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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 ca	lendar yea	r, or tax year beginning 0	1-01-2009 and ending 12-31-20	009	D Employer i	dentification number		
		pplicable	Please	C Name of organization FINRA REGULATION INC						
	lress cl	_	use IRS label or	Doing Business As			52-19595 E Telephone			
Mai	ne cha	nge	print or type. See	Doing Business 715			•			
Init	ial retu	rn	Specific Instruc-		box if mail is not delivered to street add	ress) Room/suite	(202) 728	-8949 ts \$ 673,402,753		
Ter	mınate	d	tions.	1735 K STREET NW			G Gloss receip			
┌ Am	ended	return		City or town, state or count			1			
☐ App	olication	n pending		WASHINGTON, DC 200061	506					
			<b>F</b> Nar	ne and address of princip	al officer	H(a) Is th	■ us a group retu	ırn for		
				RD G KETCHUM ( STREET NW			ates?	⊤Yes <b>∀</b> No		
				NGTON,DC 20006150	6	H(b) Are a	ll affiliates inclu	ided?		
								it (see instructions)		
<b>I</b> Ta	x-exen	npt status	<b>5</b> 01(c)	) ( 6 ) ◀ (insert no )	7(a)(1) or		up exemption r			
w t	ebsite	e: ► WW	/W FINRA (	D RG						
K For	n of or	aanızatıon	✓ Corporat	tion Trust Association	Other In-	Vear of fo	ormation 1996	M State of legal domicile DE		
		Sumi		lolly riusty Associationy	Other F	L real of it	Jilladoli 1990	THE State of legal doffficile DE		
	1			e organization's mission (	or most significant activities					
		FINRA	IS DEDICA	ATED TO INVESTOR PR	OTECTION AND MARKET INTE	GRITY THROU	GH EFFECTIV	E AND EFFICIENT		
3		REGUL	ATION OF	THE SECURITIES INDU	STRY					
Governance										
E E										
ò	2	Check t	his box 🛏	if the organization disco	ontinued its operations or dispose	ed of more than	25% of its ne	t assets		
ن ×ة	3	Number	of voting r	nembers of the governing	body (Part VI, line 1a)			<b>3</b> 13		
80	4	Number	ofindeper	ident voting members of t	he governing body (Part VI, line	1b)		45		
Activities	5			nployees (Part V , line 2a)		·		5 2,390		
ਹ	6			olunteers (estimate if nec				6 1		
⋖	7a			,	n Part VIII, column (C), line 12			<b>7a</b> 77,297		
		-			n Form 990-T, line 34			<b>7b</b> 23,341		
					· ·	Prid	or Year	Current Year		
	8	Contri	butions and	d grants (Part VIII, line 1	h)		0	0		
₫	9 Program service revenue (Part VIII, line 2g)				•		677,994,085	608,713,436		
Raveni	10	•		,	, lines 3, 4, and 7d)		8,795,144	-900,646		
2	11					·				
	12							8,213,665		
					<u> </u>		686,789,229	616,026,455		
	13	Grants	and simila	ar amounts paid (Part IX,	column (A), lines 1-3)		165,388	100,705		
	14	Benefi	ts paid to c	or for members (Part IX, c	olumn (A), line 4)		0			
ø	15		es, other co	ompensation, employee b	enefits (Part IX, column (A), lines	5 5 –				
386	16-	10)	aranal fund	roses for a (Down IV col		0	325,732,400			
Expenses	16a				umn (A), line 11e)		0			
ሿ	Ь			enses (Part IX, column (D), lin	•	-				
	17				s 11a-11d, 11f-24f)		438,058,131	312,679,053		
	18				qual Part IX, column (A), line 25)		788,985,373	638,512,158		
	19	Reven	ue less exp	penses Subtract line 18 i	rom line 12		102,196,144	-22,485,703		
Not Assets or Fund Balances						_	g of Current Year	End of Year		
a de la companya de l	20	Totala	assets (Pai	rt X, line 16)			136,160,140	69,344,898		
t As d B	21						389,043,953	327,835,516		
## ##	22				21 from line 20		252,883,813	-258,490,618		
Pai	t II	_	ature Bl				,,			
					ımıned this return, including accompanyı	ng schedules and s	statements, and to	the best of my knowledge		
		and beli	ef, it is true,	correct, and complete Declarat	ion of preparer (other than officer) is ba	sed on all informa	tion of which prep	arer has any knowledge		
Sign	,	<del>                                    </del>				2010	11.00			
Here		Signa	ature of office	er		Date	-11-09			
		1.		HUM CEO AND CHAIRMAN OF	ETNID A					
			or print nam		TAINW					
		D	vo k		Date	Check If	Prenarer's ider	ntifying number		
Paid		Preparer signature			Dutc	self-	(see instructio			
	arer's	F	F	EDNOT A VOLUME CO.		empolyed 🕨	polyed •			
Use (		Firm's name (or yours & ERNST & YOUNG US LLP if self-employed),								
J36 (	Jilly	address,	and ZIP + 4	TWO NORTH CENTRAL AV	Diameter	/(02) 222 2002				
				PHOENIX, AZ 85004				(602) 322-3000		
May	he IR	S discus	s this retu	rn with the preparer show	n above? (see instructions) .			┌Yes ┌No		

Cat No 11282Y

#### Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

FINRA IS DEDICATED TO INVESTOR PROTECTION AND MARKET INTEGRITY THROUGH EFFECTIVE AND EFFICIENT REGULATION OF THE SECURITIES INDUSTRY

2	Did the organization unde the prior Form 990 or 990	0-EZ?				┌ Yes ┌ No	•
	If "Yes," describe these n	ew services on	Schedule O				
3	Did the organization ceas services?	<del>-</del> /	_	_	, , , ,	┌ Yes ┌ N	0
	If "Yes," describe these c	hanges on Sche	dule O				
4	Describe the exempt purp Section 501(c)(3) and 50 allocations to others, the	)1(c)(4) organız	ations and section 49	947(a)(1) trusts are	required to report the am		and
4a	(Code SEE SCHEDULE O	) (Expenses \$	ınclu	ding grants of \$	) (Revenue \$		)
4b	(Code	) (Expenses \$	ınclu	ding grants of \$	) (Revenue \$		)
4c	(Code	) (Expenses \$	ınclu	ding grants of \$	) (Revenue \$		)
4d	Other program services	(Describe in Sc	hedule O )				
	(Expenses \$	ın	cluding grants of \$		) (Revenue \$	)	
4e	Total program service ex	cpenses <b>►</b> \$					

Part TV	Checklist	of Requir	red Sch	edules
4: I L T L T	CHECKHSU	. VI KEUUII	eu Stii	cuules

			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		Νο
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νο
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		Νο
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		Νο
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		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
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		Νο
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		Νο
12A	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			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
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		Νο
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		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		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		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

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		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	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		No
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," 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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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	<b>Section 501(c)(3) organizations.</b> 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		N o
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>990</b>	(2009)

	(2005)	
Part V	Statements Regarding Other IRS Filings and Tax Compliance	
		6

			Yes	No
La	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	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this return			
b	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	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
<del>l</del> a	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		No
b	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			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	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		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	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		
	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		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
3	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		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
.1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12D	]		

MARCIA E ASQUITH 1735 K STREET NW

(202) 728-8949

WASHINGTON, DC 200061506

**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	ction A. Governing Body and Management						
					Yes	No	
			4.5				
1a	Enter the number of voting members of the governing body	1a	13				
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 bus other officer, director, trustee, or key employee?	•		2	Yes		
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management control over management control over management control over management duties.			3		Νo	
4	$\label{eq:def:Did} Did the organization make any significant changes to its organizational documents significant changes to its organizational documents significant changes are significant changes. \\$	ınce t	he prior Form 990 was	4	Yes		
5	Did the organization become aware during the year of a material diversion of the organization	nızatı	on's assets?	5		Νo	
6	Does the organization have members or stockholders?			6	Yes		
7a	Does the organization have members, stockholders, or other persons who may elect governing body?			7a	Yes		
b	Are any decisions of the governing body subject to approval by members, stockholde	ers, o	rother persons?	7b	Yes		
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons ur	ndertaken during the				
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, organization's mailing address? If "Yes," provide the names and addresses in Schedu			9		Νo	
	ction B. Policies (This Section B requests information about policies not	requi	red by the Internal				
Re	venue Code.)						
					Yes	No	
	Does the organization have local chapters, branches, or affiliates?			10a		Νο	
	If "Yes," does the organization have written policies and procedures governing the ac affiliates, and branches to ensure their operations are consistent with those of the or	ganız	ation?	10b			
11	Has the organization provided a copy of this Form 990 to all members of its governing	ıg bod	y before filing the form?	11	Yes		
11A	Describe in Schedule O the process, if any, used by the organization to review the Fo	orm 9	90				
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 to conflicts?		_	12b	Yes		
c	Does the organization regularly and consistently monitor and enforce compliance wit describe in Schedule O how this is done	h the	policy? If "Yes,"	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 revi						
а	a The organization's CEO, Executive Director, or top management official						
	<b>b</b> Other officers or key employees of the organization						
	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 of taxable entity during the year?	r sım •	ılar arrangement wıth a	16a		Νo	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	n ste	ps to safeguard the	16b			
Se	ction C. Disclosure						
17	List the States with which a copy of this Form 990 is required to be filed▶CA						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable (3)s only) available for public inspection. Indicate how you make these available. Ch. Own website. Another's website. Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing interest policy, and financial statements available to the public. See Additional Data						
20	State the name, physical address, and telephone number of the person who possesse			e orga	nızatıor	n <b>▶</b> -	

## Part VIII 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 i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
<b>(A)</b> Name and Title	(B) Average hours	(C) Position (check all that apply)						( <b>D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other
	per week	Key employee Officer Institutional Trustee Individual trustee or director		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		
See add'l data										

1b Total	•	10,346,901	14,561,122	3,256,657

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶1,179

			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," complete Schedule J for such individual</i>	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		No

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

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

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation		
THOMSON PROMETRIC PO BOX 223608 PITTSBURGH, PA 15251	TESTING SERVICES	13,998,651		
TEK SYSTEMS PO BOX 198568 ATLANTA, GA 30384	TECH CONSULTING	5,893,761		
NCS PEARSON INCORPORATED 21866 NETWORK PLACE CHICAGO, IL 60673	TESTING SERVICES	5,303,247		
CIGITAL INC 21351 RIDGETOP CIRCLE SUITE 400 DULLES, VA 20166	TECH CONSULTING	3,691,206		
SYNERGY AND INTEGRATION INC 80 BROAD STREET NEW YORK, NY 10004	TECH CONSULTING	2,500,878		
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►55				

Form 99			.f Davis and					Page <b>9</b>
Part	<b>/</b>	Statement o	or 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
\$ £	1a	Federated cam	paigns 1a					
ğ <u>i</u>	ь	Membership du	es <b>1b</b>					
s, ç	c	Fundraising eve	ents <b>1c</b>					
<u>₩</u>	d	Related organiz	rations 1d					
E E	e	Government grants	s (contributions) <b>1e</b>					
ıtio er 3	f	All other contribution similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above					
ē€	g	Noncash contri	butions included in					
Contributions, gifts, grants and other similar amounts	h	lines 1a-1f \$ _		▶	0			
<u> </u>	"	Total. Add filles	s 1a-11		, and the second			
alle	2a	REGULATORY FEES		Business Code 900,099	387,935,359	387,935,359		
evel	Ь	USER FEES	<u>,                                      </u>	900,099	144,765,438	144,688,141	77,297	
ο. Eg		CONTRACT SERVICE	CES FEES	900,099	28,018,770	28,018,770	77,237	
7. M.C	d	FINES	_	900,099	47,684,151	47,684,151		
፠	e	ALL OTHER PROGR	AM SERVICE REVENUE	900,099	309,718	309,718		
Ta II	f	All other progra	am service revenue	,	·	,		
Program Serwce Revenue	_	Tetal Add lines	s 2a – 2f		608,713,436			
	д 3		ome (including dividen		006,713,430			
			aramounts)	. ⊢	2,554,391			2,554,391
	4	Income from inves	tment of tax-exempt bond	proceeds 🕨	0			
	5	Royalties			60			60
			(ı) Real	(II) Personal				
	6a b	Gross Rents Less rental						
		expenses Rental income						
	C	or (loss)						
	d	Net rental inco	me or (loss)					
	7a	Gross amount	(ı) Securities 53,921,261	(II) O ther				
		from sales of assets other						
	ь	than inventory Less cost or	57,376,298					
		other basis and sales expenses	, ,					
	c	Gain or (loss)	-3,455,037					
	d	Net gain or (los	s)	►	-3,455,037			-3,455,037
Other Revenue	8a	Gross income f events (not inc  \$ of contributions See Part IV, lin	luding  reported on line 1c)					
æ			a					
her.	ь		penses <b>b</b>					
ŏ	С		loss) from fundraising	events 🟲	0			
	9a	Gross income f See Part IV, lin	rom gaming activities le 19 a					
	ь		penses <b>b</b>					
	C		loss) from gaming activ	vities	0			
	IUa	Gross sales of returns and allo						
	ь		oods sold <b>b</b>					
	С		loss) from sales of inve		0			
	11a	Miscellaneous EXCESS INDEI		Business Code 900,099	8,213,605	8,213,605		
		FUNDS	RESEARCH	,,	, ,,,,,	, ,3		
	ь							
	С							
	d	All other revenue	l					
	e	Total. Add lines	s 11a-11d		8,213,605			
	12	Total revenue.	See Instructions	▶[	616,026,455	616,849,744	77,297	-900,586

Form 990 (2009) Page <b>10</b>								
Par	Section 501(c)(3) and 501(c)(4) organizations m	uet complete all a	slumne					
А	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).							
Do no	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	100,705						
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	8,196,919						
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	245,515,938						
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	38,832,217						
9	Other employee benefits	17,810,329						
10	Payroll taxes	15,376,997						
11	Fees for services (non-employees)							
а	Management	3,943,709						
ь	Legal	689,822						
с	Accounting	110,400						
d	Lobbying	0						
e	Professional fundraising See Part IV, line 17	0						
f	Investment management fees	109,560						
g	Other	22,841,203						
12	Advertising and promotion	232,813						
13	Office expenses	4,286,933						
14	Information technology	77,675,674						
15	Royalties	0						
16	Occupancy	39,853,113						
17	Travel	11,319,847						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0						
19	Conferences, conventions, and meetings	436,784						
20	Interest	6,256						
21	Payments to affiliates	0						
22	Depreciation, depletion, and amortization	21,481,573						
23	Insurance	9,106						
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	OVERHEAD ALLOC FROM PARENT	121,296,041						
b	BAD DEBT EXPENSE	6,113,989						
с	TEMPORARY HELP	1,592,415						
d	SUBSCRIPTIONS/PUBLICATIONS	557,405						
e	BANK SERVICE FEES	106,826						
f	All other expenses	15,584						
25	Total functional expenses. Add lines 1 through 24f	638,512,158						
26	Joint costs. Check here ► ☐ If following SOP 98-2	1						
	Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				202 (2000)			

Pa	rt X	Balance Sheet					<del>-</del>
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing			-2,369,457	1	-1,572,636
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			40,607,023	4	40,428,072
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II (		1 4958(f)(1)) and			
		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			4,144,146	9	1,333,071
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	163,943,339			
	ь	Less accumulated depreciation	10b	143,873,283	29,412,316	10c	20,070,056
	11	Investments—publicly traded securities			52,180,673	11	0
	12	Investments—other securities See Part IV, line 11		•		12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets			582,217	14	461,369
	15	Other assets See Part IV, line 11			11,603,222	15	8,624,966
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .			136,160,140	16	69,344,898
	17	Accounts payable and accrued expenses .			323,691,736	17	265,141,717
	18	Grants payable				18	
	19	Deferred revenue			65,288,820	19	62,693,799
_	20	Tax-exempt bond liabilities				20	
jes	21	Escrow or custodial account liability Complete Part IV of Schedu.	le D.			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	,				
217		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties	s .			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			63,397	25	0
	26	Total liabilities. Add lines 17 through 25			389,043,953	26	327,835,516
Fund Balances		Organizations that follow SFAS 117, check here ► and complet through 29, and lines 33 and 34.	plet e l	ines 27			
an	27	Unrestricted net assets				27	
Ba	28	Temporarily restricted net assets				28	
Ξ	29	Permanently restricted net assets				29	
표		Organizations that do not follow SFAS 117, check here ▶ 🔽 as	nd con	ıplet e			
٥٢		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			350,000	30	350,000
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			50,000,000	31	50,000,000
	32	Retained earnings, endowment, accumulated income, or other for	unds		-303,233,813		-308,840,618
Net	33	Total net assets or fund balances			-252,883,813		-258,490,618
	34	Total liabilities and net assets/fund balances			136,160,140	34	69,344,898

#### Part XI Financial Statements and Reporting

			Yes	No
L	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
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	2c	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			
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
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

DLN: 93493316021050

OMB No 1545-0047

Open to Public Inspection

## **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Name of the organization **Employer identification number** FINRA REGULATION INC 52-1959501

Pa		Organizations Maintaining Donor Acorganization answered "Yes" to Form 99			or Accounts. Complet	e if the
			(a) Donor advised funds	(	( <b>b)</b> Funds and other accour	nts
1	Total n	umber at end of year				
2	Aggreg	ate contributions to (during year)				
3	Aggreg	ate grants from (during year)				
4	Aggreg	ate value at end of year				
5		organization inform all donors and donor advis re the organization's property, subject to the c	<u> </u>	or advi	sed <b>Yes</b>	┌ No
6	used o	organization inform all grantees, donors, and nly for charitable purposes and not for the ben- ing impermissible private benefit				┌ No
Pa	rt II	Conservation Easements. Complete	f the organization answered "Yes" t	o Form	n 990, Part IV, line 7.	
2	☐ Pro☐ Pro☐ Pro☐ Pro☐ Pro☐ Pro☐ Pro☐ Pro	e(s) of conservation easements held by the or eservation of land for public use (e g , recreation otection of natural habitat eservation of open space ete lines 2a-2d if the organization held a qualion	on or pleasure)  Preservation of an Preservation of a c	certified	ically importantly land area d historic structure onservation	1
	easeiii	ent on the last day of the tax year			Held at the End of the	Vear
	Totaln	umber of conservation easements		2a	Held at the Liid of the	i Cai
a b		creage restricted by conservation easements		2a 2b		
c		r of conservation easements on a certified his	toric structure included in (a)	2c		
_			` ,			
d		r of conservation easements included in (c) ac	•	2d		
3		r of conservation easements modified, transfe able year ▶	rred, released, extinguished, or terminate	ed by th	ie organization during	
4	Numbe	r of states where property subject to conserva	tion easement is located 🕨			
5	Does t	he organization have a written policy regarding ement of the conservation easements it holds?	the periodic monitoring, inspection, hand	—— dling of	violations, and <b>Yes</b>	┌ No
6	Staff ar	nd volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	nents di	uring the year ►	
7	A moun	t of expenses incurred in monitoring, inspectir	ng, and enforcing conservation easements	s during	g the year 🕨 \$	
8		ach conservation easement reported on line 2 (4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion	┌ Yes	┌ No
9	balance the org	XIV, describe how the organization reports co e sheet, and include, if applicable, the text of t anization's accounting for conservation easem	he footnote to the organization's financial nents	staten	nents that describes	
Par		<b>Organizations Maintaining Collectio</b> Complete if the organization answered "	Yes" to Form 990, Part IV, line 8.			
1a	art, hıs	rganization elected, as permitted under SFAS torical treasures, or other similar assets held e, in Part XIV, the text of the footnote to its fin	for public exhibition, education or researc	ch ın fuı		,
b	historia	organization elected, as permitted under SFAS cal treasures, or other similar assets held for p the following amounts relating to these items	public exhibition, education, or research i		•	
	(i) Rev	enues included in Form 990, Part VIII, line 1			<b>►</b> \$	
	(ii) Ass	sets included in Form 990, Part X			<b>►</b> \$	
2		rganization received or held works of art, histo ng amounts required to be reported under SFAS		or finan	cıal gaın, provıde the	
а	Revenu	ues included in Form 990, Part VIII, line 1			<b>►</b> \$	
b	Assets	included in Form 990, Part X			<b>▶</b> - \$	

Part	••• Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tr</u>	eası	ures, or C	<u>the</u>	<u>r Simila</u>	r Asse	ets (co	ontinued)
	Using the organization's accession and other items (check all that apply)	r records, check an	y of th	ne fol	owing t	that ar	re a signific	ant u	se of its c	ollectio	n	
а	Public exhibition		d	Γ	Loan	orexc	hange prog	rams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	ain hov	w the	y furthe	rthe	organızatıor	ı's ex	empt pur	oose in		
	During the year, did the organization solicit cassets to be sold to raise funds rather than t								ıılar	Г	Yes	┌ No
Part	Part IV, line 9, or reported an an						n answere	d "Y	es" to Fo	rm 990	),	
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	ediary	for c	ontribu	itions	or other ass	ets r	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\	/ and complete the	follow	ing t	able		Г			A mou	ınt	
c	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year						ŀ	1e				
f	Ending balance						-	1f				
	Did the organization include an amount on Fo	orm 990 Part V lin	217 ما				L				Yes	┌ No
			c Z I '							,	1 63	, 140
Par	If "Yes," explain the arrangement in Part XIV <b>t V Endowment Funds.</b> Complete i		n ans	:Wer	ad "Ve	s" to	Form 990	Dar	t IV line	10		
Fal	Lindowinent i unus. Complete i	(a)Current Year		Prior			vo Years Back		Three Years		:)Four Y	ears Back
1a	Beginning of year balance			-								
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as									
а	Board designated or quasi-endowment 🕨	%										
ь	Permanent endowment - %											
c	Term endowment ► %											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are helo	danda	admınıstere	d for	the			
	organization by										Yes	No
	(i) unrelated organizations					•		•		3a(i)		<u> </u>
	(ii) related organizations							•		3a(ii)	<u> </u>	<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of th	·						•		3b		<u> </u>
	VI Investments—Land, Buildings					an p	art Y line	10				
Fell	investments—Land, buildings	, and Equipme	iit. J		Cost or		(b)Cost or o		(c) Accum	aulated		
	Description of investment				s (invest		basis (othe		depreci		( <b>d</b> ) Bo	ok value
	and		•									
	Buildings		•									
	easehold improvements		•				29,26	5,017	25,	245,943		4,020,074
	quipment		•				12,55			277,194		1,280,212
_	\											4 760 770
	) ther	<u> </u>	•				122,11	9,916	107,	350,146		4,769,770 0,070,056

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12.		
<ul><li>(a) Description of security or category (including name of security)</li></ul>	( <b>b)</b> Book value	<b>(c)</b> Method of va Cost or end-of-year	
Financial derivatives		cost of end of year	market value
	+		
Closely-held equity interests			
Other			
	•		
Part VIII Investments—Program Related. Se	<u>e Form 990, Part X, line 13</u>	3.	
(a) Description of investment type	( <b>b</b> ) Book value	<b>(c)</b> Method of va	
(a) Description of investment type	(b) book value	Cost or end-of-year	market value
			<del></del>
	1		
	1		
Total (Column (h) chould equal Form 900, Part V, cel (R) line 12.)	•		
	PO 15		
Part IX Other Assets. See Form 990, Part X, II	ne 15.		N Book value
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	(1	<b>b)</b> Book value
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	(1	8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	(1	
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	(1	8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	(1)	8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	(1)	8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	( E	8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	( t	8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	( t	8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	(1)	8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	(1)	8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	(1)	8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	()	8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.		8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.	(1	8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.		8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.		8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15.		8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY	ne 15. ption		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  Total. (Column (b) should equal Form 990, Part X, col.(B) line	ne 15. ption		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X	ne 15. ption  15.)  X, line 25.		8,618,324
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  Total. (Column (b) should equal Form 990, Part X, col.(B) line	ne 15. ption		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X	ne 15. ption  15.)  X, line 25.		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY   Total. (Column (b) should equal Form 990, Part X, col.(B) line.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	15.)  X, line 25.  (b) A mount		8,618,324 6,642
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	15.)  X, line 25.  (b) A mount		8,618,324 6,642
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	15.)  X, line 25.  (b) A mount		8,618,324 6,642
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	15.)  X, line 25.  (b) A mount		8,618,324 6,642
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	15.)  X, line 25.  (b) A mount		8,618,324 6,642
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	15.)  X, line 25.  (b) A mount		8,618,324 6,642
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	15.)  X, line 25.  (b) A mount		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  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	15.)  X, line 25.  (b) A mount		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  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	15.)  X, line 25.  (b) A mount		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  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	15.)  X, line 25.  (b) A mount		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  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	15.)  X, line 25.  (b) A mount		8,618,324 6,642
Part IX Other Assets. See Form 990, Part X, II  (a) Descri  CASH ON DEPOSIT LONG TERM  DUE FROM RELATED PARTY  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	15.)  X, line 25.  (b) A mount  0		8,618,324 6,642

Schedule D (Form 990) 2009

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	.	
b	Other (Describe in Part XIV)	.	
C	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	leturn
1	Total expenses and losses per audited financial statements	<sub>1</sub>	
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b	]	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
Pai	rt XIV Supplemental Information		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
FIN 48 FOOTNOTE FROM		IN JULY 2006, THE FASB ISSUED FASB INTERPRETATION
CONSOLIDATED AUDITED		(FIN) NO 48, ACCOUNTING FOR UNCERTAINTY IN INCOME
FINANCIAL STATEMENTS		TAXES - AN INTERPRETATION OF FASB STATEMENT 109
		(FIN 48) FIN 48 IS CODIFIED IN FASB ASC TOPIC 740,
		INCOME TAXES AMONG OTHER THINGS, THE STANDARD
		PROVIDES GUIDANCE TO ADDRESS UNCERTAINTY IN TAX
		POSITIONS AND CLARIFIES THE ACCOUNTING FOR
		INCOME TAXES BY PRESCRIBING A MINIMUM
		RECOGNITION THRESHOLD THAT INCOME TAX
		POSITIONS MUST ACHIEVE BEFORE BEING RECOGNIZED
		IN THE FINANCIAL STATEMENTS IN ADDITION, THE
		STANDARD REQUIRES EXPANDED ANNUAL DISCLOSURES,
		INCLUDING A ROLLFORWARD OF THE BEGINNING AND
		ENDING AGGREGATE UNRECOGNIZED TAX BENEFITS, AS
		WELL AS SPECIFIC DETAIL RELATED TO TAX
		UNCERTAINTIES FOR WHICH IT IS REASONABLY POSSIBLE
		THE AMOUNT OF UNRECOGNIZED TAX BENEFIT WILL
		SIGNIFICANTLY INCREASE OR DECREASE WITHIN 12
		MONTHS ASC 740 WAS EFFECTIVE FOR NONPUBLIC
		ENTERPRISES, SUCH AS FINRA, ON JANUARY 1, 2009 THE
		ADOPTION OF SUCH STANDARD DID NOT HAVE A
		MATERIAL IMPACT ON OUR CONSOLIDATED RESULTS OF
		OPERATIONS AND FINANCIAL POSITION

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Schedule I (Form 990)

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

OMB No 1545-0047

2009

DLN: 93493316021050

Open to Public Inspection

52-1959501

Department of the Treasury Internal Revenue Service Name of the organization

FINRA REGULATION INC

WASHINGTON, DC 20006

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

Attach to Form 990

Employer identification number

Part I General Information on Grants and Assistance

- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds 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
EMPLOYEE BENEFIT RESEARCH INSTITUTE 1100 13TH STREET NW SUITE 378 WASHINGTON, DC 20006	521190398	501(c)(3)	32,500				SUSTAINING PARTNER CONTRIBUTION
APPLESEED FOUNDATION INC727 15TH STREET NW 11TH FLOOR WASHINGTON, DC 20005	521835698	501(C)(3)	25,000				A WARDS DINNER CONTRIBUTION
MCBRE451 HUNGERFORD DRIVE SUITE 508 ROCKVILLE,MD 20850	412047342	501(C)(3)	12,000				CHAMPION FOR CHILDREN'S AWARD SPONSOR
NATIONAL COUNCIL FOR ECONOMIC EDUCATION 122 EAST 42ND STREET SUITE 2600 NEW YORK, NY 10168	131623848	501(C)(3)	10,000				2009 VISIONARY AWARDS CONTRIBUTION
JUMPSTART COALITION FOR PERSONAL LITERACY 919 18TH STREET NW SUITE 300	522031287	501(C)(3)	10,000				A WARDS DINNER CONTRIBUTION

Enter total number of section 501(c)(3) and government organizations.

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>b)</b> Number of recipients	<b>(c)</b> 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 Supplem	ental Information. Complete	this part to provide the information required in Part I, line 2, and any other additional information.
Ident if ier	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 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 VOLUNTARY DISCLOSURE FOR APPLESEED FOUNDATION CONTRIBUTION DURING 2009 RICHARD G KETCHUM, FINRA CEO, SERVED AS A BOARD MEMBER OF THE APPLESEED FOUNDATION
OVERSIGHT AND RECORDKEEPING OF CONTRIBUTIONS	SCHEDULE I, PART I, LINE 2	CHARITABLE CONTRIBUTIONS ARE REVIEWED AND APPROVED BY THE APPROPRIATE BUSINESS UNIT HEAD (OR THEIR DESIGNEE) THE ORGANIZATION MAINTAINS ADEQUATE RECORDS TO SUBSTANTIATE THE AMOUNT AND THE PURPOSE OF THE CHARITABLE CONTRIBUTIONS

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Compensation Information** 

Pariet Ouestions Regarding Compensation

DLN: 93493316021050

OMB No 1545-0047

**Schedule J** (Form 990)

Department of the Treasury

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

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

Open to Public Inspection

Internal Revenue Service	► Attach to Form 990. ► See separate instructions.		Inspection
Name of the organization FINRA REGULATION INC		Employer identif	ication number
		52-1959501	

	-			Yes	Νo		
1a	Check the appropriate box(es) if the organization provided 990, Part VII, Section A, line 1a Complete Part III to pr						
	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)					
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						
2	Did the organization require substantiation prior to reimbiofficers, directors, trustees, and the CEO/Executive Dire		2	Yes			
3	Indicate which, if any, of the following the organization us organization's CEO/Executive Director Check all that ap	ply					
	•	Written employment contract					
	Independent compensation consultant	, ,					
	Form 990 of other organizations	Approval by the board or compensation committee					
4	During the year, did any person listed in Form 990, Part Vor a related organization	/II, Section A , line 1a with respect to the filing organization					
а	Receive a severance payment or change-of-control payment?						
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?						
c	Participate in, or receive payment from, an equity-based compensation arrangement?						
	If "Yes" to any of lines 4a-c, list the persons and provide	the applicable amounts for each item in Part III					
	Only 501(c)(3) and 501(c)(4) organizations only must co	mplete lines 5-9.					
5	For persons listed in form 990, Part VII, Section A, line 1 compensation contingent on the revenues of	la, did the organization pay or accrue any					
а	The organization?		5a				
b	Any related organization?		5b				
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, line 1 compensation contingent on the net earnings of	La, did the organization pay or accrue any					
а	The organization?		6a				
ь	Any related organization?						
	If "Yes," to line 6a or 6b, describe in Part III						
7							
8	Were any amounts reported in Form 990, Part VII, paid o subject to the initial contract exception described in Regs in Part III		8				
9	If "Yes" to line 8, did the organization also follow the rebusection 53 4958-6(c)?	ıttable presumptıon procedure described in Regulations	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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name  (B) Breakdown of W-2 and/or 1099-MISC compensation (I) Base compensation (I) Davis compensation (II) Davis compensation (III) Other comp									
(i) Base incentive reportable compensation reportable compensation compensation reportable	(A) Name	(B) Breakdown of	W-2 and/or 1099-MI		(C) Retirement and		(E) Total of columns		
See Additional Data Table		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation compensation			benefits	(B)(ı)-(D)	Form 990 or	
	See Additional Data Table								

#### 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
SUPPLEMENTAL COMPENSATION INFORMATION		THE COMPENSATION INFORMATION PROVIDED IS IN CONFORMANCE WITH IRS DISCLOSURE REQUIREMENTS, WHICH IS BASED ON CASH PAID AND BENEFITS ACCRUED IN THE CALENDAR YEAR AS SUCH, IT WILL NOT BE CONSISTENT WITH COMPENSATION DISCLOSURES PAID AND SENERIFIS ACCRUED IN THE CALENDAR YEAR AS SUCH, IT WILL NOT BE CONSISTENT WITH COMPENSATION DISCLOSURES PAID AND SENERIFISM OF THE HIGHEST COMPENSATION CONSISTENT WITH COMPENSATION DISCLOSURES PAID AND THE HIGHEST COMPENSATION OF THE PROPERTY OF THE PAID AND AND THE PAID AND TH
COMPENSATION INFORMATION	PART I, LINES 4A AND 4B	4A) IN CONNECTION WITH MICHAEL JONES' SEPARATION FROM FINRA, HE WAS PAID \$1,068,846 IN 2009 IN CONNECTION WITH VIRGINIA MARIANO-JANS' SEPARATION FROM FINRA, SHE WAS PAID \$109,024 IN 2009 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 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 NON-QUALIFIED DEFINED BENEFIT PLAN THAT HAD AN INCREMENTAL INCREASE IN PRESENT VALUE OF PARTICIPANTS IN THE NON-QUALIFIED DEFINED BENEFIT PLAN THAT HAD AN INCREMENTAL INCREASE IN PRESENT VALUE OF \$206,757 DANIEL M SIBEARS - \$33,085 PARTICIPANTS IN THE SUPPLEMENTAL NON-QUALIFIED DEFINED BENEFIT PLAN THAT HAD AN OVER THE DURATION OF MS SCHAPIRO'S 13 YEARS OF SERVICE TO FINRA 2) FINRA'S SUPPLEMENTAL DEFINED BENEFIT PLAN DESCRIBED TO FINED 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 VIRGINIA MARIANO-JANS - \$101,708 HANS-LINHARD REICH - \$48,356
VOLUNTARY COMPENSATION DISCLOSURES		JAMES D WEDDLE WAS A VOLUNTEER BOARD MEMBER IN 2009 AND DID NOT RECEIVE COMPENSATION FOR HIS SERVICES SCHEDULE J-2 FROM JANUARY 23, 2009 THROUGH MARCH 15, 2009, STEPHEN LUPARELLO WAS INTERIM CEO AND MEMBER OF THE BOARD OF FINRA

Software ID: Software Version:

**EIN:** 52-1959501

Name: FINRA REGULATION INC

### Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1 orm 990, Schedule 3, Part II - Officers, Directors, Trustees, key Limployees, and Highest Compensated Limployees								
(A) Name		(B) Breakdown of W-2 and/or 1099-MIS  (i) Base (incentive Compensation		compensation (iii) Other		( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported in prior Form 990 or Form 990-EZ
		Compensation	compensation	compensation				
RICHARD G KETCHUM	(I) (II)	0 755,897	0	0 61,464	0 234,218	0 16,721	1,068,300	0 0
MARY L SCHAPIRO	(I) (II)	0 79,346	0 1,303,828	0 5,977,388	0 7,691	0 2,366	7,370,619	0
TODD T DIGANCI	(ı) (ıı)	0 478,527	0 558,647	0 92,383	0 30,979	0 26,332	0 1,186,868	0
MARCIA E ASQUITH	(ı) (ıı)	0 215,505	0 171,000	0 44,124	0 64,042	0 31,615	0 526,286	0
MARTIN P COLBURN	(ı) (ıı)	0 373,376	0 366,402	0 85,069	0 144,545	0 27,057	0 996,449	0
JAMES J CUMMINGS	(I) (II)	252,998 0	250,035 0	127,067 0	83,236 0	26,855 0	740,191 0	0
JAMES P DONOVAN	(I) (II)	0 499,166	300,000	0 28,170	0 152,603	0 6,770	0 986,709	0
ROBERT C ERRICO	(ı) (ıı)	391,937 0	342,400 0	75,430 0	290,826	31,789		0
THOMAS R GIRA	(I) (II)	317,275 0	301,529 0	60,994 0	69,153 0	26,900 0	775,851 0	0
STEPHEN LUPARELLO	(I) (II)	549,209 0	519,542 0	120,231	34,643 0	28,202	1,251,827	0
MARC MENCHEL	(I) (II)	379,977 0	384,763 0	277,605 0	36,369 0	28,553 0	1,107,267	0
SUSAN L MERRILL	(ı) (ıı)	418,924 0	630,300 0	75,242 0	133,638	31,821 0	1,289,925	0
HOWARD M SCHLOSS	(I) (II)	0 419,399	0 355,961	0 69,423	0 174,477	0 46,368	0 1,065,628	0
STEPHEN M SCHOENEMAN	(I) (II)	0 272,593	0 187,500	0 48,803	0 78,809	0 31,317	0 619,022	0
THOMAS M SELMAN	(I) (II)	316,953 0	285,827 0	46,899 0	76,448 0	11,138 0	737,265 0	0
GRACE B VOGEL	(ı) (ıı)	343,902 0	620,300 0	48,524 0	120,087 0	29,397 0	1,162,210	0
SUSAN FAXELROD	(ı) (ıı)	252,241 0	283,365 0	61,962 0	72,114 0	36,716 0	706,398 0	0
VIRGINIA MARIANO- JANS	(ı) (ıı)	157,801 0	155,000 0	313,845 0	700,27 <b>4</b> 0	12,521 0	1,339,441	0
HANS-LINHARD REICH	(ı) (ıı)	276,807 0	214,000	107,778 0	57,600 0	18,639 0	674,824 0	0
JAMES S SHORRIS	(ı) (ıı)	324,464 0	240,000	78,636 0	97,387 0	30,666 0	771,153 0	0
DANIEL M SIBEARS	(ı) (ıı)	334,720 0	270,732 0	137,687 0	56,578 0	39,197 0	838,914 0	0
MICHAEL D JONES FORMER	(ı) (ıı)	0	0 560,000	0 508,846	0	0 0	0 1,068,846	0 508,846

DLN: 93493316021050

OMB No 1545-0047

#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Transactions with Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

	the organization GULATION INC						Employer id	lent if ica	ation numbe	er
							52-19595	01		
Part I	Excess Benefit Tra									
	Complete if the organiza	tion answered "\	<u>res" on Form 990,</u>	Part IV, line 25a d	or 25b, c	r Forn	1 990-EZ,	Part V , I		
1	(a) Name of disq	ualified person		<b>(b)</b> Desc	ription	of trans	saction		Yes	orrected <b>No</b>
									ies	140
<b>3</b>										
	er the amount of tax impos tion 4958	ed on the organ	ization managers o	r disqualified pers	ons auri	ng the	year under	s —		
3 Ente	er the amount of tax, if any	, on line 2, abov	e, reimbursed by t	he organization .			🕨	\$		
	<b>-</b>			_						
Part II	Loans to and/or Complete if the organi			O Part IV June 26	or Form	n 000.	.E7 Dart V	lina 39	l a	
	Complete if the organi		res on Form 99	O, Part IV, lille 20	, 01 - 011	11 990-	(f)	, iiile 3 c	o a	
(a) Name	e of interested person and	<b>(b)</b> Loan to or from the	(c)O riginal		(e) I		Approv		(g)Writt	
(a) Name	purpose	organization?	principal amount	(d)Balance due	defaul	lt?	by boar committ		agreeme	nt?
		To From			Yes	No	Yes	No	Yes	No
Total			<b>.</b> .		ı		ı		1	
Total .  Part III	Grants or Assista		na Interested	Dersons						
	Complete if the orga				/, line 2	7.				
	a) Name of interested pers	/h	Relationship betw				mount of a	ant or t	ype of assis	tance
(*	a) Name of interested pers	,011	and the o	rganızatıon		(6)4	illoulit of gi	ant or t	ype or assis	stance
Part IV	Business Transac	tions Involvi	ing Interested	Persons.						
	Complete if the orga				/, line 2	8a, 2	8b, or 28	C		
		(b)	Relationship						<b>(e)</b> S	haring o

See Additional Data Table

(a) Name of interested person

between interested (c) A mount of person and the organization

transaction

(d) Description of transaction

(e) Sharing of organization's revenues?

No

Yes

#### **Additional Data**

Software ID: Software Version:

**EIN:** 52-1959501

Name: FINRA REGULATION INC

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction \$	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
NYSE EURONEXTNYSE REGULATION	SEE SCHEDULE O	12,610,980	SEE SCHEDULE O		No
NYSE EURONEXTNYSE REGULATION	SEE SCHEDULE O	27,547,565	SEE SCHEDULE O		No
NYSE EURONEXTNYSE REGULATION	SEE SCHEDULE O	16,964,157	SEE SCHEDULE O		No
LPL FINANCIAL	SEE SCHEDULE O	12,830,385	SEE SCHEDULE O		No
UVEST FINANCIAL SERVICES GROUP	SEE SCHEDULE O	1,867,316	SEE SCHEDULE O		No
STERNE AGEE CLEARING INC	SEE SCHEDULE O	119,038	SEE SCHEDULE O		No
STERNE AGEE LEACH INC	SEE SCHEDULE O	864,976	SEE SCHEDULE O		No
EDWARD JONES	SEE SCHEDULE O	22,530,306	SEE SCHEDULE O		No

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# **Supplemental Information to Form 990**

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

DLN: 93493316021050 OMB No 1545-0047

Open to Public Inspection

**SCHEDULE 0** 

Department of the Treasury

Internal Revenue Service

(Form 990)

Name of the organization FINRA REGULATION INC

Employer identification number

52-1959501

		52-1959501
ldentifier	Return Reference	Explanation
VOLUNTARY DISCLOSURE FOR FINANCIAL INFORMATION		THE FINANCIAL INFORMATION INCLUDED IN THE FORM 990 IS PRESENTED ON A STAND-ALONE BASIS WITH ALL SIGNIFICANT INTERCOMPANY RECEIVABLE AND PAYABLE AMOUNTS ELIMINATED AND DOES NOT REPRESENT THE CONSOLIDATED RESULTS FOR FINANCIAL INDUSTRY REGULATORY AUTHORITY, INC (FINRA) AND ITS SUBSIDIARIES THE FINANCIAL INFORMATION PRESENTED RELFECTS ESTIMATES OF OVERHEAD ALLOCATIONS THE 2009 FORM 990 SHOULD BE READ IN CONNECTION WITH THE 2009 FINRA ANNUAL FINANCIAL REPORT WHICH IS AVAILABLE ON WWW FINRA ORG SEE ALSO SEPARATE 2009 FORM 990S FOR RELATED ENTITIES, INCLUDING FINRA, FINRA DISPUTE RESOLUTION, INC, AND FINRA INVESTOR EDUCATION FOUNDATION
ORGANIZATION ACHIEVEMENTS OR PROGRAM SERVICES	FORM 990, PART III, LINE 4	FINRA IS THE LARGEST INDEPENDENT REGULATOR FOR ALL SECURITIES FIRMS DOING BUSINESS WITH THE PUBLIC IN THE UNITED STATES THROUGH FINRA REGULATION, FINRA OVERSEES NEARLY, 47,700 BROKERAGE FIRMS, ABOUT 167,000 BRANCH OFFICES AND A PROXIMATELY 633,000 REGISTERED SECURITIES REPRESENTATIVES FINRA IS DEDICATED TO INVESTOR PROTECTION AND MARKET INTEGRITY THROUGH EFFECTIVE AND EFFICIENT REGULATION OF THE SECURITIES INDUSTRY 4A) MARKET REGULATION FINRA'S MARKET REGULATION FINRA'S MARKET REGULATION FINRA'S MARKET REGULATION OF THE SECURITIES INDUSTRY 4A) MARKET REGULATION FINRA'S MARKET REGULATION FINRA'S MARKET REGULATION OF THE SECURITIES FOR COMPLIANCE WITH FINRA RULES AND FEDERAL SECURITIES LAWS MARKET REGULATION ALSO PROVIDES REGULATES AND FEDERAL SECURITIES LAWS MARKET REGULATION ALSO PROVIDES EXCHANGE BATS AND THE INTERNATIONAL SECURITIES EXCHANGE IN ADDITION, THIS AREA IS RESPONSIBLE FOR INSIDER-TRADING SURVEILLANCE FOR ALL NASDAQ AND NY SE ALTERNEXT LISTED ISSUES ACROSS ALL US EXCHANGES, AS WELL AS CERTAN TRADING RULES THAT ARE COMMON BETWEEN FINRA AND OTHER MARKETS MARKET REGULATION ALSO REGULATES TRADING IN CORPORA TE AND MUNICIPAL DEBT INSTRUMENTS, AND EXAMINES MARKET-MAKING AND TRADING FIRMS TO ASSESS COMPLAINCE WITH EXCHANGES AND FINRA TRADING RULES AND FEDERAL SECURITIES LAWS 48) MEMBER REGULATION FINRA'S MEMBER REGULATION DEPARTMENT HAS A COMPREHENSIVE EXAMINATION PROGRAM WITH DEDICATED RESOURCES OF MORE THAN 1, 10) EMPLOYEES SECURITIES LAWS 48) MEMBER REGULATION CONDUCT REGULAR EXAMINATION SON A SCHEDULE THAT IS SETABLISHED BASED ON A RISK-PROFILE MODEL IN ADDITION, MEMBER REGULATION CONDUCTS TARGETED EXAMINATION SON BASED ON INVESTOR COMPLAINTS, REFERRALS FROM OTHER FINRA DEPARTMENTS, TERMINATIONS OF BROKERAGE EMPLOYEES FOR CAUSE, ARBITRATIONS AND REFERRALS FROM OTHER REGULATION ONDUCTRED ALMOST 2,300 REGULAR EXAMINATION SAND NEARLY 8,000 TARGETED AND SWEEP EXAMINATIONS OF BROKERAGE EMPLOYEES FOR CAUSE, ARBITRATIONS AND NEARLY 8,000 TARGETED AND SWEEP EXAMINATION OF PROFILE FINRA SOND REGULAR EXAMINATION
BUSINESS AND FAMILY RELATIONSHIPS	FORM 990, PART VI, LINE 2	THE FOLLOWING FINRA REGULATORY POLICY COMMITTEE MEMBERS ALSO SERVE TOGETHER AS MEMBERS OF THE BOARD OF NYSE REGULATION JAMES F DUFFY (ALSO INTERIM CEO OF NYSE REGULATION) ELLYN L BROWN (ALSO NYSE EURONEXT) DR SHIRLEY ANN JACKSON (ALSO NYSE EURONEXT) RICHARD S PECHTER JOHN W SCHMIDLIN
DESCRIPTION OF SIGNIFICANT CHANGES TO ORGANIZING OR ENABLING DOCUMENT	FORM 990, PART VI, LINE 4	IN MAY 2009, A RULE CHANGE RELATING TO THE FINRA REGULATION BOARD COMPOSITION AND CONFORMING CHANGES TO THE FINRA REGULATION BY-LAWS WAS APPROVED
DESCRIPTION OF CLASSES OF MEMBERS OR STOCKHOLDERS	FORM 990, PART VI, LINE 6	FINRA IS THE SOLE NOT-FOR-PROFIT STOCKHOLDER OF FINRA REGULATION, INC
DESCRIPTION OF CLASSES OF PERSONS AND THE NATURE OF THEIR RIGHTS	FORM 990, PART VI, LINE 7A	FINRA, THE SOLE NOT-FOR-PROFIT STOCKHOLDER, ELECTS ALL MEMBERS OF THE GOVERNING BODY
CLASSES OF PERSONS, DECISIONS REQUIRING APPROVAL & TYPE OF VOTING RIGHTS	FORM 990, PART VI, LINE 7B	FINRA, THE SOLE NOT-FOR-PROFIT STOCKHOLDER, RETAINS THE FOLLOWING AUTHORITY AND FUNCTIONS 1) TO EXERCISE OVERALL RESPONSIBILITY FOR ENSURING THAT THE ASSOCIATION'S STATUTORY AND SELF-REGULATORY OBLIGATIONS AND FUNCTIONS ARE FULFILLED 2) TO DELEGATE AUTHORITY TO THE SUBSIDIARIES TO TAKE ACTIONS ON BEHALF OF THE ASSOCIATION 3) TO ELECT THE SUBSIDIARY BOARDS OF DIRECTORS 4) TO REVIEW THE RULEMAKING AND DISCIPLINARY DECISIONS OF THE SUBSIDIARIES 5) TO COORDINATE ACTIONS OF THE SUBSIDIARY BOARDS AS NECESSARY 6) TO RESOLVE ANY DISPUTES AMONG THE SUBSIDIARIES 7) TO ADMINISTER COMMON OVERHEAD AND TECHNOLOGY OF THE SUBSIDIARIES 8) TO ADMINISTER THE OFFICE OF INTERNAL REVIEW AS PROVIDED IN THE ASSOCIATION'S BY-LAWS 9) TO MANAGE EXTERNAL ASSOCIATION RELATIONS ON MAJOR POLICY ISSUES 10) TO DIRECT THE SUBSIDIARIES TO TAKE ACTION NECESSARY TO EFFECTUATE THE PURPOSES AND FUNCTIONS OF THE ASSOCIATION 11) TO TAKE ACTION AB INITIO IN AN AREA OF RESPONSIBILITY DELEGATED TO SUBSIDIARIES
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 AUDIT AND MANAGEMENT COMPENSATION COMMITTEES REVIEWED AND APPROVED THE ORGANIZATION'S 2009 FORM 990 ON SEPTEMBER 21, 2010 THE BOARD WAS PROVIDED ACCESS TO THE FINAL FORM 990 FOR REVIEW (VIA A WEBSITE FOR BOARD MEMBERS ONLY) PRIOR TO FILING

ldentifier	Return Reference	Explanation
ENFORCEMENT OF CONFLICT OF INTEREST POLICY	FORM 990, PART VI, LINE 12C	THE ORGANIZATION HAS WRITTEN CONFLICT OF INTEREST POLICIES FOR BOARD MEMBERS AND EMPLOYEES THE WRITTEN CONFLICT OF INTEREST POLICY FOR BOARD MEMBERS REQUIRES INITIAL DISCLOSURE OF INTERESTS THAT COULD GIVE RISE TO CONFLICTS AS WELL AS ANNUAL DISCLOSURE BY THE SAME BOARD MEMBERS ADDITIONALLY, THE WRITTEN POLICY CONTAINS AN ONGOING OBLIGATION OF BOARD MEMBERS TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST AS THEY ARISE EMPLOYEES ARE REQUIRED TO CERTIFY ANNUALLY AS TO THEIR COMPLIANCE WITH THE WRITTEN 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 RECEIVE 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-DEALER OR ENTITY THAT DERIVES MORE THAN 25% OF ITS GROSS REVENUES FROM BROKER-DEALER SUBSIDIARIES OR AFFILLATES 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 EMPLOYEES 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 CONFLICT-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 EMPLOYEES WHO REPORT SUSPECT

NYSE RELATED ORGANIZATIONS \$27,547,565 FOR OCCUPANCY AND \$16,964,157 FOR VARIOUS PASS-THROUGH FEES COLLECTED BY FINRA REGULATION AND REMITTED TO NYSE JAMES D WEDDLE IS MANAGING PARTNER OF EDWARD JONES AND A MEMBER OF THE FINRA REGULATORY POLICY COMMITTEE BOARD OF DIRECTORS EDWARD JONES PAID FINRA REGULATION \$22,530,306 FOR REGULATORY SERVICES	PROCESS TO DETERMINE COMPENSATION OF TOP OFFICIALS, OFFICERS & KEY EMP FORM 990, PART VI, LINES 15A AND 15B THE ANAGEMENT COMPENSATION COMMITTEE OF THE FINRA BOAD OF GOVERNORS, (THE "COMPENSATION COMMITTEE") IS RESPONSIBLE FOR SETTING PAY FOR EXECUTIVES OF FINRA AND SUBSIDIARIES WHOSE TOTAL COMPENSATION, INCLUDING INCENTIVE COMPENSATION, MAY EXCEDS \$1 MILLION THE COMMITTEE IS COMPRISED OF FOUN NON-EMPHOYEE, NON-SECURITIES INDUSTRY MEMBERS OF THE BOAD OF SOVERNORS THE COMMITTEE MET ON NOVEMBER 17, 2008, DECEMBER 1, 2008, AND AGAIN ON JANUARY 8, 2009 TO ESTABLISH INCENTIVE OMPENSATION ATTRIBUTABLE TO THE PERFORMANCE OF SERVICES DURING CALENDAR YEAR 2009 AND TO ESTABLISH MASE SALARIES FOR CALENDAR YEAR 2009 THE COMMITTEE ENGAGED MERCER, INC. ("MERCER"), A THIRD-PARTY COMPENSATION TO CONSULTANT, TO PREPARE A COMPENSATION STUDY FOR REVIEW AT THESE MEETINGS THE COMMENSATION STUDY INCLUDED THE COMPENSATION INCOMEDING 2008 OR ALL OF THE EXCENTIVES UNDER CONSIDERATION AS WELL AS COMPENSATION INFORMATION FOR EXECUTIVES EMPLOYED OF ALL OF THE SELVEN AND THE SENDER THE SEMENTINGS. INCLUDING BOOKERS (FANKING FINES SCURITIES EXCHANGES AND THE SEVEN AND THE SENDER THE SEMENTING SERVICES OF THE SENDER O
REGULATION AND REMITTED TO NYSE JAMES D WEDDLE IS MANAGING PARTNER OF EDWARD JONES AND A MEMBER OF THE FINRA REGULATORY POLICY COMMITTEE BOARD OF DIRECTORS EDWARD JONES PAID FINRA REGULATION \$22,530,306 FOR REGULATORY SERVICES	RELATED ORGANIZATIONS PAID FINRA REGULATION \$12,610,980 IN REGULATORY FEES FINRA REGULATION PAID NYSE RELATED ORGANIZATIONS \$27,547,565 FOR OCCUPANCY AND \$16,964,157 FOR VARIOUS PASS-THROUGH FEES COLLECTED BY FINRA REGULATION AN REMITTED TO NYSE JOHN W SCHMIDLIN IS A MEMBER OF THE BOARD OF NYSE REGULATION, AND A MEMBER OF THE FINRA REGULATORY POLICY COMMITTEE NYSE RELATED ORGANIZATIONS PAID FINRA REGULATION \$12,610,980 IN REGULATORY FEES FINRA REGULATION PAID

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DLN: 93493316021050

OMB No 1545-0047

**2003**Open to Public

Inspection

# SCHEDULE R (Form 990)

**Related Organizations and Unrelated Partnerships** 

Department of the Treasury Internal Revenue Service

FINRA REGULATION INC

20-0863779

Name of the organization

► 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.

Employer identification number

52-1959501

	52-1959501
Part I	Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

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

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	
FINANCIAL IND REGULATORY AUTHORITY INC						
1735 K STREET NW	REGULATORY	DE	501(C)(6)		NA	
WASHINGTON, DC 20006 53-0088710 FINRA DISPUTE RESOLUTION INC						
1735 K STREET NW	ARBITRATION	DE	501(C)(6)		FINRA	
WASHINGTON, DC 20006 52-2187577 FINRA INVESTOR EDUCATION FOUNDATION						
1735 K STREET NW	EDUCATION	DE	501(C)(4)		FINRA	
WASHINGTON, DC 20006			(-/(-/			

(c)

(j)

Yes

No

(h)

Yes

No

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

(i) Code V—UBI **(e)** Predominant income (d) Direct controlling (f) Share of total income Disproprtionate General or (a) Name, address, and EIN of (b) Legal (g) Primary activity 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)

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	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership
NEW NASD HOLDING INC 1735 K STREET NW WASHINGTON, DC20006 52-2307595	HOLDING COMPA	DE		C-CORP	0	0	0 %
SECURITIES DEALERS RISK PURCHASING GROUP 1735 K STREET NW WASHINGTON, DC20006 52-1953595	INSURANCE	DE		C-CORP	0	0	0 %
SECURITIES DEALERS INSURANCE CO VICTORIA HALL 11 VICTORIA STREET HM 11 HAMILTON BD	INSURANCE	BD		C-CORP	0	0	0 %
FINRA LIMITED 35 NEW BROAD STREET EC2M 1NH LONDON UK	EDUCATIONAL	UK		C-CORP	0	0	0 %

Part V	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
b	Gift, grant, or capital contribution to other organization(s)	1b		No
c	Gıft, grant, or capıtal 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		No
n	Sharing of paid employees	1n		No
0	Reimbursement paid to other organization for expenses	10	Yes	
р	Reimbursement paid by other organization for expenses	1p	Yes	
q	O ther transfer of cash or property to other organization(s)	<b>1</b> q		No
r	O ther transfer of cash or property from other organization(s)	1r		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
	(b)	,	c)	
			involve	ed .

(1) FINRA DISPUTE RESOLUTION INC 0 1,569,783

(1) See Additional Data Table

(2)

(3)

(4)

(5)

(6)

Schedule R (Form 990) 2009

#### 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

# Software ID: Software Version:

**EIN:** 52-1959501

Name: FINRA REGULATION INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per		(C tion ( hat a	che				(D) Reportable compensation from the	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
HARVEY J GOLDSCHMID CHAIR, REG POLICY COMMITTEE	3 0	Х			<u> </u>		J	0	64,297	0
CHARLES A BOWSHER REGULATORY POLICY COMMITTEE	2 0	X						0	68,627	0
ELLYN L BROWN REGULATORY POLICY COMMITTEE	2 0	X						0	61,419	0
MARI BUECHNER REGULATORY POLICY COMMITTEE	2 0	X						0	70,018	0
MARK S CASADY REGULATORY POLICY COMMITTEE	4 0	Χ						0	45,506	0
JAMES F DUFFY REGULATORY POLICY COMMITTEE	2 0	X						0	54,345	0
W DENNIS FERGUSON REGULATORY POLICY COMMITTEE	3 0	Χ						0	65,360	0
DR SHIRLEY ANN JACKSON REGULATORY POLICY COMMITTEE	2 0	X						0	61,371	0
RICHARD S PECHTER REGULATORY POLICY COMMITTEE	2 0	Χ						0	70,169	0
MARK A SARGENT REGULATORY POLICY COMMITTEE	2 0	X						0	65,000	0
JOHN W SCHMIDLIN REGULATORY POLICY COMMITTEE	2 0	Χ						0	0	0
JOEL SELIGMAN REGULATORY POLICY COMMITTEE	2 0	X						0	56,419	0
G DONALD STEEL REGULATORY POLICY COMMITTEE	2 0	Χ						0	65,774	0
JAMES D WEDDLE REGULATORY POLICY COMMITTEE	2 0	X						0	0	0
RICHARD G KETCHUM CEO (AS OF 3/16/09)	60 0			Х				0	817,361	250,939
MARY L SCHAPIRO CEO (THROUGH 1/23/2009)	60 0			X				0	7,360,562	10,057
TO DD T DIGANCI EXECUTIVE VP AND CFO	60 0			Х				0	1,129,557	57,311
MARCIA E ASQUITH SENIOR VP AND CORP SECRETARY	60 0			Х				0	430,629	95,657
MARTIN P COLBURN EXECUTIVE VP AND CTO	60 0				X			0	824,847	171,602
JAMES J CUMMINGS EXECUTIVE VICE PRESIDENT	60 0				X			630,100	0	110,091
JAMES P DONOVAN SENIOR EXECUTIVE VICE PRES	60 0				X			0	827,336	159,373
ROBERT C ERRICO EXECUTIVE VICE PRESIDENT	60 0				X			809,767	0	322,615
THOMAS R GIRA EXECUTIVE VICE PRESIDENT	60 0				X			679,798	0	96,053
STEPHEN LUPARELLO SENIOR EXECUTIVE VICE PRES	60 0				Χ			1,188,982	0	62,845
MARC MENCHEL EXEC VP AND GENERAL COUNSEL	60 0				Х			1,042,345	0	64,922

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours	Average Position (check all Reportable hours that apply) 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
SUSAN L MERRILL EXECUTIVE VICE PRESIDENT	60 0		•	•	Х			1,124,466	0	165,459
HOWARD M SCHLOSS EXECUTIVE VICE PRESIDENT	60 0				X			0	844,783	220,845
STEPHEN M SCHOENEMAN SENIOR VICE PRESIDENT	60 0				X			0	508,896	110,126
THOMAS M SELMAN EXECUTIVE VICE PRESIDENT	60 0				X			649,679	0	87,586
GRACE B VOGEL EXECUTIVE VICE PRESIDENT	60 0				x			1,012,726	0	149,484
SUSAN FAXELROD SENIOR VICE PRESIDENT	60 0					х		597,568	0	108,830
VIRGINIA MARIANO-JANS SENIOR VICE PRESIDENT	60 0					Х		626,646	0	712,795
HANS-LINHARD REICH SENIOR VICE PRESIDENT	60 0					X		598,585	0	76,239
JAMES S SHORRIS EXECUTIVE VICE PRESIDENT	60 0					X		643,100	0	128,053
DANIEL M SIBEARS EXECUTIVE VICE PRESIDENT	60 0					Х		743,139	0	95,775
MICHAEL D JONES FORMER SENIOR EXEC VP AND CAO							Х	0	1,068,846	0

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
REGULATORY FEES	900,099	387,935,359	387,935,359		
USER FEES	900,099	144,765,438	144,688,141	77,297	
CONTRACT SERVICES FEES	900,099	28,018,770	28,018,770		
FINES	900,099	47,684,151	47,684,151		
ALL OTHER PROGRAM SERVICE REVENUE	900,099	309,718	309,718		

### Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
OVERHEAD ALLOC FROM PARENT	121,296,041			
BAD DEBT EXPENSE	6,113,989			
TEMPORARY HELP	1,592,415			
SUBSCRIPTIONS/PUBLICATIONS	557,405			
BANK SERVICE FEES	106,826			