROGRAM, SMART INVESTING@YOUR LIBRARY, FINANCIAL EDUCATION IN YOUR COMMUNITY, AND THE INVESTOR ADVOCACY CLINIC PROGRAM THROUGH THESE PROGRAMS, THE FOUNDATION SUPPORTS INNOVATIVE RESEARCH AND EDUCATIONAL PROJECTS THAT
		PROVIDE UNDERSERVED AMERICANS WITH THE KNOWLEDGE, SKILLS AND TOOLS NECESSARY FOR FINANCIAL SUCCESS THROUGHOUT LIFE THE FOUNDATION WILL AWARD GRANTS TO ENTITIES DESIGNATED AS TAX-EXEMPT ACCORDING TO INTERNAL REVENUE CODE SECTION 501(C)(3) AND STATE AND OTHER PUBLIC COLLEGES AND UNIVERSITIES THE FOUNDATION PLACES HIGH PRIORITY ON
		REACHING AND ENGAGING A WELL-DEFINED TARGET AUDIENCE AND ENCOURAGES COLLABORATION AND STRATEGIC PARTNERSHIPS THAT FACILITATE EFFECTIVE MARKETING AND DISTRIBUTION EFFORTS THE FOUNDATION OFFERS ROLLING DEADLINES FOR PROJECT CONCEPT FORMS UNDER THE GENERAL GRANT PROGRAM APPLICANTS WHOSE PROJECTS MOST CLOSELY ALIGN WITH THE FOUNDATION'S PRIORITIES ARE INVITED TO SUBMIT A FULL GRANT PROPOSAL FOR CONSIDERATION AT ONE OF THE
		FOUNDATION'S BOARD MEETINGS FUNDING PRIORITIES ARE SPECIFIED IN THE GRANT GUIDELINES THE GUIDELINES ALSO SPECIFY ELIGIBILITY REQUIREMENTS AND GRANT CRITERIA THE SMART INVESTING@YOUR LIBRARY GRANT PROGRAM IS ADMINISTERED JOINTLY BY THE FINRA INVESTOR EDUCATION FOUNDATION AND THE AMERICAN LIBRARY ASSOCIATION THIS INVITATION-ONLY GRANT PROGRAM FUNDS PUBLIC LIBRARY EFFORTS TO PROVIDE LIBRARY PATRONS WITH ACCESS TO
		EFFECTIVE, UNBIASED FINANCIAL EDUCATION RESOURCES THE FINANCIAL EDUCATION IN YOUR COMMUNITY GRANT PROGRAM IS ADMINISTERED JOINTLY BY THE FINRA INVESTOR EDUCATION FOUNDATION AND UNITED WAY WORLDWIDE THIS INVITATION-ONLY GRANT PROGRAM FUNDS REGIONAL AND LOCAL COMMUNITY-BASED ORGANIZATIONS TO MEET THE FINANCIAL EDUCATION
		NEEDS OF UNDERSERVED WORKING INDIVIDUALS AND FAMILIES THE INVESTOR ADVOCACY CLINIC PROGRAM PROVIDES START-UP FUNDING AND ASSISTANCE TO LAW SCHOOLS THAT ARE WELL POSITIONED TO ESTABLISH CLINICS OFFERING LEGAL ADVICE AND OTHER HELP FOR UNDERSERVED INVESTORS THIS INVITATION-ONLY GRANT PROGRAM AIMS TO FILL THE GAP IN LEGAL REPRESENTATION FOR SMALL INVESTORS 4B) MILITARY FINANCIAL EDUCATION PROJECT THE FINRA
		FOUNDATION DEVELOPED SAVEANDINVEST ORG AS A FINANCIAL EDUCATION PROGRAM TO EXPAND THE SAVING AND INVESTING KNOWLEDGE OF MILITARY SERVICE MEMBERS AND THEIR SPOUSES THE MULTI-FACETED INITIATIVE INCLUDES AN ONLINE RESOURCE CENTER, ON-THE-GROUND TRAINING, EDUCATIONAL TOOLKITS, AND A LONG-TERM PUBLIC OUTREACH CAMPAIGN THE FOUNDATION IS A
		PROUD PARTNER IN THE DEPARTMENT OF DEFENSE FINANCIAL READINESS CAMPAIGN 4C) INVESTOR PROTECTION CAMPAIGN THE FINRA FOUNDATION IS MOUNTING A RESEARCH-BASED, SOCIAL CHANGE CAMPAIGN DESIGNED TO REDUCE THE INCIDENCE OF INVESTMENT FRAUD AMONG OLDER INVESTORS DEVELOPED IN COLLABORATION WITH AARP, STATE SECURITIES REGULATORS AND NOTED EXPERTS IN THE FIELDS OF FRAUD AND PERSUASION, CAMPAIGN ACTIVITIES AND RESOURCES ARM INVESTORS
		WITH THE TOOLS AND KNOWLEDGE THEY NEED TO REALIZE THEY ARE VULNERABLE TO FINANCIAL FRAUD, IDENTIFY PERSUASION TACTICS USED BY FRAUDSTERS, AND REDUCE RISKY BEHAVIORS BY ASKING THE RIGHT QUESTIONS AND KNOWING HOW TO VERIFY ANSWERS RESULTS OF A FIELD TEST DEMONSTRATE THAT THE "OUTSMARTING INVESTMENT FRAUD" CURRICULUM REDUCED RESPONSIVENESS TO A FRAUD APPEAL BY OVER FIFTY PERCENT 4D) OTHER PROGRAM SERVICES
		ARE COMPRISED OF THE FOLLOWING NATIONAL FINANCIAL CAPABILITY STUDY IN CONSULTATION WITH THE U.S. TREASURY DEPARTMENT AND THE PRESIDENT'S ADVISORY COUNCIL ON FINANCIAL LITERACY, THE FINRA FOUNDATION IS CONDUCTING A STUDY OF AMERICAN ADULTS' FINANCIAL CAPABILITY. THE STUDY IS COMPRISED OF THREE LINKED SURVEYS A NATIONAL SURVEY, A MILITARY
		SURVEY, AND A STATE-BY-STATE SURVEY THE PURPOSE OF THE STUDY IS TO ESTABLISH A BASELINE MEASURE OF THE ABILITY OF AMERICANS TO MANAGE THEIR MONEY BY PROVIDING EMPIRICAL EVIDENCE OF THE CURRENT STATE OF FINANCIAL KNOWLEDGE AMONG ADULTS, WHY CONSUMERS BEHAVE THE WAY THEY DO AND THE ATTITUDES THAT CONSUMERS HAVE TOWARDS FINANCES THE EXECUTIVE SUMMARY OF THE NATIONAL SURVEY WAS RELEASED IN DECEMBER 2009
		RESULTS OF THE MILITARY AND STATE-BY-STATE SURVEYS WILL BE AVAILABLE IN 2010 TEEN FINANCIAL LITERACY PROJECT THE FOUNDATION, IN PARTNERSHIP WITH THE CONSUMER FEDERATION OF AMERICA AND USING THE CHANNEL ONE NETWORK AS THE CHIEF SERVICE PROVIDER, LAUNCHED A MULTIMEDIA PROJECT TO IMPROVE KNOWLEDGE OF SELECT, FUNDAMENTALLY IMPORTANT FINANCIAL
0.40050.05	FORMOOD	LITERACY CONCEPTS AMONG AMERICAN TEENAGERS, AND TO PROVIDE THEM WITH THE SKILLS TO APPLY THESE CONCEPTS TO EVERY DAY FINANCIAL DECISION-MAKING TOPICS INCLUDE COMPOUND INTEREST, SAVING AND INVESTING TO ACHIEVE LIFE GOALS, BUDGETING, AND THE USES AND MISUSES OF CREDIT SPECIAL ATTENTION IS GIVEN TO TOPICS THAT ARE CLOSELY LINKED TO MATHEMATICS
CLASSES OF MEMBERS AND THE NATURE OF THEIR RIGHTS	FORM 990, PART VI, LINES 6 AND 7A	LINE 6 - FINRA IS THE SOLE MEMBER OF FINRA INVESTOR EDUCATION FOUNDATION LINE 7A - FINRA, AS SOLE MEMBER, ELECTS ALL MEMBERS OF THE GOVERNING BODY
FORM 990 REVIEW PROCESS	FORM 990, PART VI, LINE 11	THE FORM 990 WAS REVIEWED BY SENIOR MANAGEMENT AT VARIOUS STEPS THROUGHOUT THE PREPARATION CYCLE THE FOUNDATION BOARD REVIEWED THE FINAL VERSION ON OCTOBER 15, 2010 FORM 990, PART VI EMPLOYMENT RULES AND POLICIES THE FINRA INVESTOR EDUCATION FOUNDATION INC DOES NOT HAVE ANY EMPLOYEES ALL SERVICES ARE PROVIDED BY EMPLOYEES OF FINANCIAL INDUSTRY REGULATORY AUTHORITY, INC (FINRA) THE FINRA INVESTOR EDUCATION FOUNDATION DOES NOT PAY FOR THEIR SERVICES AS SUCH, THOSE INDIVIDUALS ARE SUBJECT TO THE EMPLOYMENT RULES AND POLICIES OF FINANCIAL INDUSTRY REGULATORY AUTHORITY, INC
WRITTEN CONFLICT OF INTEREST POLICY	FORM 990, PART VI, LINE 12C	THE ORGANIZATION HAS A WRITTEN CONFLICT OF INTEREST POLICY FOR BOARD MEMBERS THE
		BOARD MEMBERS TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST AS THEY ARISE THE ORGANIZATION'S OFFICERS AND STAFF ARE EMPLOYEES OF FINRA, AND, AS SUCH, ARE REQUIRED TO CERTIFY ANNUALLY AS TO THEIR COMPLIANCE WITH THE WRITTEN CONFLICT OF INTEREST POLICY THE WRITTEN POLICY CONTAINS AN ONGOING OBLIGATION FOR EMPLOYEES TO INFORM FINRA OF ALL BROKERAGE ACCOUNTS IN WHICH THEY HAVE AN INTEREST, AND TO ARRANGE FOR FINRA TO RECEIV DUPLICATE ACCOUNT STATEMENTS FINRA REVIEWS TRANSACTIONS IN EMPLOYEES' BROKERAGE
		ACCOUNTS TO ENSURE COMPLIANCE WITH FINRA'S INVESTMENT RESTRICTIONS AMONG OTHER THINGS, THESE RESTRICTIONS PROHIBIT EMPLOYEES FROM HAVING AN INTEREST IN A BROKER-DEALEF OR ENTITY THAT DERIVES MORE THAN 25% OF ITS GROSS REVENUES FROM BROKER-DEALER SUBSIDIARIES OR AFFILILATES A LIST OF PROHIBITED COMPANIES IS POSTED ON FINRA'S CORPORATE INTRANET FINRA'S DEPARTMENT HEADS HAVE ACCESS TO SEVERAL ONLINE REPORTS THAT HELP THEM AVOID ASSIGNING AN EMPLOYEE TO WORK ON A PROJECT THAT WOULD GIVE RISE TO A
		CONFLICT FOR INSTANCE, A MANAGER CAN DETERMINE WHETHER AN EMPLOYEE'S STOCK HOLDINGS WOULD CONFLICT WITH A PROPOSED FINRA ASSIGNMENT (E.G., ASSIGNING AN EMPLOYEE TO NEGOTIATE A CONTRACT WITH A VENDOR IN WHICH THE EMPLOYEE HAS A SIGNIFICANT STOCK POSITION) EMPLOYEES ARE REGULARLY REMINDED OF THE RESOURCES THAT ARE AVAILABLE WHEN THEY ARE UNSURE WHAT TO DO IN ADDITION TO TALKING TO DEPARTMENTAL MANAGEMENT, EMPLOYEES CAN DISCUSS CONFLICTS-RELATED CONCERNS WITH FINRA'S OFFICE OF GENERAL
		COUNSEL OR CODE OF CONDUCT ADMINISTRATOR IF THEY ARE UNCOMFORTABLE DISCLOSING AN ISSUE AND DISCLOSING THEIR IDENTITY, THEY CAN USE FINRA'S 24-HOUR ETHICSPOINT HELPLINE TO POSE QUESTIONS OR REPORT CONCERNS COMMUNICATIONS MADE THROUGH ETHICSPOINT ARE CONFIDENTIAL AND, IF THE EMPLOYEE WISHES, ANONY MOUS FINRA'S WHISTLEBLOWER POLICY FORBIDS RETALIATION AGAINST EMPLOYEES WHO REPORT SUSPECTED MISCONDUCT IN GOOD FAITH,
PROCESS TO DETERMINE COMPENSATION OF CEO, EXEC	OTHER OFFICERS, AND KEY EMPLOYEES	EVEN IF THE REPORT ULTIMATELY PROVES TO BE ERRONEOUS  FORM 990, PART VI, LINES 15A AND 15B THE MANAGEMENT COMPENSATION COMMITTEE OF THE BOAR OF GOVERNORS (THE "COMPENSATION COMMITTEE") IS RESPONSIBLE FOR SETTING PAY FOR EXECUTIVES OF FINRA AND SUBSIDIARIES WHOSE TOTAL COMPENSATION, INCLUDING INCENTIVE COMPENSATION, MAY EXCEED \$1 MILLION THE COMMITTEE IS COMPRISED OF FOUR NON-EMPLOYEE,
DIR OR TOP OFFICIALS,		NON-SECURITIES INDUSTRY MEMBERS OF THE BOARD OF GOVERNORS THE COMMITTEE MET ON NOVEMBER 17, 2008, DECEMBER 1, 2008, AND AGAIN ON JANUARY 8, 2009 TO ESTABLISH INCENTIVE COMPENSATION ATTRIBUTABLE TO THE PERFORMANCE OF SERVICES DURING CALENDAR YEAR 2008 AND TO ESTABLISH BASE SALARIES FOR CALENDAR YEAR 2009 THE COMMITTEE ENGAGED MERCER, INC. ("MERCER"), A THIRD-PARTY COMPENSATION CONSULTANT, TO PREPARE A COMPENSATION STUD
		FOR REVIEW AT THESE MEETINGS THE COMPENSATION STUDY INCLUDED THE COMPENSATION LEVELS DURING 2008 FOR ALL OF THE EXECUTIVES UNDER CONSIDERATION AS WELL AS COMPETITIVE COMPENSATION INFORMATION FOR EXECUTIVES EMPLOYED BY A MIX OF PUBLIC AND PRIVATE FINANCIAL INSTITUTIONS, INCLUDING BROKERAGE/BANKING FIRMS, SECURITIES EXCHANGES AND REGULATORS, THAT MERCER BELIEVED TO BE APPROPRIATE FOR COMPARISON PURPOSES TO FINRA
		THE COMMITTEE'S MINUTES OF THE NOVEMBER 17, 2008 AND JANUARY 8, 2009 MEETINGS WERE REVIEWED AND APPROVED AS ACCURATE AND COMPLETE FOLLOWING THE COMMITTEE'S APPROVAL OF THE SENIOR EXECUTIVE COMPENSATION PACKAGES THE FULL BOARD FURTHER APPROVED THE 2008 INCENTIVE COMPENSATION OF THE CEO AT ITS TELEPHONIC MEETING ON JANUARY 16, 2009 ALL COMPENSATION COMMITTEE MEMBERS (EXCEPT GOVERNOR CORBY, WHO DID NOT VOTE DUE TO ILLNESS) VOTED FOR THE PROPOSED LEVEL OF EXECUTIVE COMPENSATION ON FEBRUARY 11, 2009
PUBLIC AVAILABILITY	POLICY AND FINANCIAL	THE BOARD OF GOVERNORS AGREED THAT THE NEWLY APPOINTED CEO SHOULD BE OFFERED THE SAME CASH COMPENSATION TERMS AS THE PREVIOUS CEO  FORM 990, PART VI, LINE 19 THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND AUDITED FINANCIAL STATEMENTS AVAILABLE UPON REQUEST
OF GOVERNING DOCUMENTS, CONFLICT OF INTEREST	STATEMENTS	
INDEPENDENT CONTRACTORS - DESCRIPTION OF SERVICES	FORM 990, PART VII, SECTION B	GMMB, INC - PROVIDES PUBLIC RELATIONS ASSISTANCE FOR TARGETED PROJECT OUTREACH APPLIER RESEARCH & CONSULTING LLC - PROVIDES CONSULTING AND RESEARCH FOR THE MILITARY PROJECT, INVESTOR PROTECTION CAMPAIGN, AND THE NATIONAL FINANCIAL CAPABILITY SURVEY INCHARGE EDUCATION FOUNDATION - PUBLISHED A FOUNDATION SPONSORED QUARTERLY MAGAZINE ENTITLED MILITARY MONEY CARDEN COMMUNICATIONS - PRODUCED AN HOUR LONG DOCUMENTARY ON INVESTMENT FRAUD HIS JOB INCLUDED INTERVIEWING FRAUD VICTIMS, EDITING, CONTRACTING FOR SITE LOCATIONS AND HIRING PRODUCTION STAFF US EXPRESS FREIGHT SYSTEMS - PROVIDES
		MATERIAL FULFILLMENT, INCLUDING WAREHOUSING, DISTRIBUTING AND SHIPPING OUR PRINTED MATERIALS ACROSS THE COUNTRY, AND MILITARY BASES AROUND THE WORLD
ldentifier	Return Reference	Explanation

ldentifier	Return Reference	Explanation
VOLUNTARY DISCLOSURE FOR EBRI CONTRIBUTION		FINRA REGULATION CONTRIBUTED A TOTAL OF \$32,500 IN 2009 TO THE EMPLOYEE BENEFIT RESEARCH INSTITUTE EDUCATION AND RESEARCH FUND (EBRI-ERF), A SEPARATE CORPORATE 501(C) (3) AFFILIATE FOR THE EMPLOYEE BENEFIT RESEARCH INSTITUTE, OF WHICH FINRA FOUNDATION BOARD MEMBER, DALLAS L SALISBURY, IS PRESIDENT AND CEO THIS INCLUDES \$7,500 IN SUPPORT OF THE EBRI RETIREMENT CONFIDENCE SURVEY FOR 2010, AND \$25,000 TOWARDS ANNUAL PARTNERSHIP IN THE AMERICAN SAVINGS AND EDUCATION COUNCIL WHICH THE EMPLOYEE BENEFIT RESEARCH INSTITUTE, OF WHICH EBRI-ERF IS A PART, ADMINISTERS

ldon*ific=	Do to	Euplan ation
ldentifier	Return Reference	Explanation
GRANTS AND OTHER ASSISTANCE - PURPOSE OF GRANT OR ASSISTANCE	SCHEDULE I, PART I	AFSCME TRAINING AND EDUCATION INSTITUTE, WASHINGTON, DC (\$2.1148573) INVESTOR EDUCATION FOR WORKING FAMILES THE AFSCHE TRAINING AND EDUCATION INSTITUTE B DEVELOPING A COMPREHENSIVE INVESTOR EDUCTOR PROGRAM POR AFSCHES 1 HALLOIN MEMBERS PARTINERING WITH HERITORY CONTROLLING THE REPORT OF A SCHOOL AND HALLOIN MEMBERS PARTINERING WITH HERITORY CONTROLLING THE REPORT OF THE AFSCHES AND ALLOIS AND ASSEMBLY OF A COMPREHENSIVE IN A CONTROLLING AND ASSEMBLY OF A COMPREHENSIVE IN A CONTROLLING AND A STRONG OUTFIELD OF THE ASSEMBLY OF A CONTROLLING AND A C

ldentifier	Return Reference	Explanation
GRANTS AND OTHER ASSISTANCE - PURPOSE OF GRANT OR ASSISTANCE	SCHEDULE I, PART I (CONTINUED)	TOOLS ON THE LIBRARY'S WEB SITE. TRAIN ADULT SERVICES LIBRARIANS IN INVESTMENT RESEARCH STRATEGES AND PROVIDE HIGH SCHOOL AND COLLEGE STUDENTS WITH MONEY MAN GEMBAT SKILLS IN PREPARATION FOR FRANCIAL INDEPENDENCE IN TOOLS DESCONMENT SERVICES MAY RECEIVED THE PROVIDED THE PROVIDED TO ESCONMENT SERVICES MAY RECEIVED THE SECOND GRAND AND MAY RECEIVED THE MAY RECEIVED THE MAY RECEIVED THE SECOND GRAND THE RECEIVED THE TEXT OF SCHOOL THE SECOND GRAND THE RECEIVED THE TEXT OF SCHOOL THE SECOND GRAND THE RECEIVED THE TEXT OF SCHOOL THE SECOND THE RECEIVED THE TEXT OF SCHOOL THE SECOND THE SECOND THE RECEIVED THE TEXT OF SCHOOL THE SECOND THE RECEIVED THE TEXT OF SCHOOL THE SECOND THE TEXT OF SCHOOL THE TEX

ldentifier	Return Reference	Explanation
GRANTS AND OTHER ASSISTANCE - PURPOSE OF GRANT OR ASSISTANCE	SCHEDULE I, PART I (CONTINUED)	SOUTHEASTERN LEARNES COOPERATING, ROCHESTER, MN (41-098063) SOUTHEASTERN LEARNES COOPERATION WITH PUBLIC LEVISION STATION KSMO TO BROADCAST 19 ALGE-HOUR SEGMENTS ENTITLED FINANCIAL CONNECTIONS IN RUBAL AND SMALL-TOWN COMMUNITIES, WITH COPRESSONDIAND LERRARY, ASSED PROCRAMMING AND WEST AND RESOURCES SUFFOLK UNIVERSITY LAW SCHOOL, WILL STATIONALLY RECOGNIZED IN HOUSE CLINICAL LEGAL EDUCATION PROGRAM TO INCLIDE A NEW YORKSTOR ADVOCACY CLINIC IN A DOTTION TO PROVIDING LEGAL HELP TO UNIDERSERVED INVESTORS, PARTICIPATING LAW SCHOOL WILL DE NEW YORKSTOR ADVOCACY CLINIC IN A DOTTION TO PROVIDING LEGAL HELP TO UNIDERSERVED INVESTORS, PARTICIPATING LAW STUDENTS WILL BE REQUIRED TO CONDUCT IN ESTORE DUCATION PROGRAM AT I LOCAL COMMUNITY CENTERS AND LERRARES TIMBERLAND REGIONAL LIBRARY. TUMMATER, WA (91-1934007) TIMBERLAND REGIONAL LIBRARY WILL PRODUCE, MARKET AND DISTRIBUTE A MULTIMEDA SPRIED OF TEN MANUET COPICE SERVICES LIBRARY WILL ALSO TRAIN INFORMATION SERVICES LIBRARY RANGE PROVIDED TO CONDUCT IN ESTORED CONTROL TO THE CONTROL OF THE PROVIDED TO THE CONTROL OF

DLN: 93493316009250

OMB No 1545-0047

Open to Public

### **SCHEDULE R** (Form 990)

**Related Organizations and Unrelated Partnerships** 

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

52-2187577

**Employer identification number** FINRA INVESTOR EDUCATION FOUNDATION

20-0863779

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

(a)
Name, address, and EIN 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

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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	Public charity status Direct co	f) ontrolling tity
FINANCIAL IND REGULATORY AUTHORITY INC					
1735 K STREET NW	REGULATORY	DE	501(C)(6)	N/A NA	
WASHINGTON, DC 20006 53-0088710 FINRA REGULATION INC					
1735 K STREET NW	REGULATORY	DE	501(C)(6)	N/A FINRA	
WASHINGTON, DC 20006 52-1959501					
FINRA DISPUTE RESOLUTION INC					
1735 K STREET NW	ARBITRATION	DE	501(C)(6)	N/A FINRA	
WASHINGTON, DC 20006					

(c)

(j)

(h)

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

(i) Code V—UBI **(e)** Predominant income **(f)** Share of total income Disproprtionate General or (a) Name, address, and EIN of (b) Legal (d) (g) Primary activity Direct controlling Share of end-of-year allocations? amount in box 20 of managing domicile (related, unrelated, Schedule K-1 partner? related organization entity (state or assets excluded from tax (Form 1065) foreign under sections 512country) 514) Yes No Yes No

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>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
NEW NASD HOLDING INC 1735 K STREET NW WASHINGTON, DC20006 52-2307595	HOLDING COMP	DE	NA	C-CORP	0	0	0 %
SECURITIES DEALERS RISK PURCHASING GROUP 1735 K STREET NW WASHINGTON, DC20006 52-1953595	INSURANCE	DE	NA	C-CORP	0	0	0 %
Securities Dealers Insurance Company Ltd victoria hall 11 Victoria St Hamilton, HM 11, BERMUDA BD	INSURANCE	BD	N/A	C-CORP	0	0	0 %
FINRA Limited 35 New Broad Street London, EC2M 1NH, UNITED KINGDOM UK	EDUCATIONAL	UK	N/A	C-CORP	0	0	0 %

(3)

(4)

(5)

(6)

che	edule R (Form 990) 2009		Рa	ge <b>3</b>
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
<b>1</b> D	ouring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
ь	Gift, grant, or capital contribution to other organization(s)	1b		No
c	Gift, grant, or capital contribution from other organization(s)	1c		No
d	Loans or loan guarantees to or for other organization(s)	1d		No
e	Loans or loan guarantees by other organization(s)	1e		No
f	Sale of assets to other organization(s)	1f		No
g	Purchase of assets from other organization(s)	<b>1</b> g		No
h	Exchange of assets	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
1	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m	Sharing of facilities, equipment, mailing lists, or other assets	1m	Yes	
n	Sharing of paid employees	1n	Yes	
0	Reimbursement paid to other organization for expenses	10	Yes	
p	Reimbursement paid by other organization for expenses	<b>1</b> p		No
q	O ther transfer of cash or property to other organization(s)	1q		No
	Other transfer of cash or property from other organization(s)	1r	Yes	
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 thres	holds		
	(a) Name of other organization  (b) Transaction type(a-r)	(c) Amount involved		
1) 2)	τηρεία τη			

#### 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)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No