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## Form 990

## **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)

OMB No 1545 0047 2009

Department of the Treasury

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

Open to Public Inspection

me	rnai Reve	nue Service - The organization may have to use a copy of this return to saisty state reporting	ing roquironion					
	For the 2009 calendar year, or tax year beginning , 2009, and ending ,							
В	Check if	applicable C	D Employer Ider	itification Number				
	[]Add	ress change   Please use   INDEPENDENT FREIGHT FORWARDERS AND	58-1466324					
	$\vdash$	or print or type. CUSTOMS HOUSE BROKER ASSOCIATION, INC.	E Telephone nur	mber				
	$\vdash$	See P.O. BOX 45284	(770)	588-1206				
	Init	al return specific ATLANTA, GA 30320	(770)	300 1200				
	☐ Ter	mination tions. /		F7 C01				
	L Am	ended return	G Gross receipts					
	Ap	incation pending 1. Trains and dasiess of principal annex.	H(a) is this a group return for a					
	_	SAME AS C ABOVE	H(b) Are all affiliates included?  If 'No,' attach a list (see if	Yes No				
T	Tax-	exempt status X 501(c) ( 6 )    (insert no )    4947(a)(1) or    527	ii iio, allacii a iisi (see ii	istractionsy				
J			H(c) Group exemption number	<b>&gt;</b>				
ĸ		of organization X Corporation Trust Association Other ► L Year of Formati		legal domicile GA				
	art I	Summary	511 23 02   111 Olding 51					
1.0		Briefly describe the organization's mission or most significant activities. THE MISS.	TON OF TEECURA	TS TO PROMOTE				
	1							
9		THE COMMON BUSINESS INTERESTS OF CUSTOMS BROKERS & INT						
Jan		FORWARDERS: TO ENCOURAGE THE PROFESSIONALISM WITHIN OU						
/en		STANDARD OF INTEGRITY & EFFICIENCY THAT WILL PROTECT T						
Ó	_	Check this box • if the organization discontinued its operations or disposed of more	e than 25% of its assets.					
∞ ర	1	Number of voting members of the governing body (Part VI, line 1a)	4	<del></del>				
es	ľ	Number of independent voting members of the governing body (Part VI, line 1b)	5	5 5 0				
₹		otal number of employees (Part V, line 2a) otal number of volunteers (estimate if necessary)	6	50				
Activities & Governance	1	otal number of volumeers (estimate if necessary)  otal gross unrelated business revenue from Part VIII, column (C), line 12	7a					
		Net unrelated business taxable income from Form 990-T, line 34	7 n					
	_ <u> </u>	det unrelated business taxable income nom Form 990-1, line 34	T					
			Prior Year	Current Year				
٥	1	Contributions and grants (Part VIII, line 1h)	17,818.	4,527.				
Ž.		Program service revenue (Part VIII, line 2g)	58,116.	52,143.				
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		2 462				
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-3,463.				
	12	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	75,934.	53,207.				
		Grants and similar emounts paid (Part IX, column (A), lines 1-3)						
	14	Benefits paid to of formantiats (Part X, column (A), line 4)						
	15 5	salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)						
Expenses	16a F	Professional Modraiging fees (Part 22 column (A), line 11e)						
ë		Professional Madvaising fees (Part & column (A), line 11e)						
ă	ן ס	otal fundraising expenses (Part Manpolumn (D), line 25)	5.5 5.0	65.050				
	17 (	other expenses. Add thes. 19. 7 (must equal Part IX, column (A), line 25)	69,503.	67,052.				
	18	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	69,503.	67,052.				
	19 F	tevenue less expenses. Subtract line 18 from line 12	6,431.	-13,845.				
8 8			Beginning of Year	End of Year				
Not Assets or Fund Balancos	20	otal assets (Part X, line 16)	21,690.	7,845.				
A G		otal liabilities (Part X, line 26)	0.	0.				
Ž.		let assets or fund balances. Subtract line 21 from line 20	21,690.	7,845.				
	22   rt	Signature Block	21,000.	7,043.				
	F L FE		<del></del>	<del></del>				
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stat true correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer	ements, and to the best of my l irer has any knowledge	knowledge and belief, it is				
Sign Here Signature of officer Date Date								
						LAurie M. ARNOLD		
		Type or print name and title						
		Date	Uneck II   (s	reparer's identifying number see instructions)				
Pai	d	a  = 0	self employed	··· <del>-</del> /				
Pre-   Preparer's   CPA   4/29/2010   POO								
	er's	DILL BOX C KOZAK CDA	-14					
Us		yours if self 7107 TONECROPO DD CEE 1007	—————————————————————————————————————	103280				
On	ly	employed), address, and MORPONI CA 20260 2044						
		ZIP+4 MURRUW, GA 3UZ6U-Z944	Phone no ► //U	-961-4200				
May	the IR	S discuss this return with the preparer shown above? (see instructions)		X Yes No				

	1 290 (2009) INDEPENDENT FREIGHT FORWARDERS AND	58-14663	24		Page Z
Par	t III Statement of Program Service Accomplishments				
1	Briefly describe the organization's mission				
	SEE SCHEDULE O				
`					
		<del></del> -			
2	Did the organization undertake any significant program services during the year which were not listed on the pr	ior		C-21	
	Form 990 or 990-EZ?		Yes	X	No
	If 'Yes,' describe these new services on Schedule O				
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes	X	No
_	If 'Yes,' describe these changes on Schedule O.				
	Describe the exempt purpose achievements for each of the organization's three largest program services by ex	noncos Sastiai	501/0	7/37	
4	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and alloc	ations to others	the to	otal	
	expenses, and revenue, if any, for each program service reported.		•		
4 a	(Code (Code (Expenses \$ 61,330), including grants of \$ (Rev	/enue \$	5		<u>13.</u> )
	IN ORDER TO EDUCATE THEIR MEMBERS AND FURTHER THEIR PROGRAMMING, I	THE ORGANI	[ZAT]	[ON_	
	HOSTS MONTHLY LUNCH SEMINARS AND ATTENDS THE GOVERNMENT AFFAIRS AN	ID THE NAT	CIONA	ΑL	
	CUSTOMS BROKERS FORWARDERS ASSOCIATION OF AMERICA, INC CONFERENCES				.c.
	<u> </u>				
		<b></b> .			
4h	(Code:) (Expenses \$ including grants of \$) (Rev	venue \$			)
710	(Caperioto 4				
_					
4c	(Code:) (Expenses \$ including grants of \$) (Rev	enue >			)
	<del>-</del>				
			- <del>-</del> -		
<i>A</i> 10	Other program conuces (Describe in Schedule ())				
	Other program services. (Describe in Schedule O )				
	(Expenses \$ including grants of \$ ) (Revenue \$				
4 e	Total program service expenses ► 61, 330.				

Page 3

•			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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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_		Х
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_		х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
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		Х
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		Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or $X$ as applicable	11		Х
	• Did the organization report an amount for land, buildings and equipment in Part X, line 10° 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			
	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		X
12/	AWas the organization included in consolidated, independent audited financial statement for the tax  year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional  12 A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Χ
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ŧ	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		Х
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 United States? If 'Yes,' complete Schedule F, Part II	15		Х
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 United States? If 'Yes,' complete Schedule F, Part III	16		Х
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		Х
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		Х
	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		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20	1	<u> X</u>

Page 4 Checklist of Required Schedules (continued) Part IV Yes No 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 12 If 'Yes,' complete Schedule I, Parts I and II 21 21 Х 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part Х 22 IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Х 23 Schedule J 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and X 24a complete Schedule K. If 'No, go to line 25 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24 c any tax-exempt bonds? 24d d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 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 25 a 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 25b Schedule L. Part I 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or Х disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete X 27 Schedule L, Part III 28 Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28 a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Χ 28b Schedule L, Part IV 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 direct or indirect owner? If 'Yes,' complete Schedule L, Part IV X 28 c Х 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х contributions? If 'Yes,' complete Schedule M Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 32 Х Schedule N, Part II 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 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, Х 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, 35 35 Χ Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 organization? Îf 'Yes,' complete Schedule R, Part V, line 2 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 Х 37

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI. lines 11 and 197

Note. All Form 990 filers are required to complete Schedule O

Statements Regarding Other IRS Filings and Tax Compliance Part V No Yes 1a Enter the number reported in Box 3 of form 1096. Annual Summary and Transmittal of U.S. 0 1 a Information Returns Enter -0- if not applicable Ò 1 b b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the 0 calendar year ending with or within the year covered by this return 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by X За this return: 3Ь b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Х 4a **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. X 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b Х c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5c Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization X 6a solicit any contributions that were not tax deductible? bif 'Yes' did the organization include with every solicitation an express statement that such contributions or gifts were not 6b deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7a provided to the payor? 7 b b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с 7d d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7е benefit contract? 7 f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7 q 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 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 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9 a 9b b Did the organization make any distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter. 10 a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter 11 a a Gross income from other members or shareholders. b Gross income from other sources (Do not net amounts due or paid to other sources against 11<sub>b</sub> amounts due or received from them ) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

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

Sec	tion A. Governing Body and Management							
				Yes	No			
1:	Enter the number of voting members of the governing body	1a 5	4					
	Enter the number of voting members that are independent	1b 5	4					
2	Did any officer, director, trustee, or key employee have a family relationship or a business rel officer, director, trustee or key employee?	ationship with any other	2		Х			
3	3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?							
4 Did the organization make any significant changes to its organizational documents								
	since the prior Form 990 was filed?		5		Х			
5 6	CEP CCHEPITE O							
7	Does the organization have members, stockholders, or other persons who may elect one or magnetic powerning body?  SEE SCHEDULE O	nore members of the	7a	х				
1	Are any decisions of the governing body subject to approval by members, stockholders, or other	ner persons? SEE SCH O	7Ь	Х				
8	Did the organization contemporaneously document the meetings held or written actions under the following	taken during the year by						
í	The governing body?		8a	X				
ı	Each committee with authority to act on behalf of the governing body? .		8ь	Х				
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who can organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	not be reached at the	9		Х			
Sec	tion B. Policies (This Section B requests information about policies not	required by the Interna	a/					
Reve	nue Code )							
				Yes	No			
10 a	Does the organization have local chapters, branches, or affiliates?		10 a		_X_			
ŀ	If 'Yes,' does the organization have written policies and procedures governing the activities of and branches to ensure their operations are consistent with those of the organization?	such chapters, affiliates,	10 b					
11	Has the organization provided a copy of this Form 990 to all members of its governing body be	efore filing the form?	11	Χ	***************************************			
11/	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	SEE SCHEDULE O						
12	Does the organization have a written conflict of interest policy? If 'No,' go to line 13		12a		<u>X</u> _			
t	<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?							
Ć	Does the organization regularly and consistently monitor and enforce compliance with the policy schedule $O$ how this is done	cy? If 'Yes,' describe in	12c					
13	Does the organization have a written whistleblower policy?		13		<u>X</u>			
14	Does the organization have a written document retention and destruction policy?		14		<u>X</u>			
15	Did the process for determining compensation of the following persons include a review and a persons, comparability data, and contemporaneous substantiation of the deliberation and deci	pproval by independent sion?						
a	The organization's CEO, Executive Director, or top management official .		15 a		<u>X</u>			
Ŀ	Other officers of key employees of the organization		15b	,	<u>X</u>			
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions )							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a entity during the year?	rrangement with a taxable	16a		Х			
	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard t status with respect to such arrangements?	to evaluate its participation he organization's exempt	16Ь					
	tion C. Disclosures							
17	List the states with which a copy of this Form 990 is required to be filed - GA		_ <b></b> _					
18	18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.							
	Own website X Upon request							
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public SEE SCHEDULE O							
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► LAURIE ARNOLD PO BOX 45284 ATLANTA GA 30320 770-688-1206								

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

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's lax 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 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 employees.'
- 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(c)		(D)	(E)	(F)				
Name and Title	Average		tion (	n (check all that apply)				Reportable compensation from	Reportable compensation from	Estimated amount of other
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W 2/1099 MISC)	compensation from related organizations (W 2/1099 MISC)	amount of other compensation from the organization and related organizations
BETH MINCE										
PRESIDENT	10			Х				0.	0.	0.
PAM BROWN										
VICE PRESIDENT	10			X				0.	0.	0.
RACHEL WORLEY SECRETARY	10			Х				0.	0.	0.
LAURIE ARNOLD						-				
TREASURER	10_			Χ				0.	0.	0.
DONNA MULLINS										
CHAIRMAN	10			Χ			_	0.	0.	0.
		-							-	
							-			
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			_							
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BAA

1 dit VII Section A. Officers, Directors, Trus	1003,	100		p.	<u>y</u>	<u></u>		Id Trigilest Co	mpensated Em	picyccs	Toorn.
· (A)	(B)	(c) age Position (check all that apply)			(D)	(E)	(	-)			
Name and Title ,	Average hours per week			Officer		Highest compensated employee		Reportable compensation from the organization (W 2/1099 MISC)	Reportable compensation from related organizations (W 2/1099 MISC)	amount compe from organ and r	nated of other nsation i the zation elated zations
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1 b Total	4- 11	امدا د		- h				0.	0.		0.
2 Total number of individuals (including but not limited from the organization ► 0	เอ เทอร์	e iist	eu a	abov	/e) \	wno	rece	eived more (nan \$	100,000 in reportab	ne compen	Sation
nom the organization	<del></del>							****		TY	es No
3 Did the organization list any former officer, director of	or truste	e, ke	ey e	mpl	oye	e, or	r hig	hest compensated	l employee .		
on line 1a? If 'Yes,' complete Schedule J for such in										3	<u> </u>
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th individual	ortable on \$150	com ,000	pen:	satio 'Ye	on a	nd c	thei lete	r compensation fro Schedule J for su	om ch	4	Х
5 Did any person listed on line 1a receive or accrue co	mpensa	ition	fror	n ar	ny u	nrela	ated	organization for s	ervices		
rendered to the organization? If 'Yes,' complete Sch	edule J	tor s	uch	per	son			<del></del>	<del></del>	5	<u> </u>
Section B. Independent Contractors  1 Complete this table for your five highest compensate	d indepe	ende	ent c	onti	ract	ors t	hat	received more tha	n \$100,000 of		
compensation from the organization.							1				
(A) Name and business address							İ	(B) Description o	f Sanucas	(C) Compens	ation
NONE ,	·	—						Description o	Jervices	Compens	2001
							Ţ				
										<del></del>	_
<del></del>					-		<u></u>				·····
2 Total number of independent contractors (including b \$100,000 in compensation from the organization ►		mite	a to	tho	se l	sted	abo	ove) who received	more than		

	T THE Statement of Nevertae	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribns included in lns la-1f. h Total. Add lines la-1f	4,527.			
PROGRAM SERVICE REVENUE	Business Code  2a LUNCHEON INCOME  b SEMINAR INCOME  c  d  e f All other program service revenue g Total. Add lines 2a-2f	51,743. 400. 52,143.	51,743. 400.		
	Investment income (including dividends, interest and other similar amounts)  Income from investment of tax-exempt hond proceeds  Royalties  (i) Real  (ii) Personal  Caross Rents  b Less. rental expenses c Rental income or (loss)  d Net rental income or (loss)  Ta Gross amount from sales of assets other than inventory  b Less. cost or other basis and sales expenses c Gain or (loss)  d Net gain or (loss)				
OTHER REVENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c).  See Part IV, line 18 a 951.  b Less. direct expenses b 4, 414.  c Net income or (loss) from fundraising events  9a Gross income from gaming activities. See Part IV, line 19 a b Less direct expenses.  c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue Business Code  11a b C	-3,463.	-3,463.		
	d All other revenue e Total. Add lines 11a-11d  Total revenue. See instructions	53, 207.	48,680.	0.	0.

Form 990 (2009)

Part IX Statement of Functional Expenses

campaign and fundraising solicitation

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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). (D) Fundraising Program service Management and Do not include amounts reported on lines Total expenses expenses general expenses expenses 6b. 7b. 8b. 9b. and 10b of Part VIII. Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 4 Benefits paid to or for members Compensation of current officers, directors, 0. 0 0 trustees, and key employees 0 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) 0. 0 0 0 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits. 10 Payroll taxes Fees for services (non-employees) a Management **b** Legal 1,063 1,062 2,125 c Accounting d Lobbying e Prof fundraising svcs See Part IV, In 17 f Investment management fees g Other 12 Advertising and promotion 536 536 13 Office expenses Information technology 15 Royalties 16 Occupancy 17 Payments of travel or entertainment 18 expenses for any federal, state, or local public officials 23,031 23,031 19 Conferences, conventions, and meetings 20 Interest Payments to affiliates 21 22 Depreciation, depletion, and amortization 23 Insurance Other expenses. Itemize expenses not 24 covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) 31,254 31,254 a LUNCHEON EXPENSE **b** DUES & SUBSCRIPTIONS 2,818. 2,818. 1,250 2,500 1,250. c CONTRIBUTIONS 1,643. 1,643. d FLOWERS & GIFTS 465 464 929 e PRINTING AND PUBLICATIONS 1,449. 767. 2,216. f All other expenses 5,722. 0. 67,052 61,330 25 Total functional expenses Add lines 1 through 24f Joint costs. Check here ► \_\_\_\_\_ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational

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Part X **Balance Sheet** (B) End of year (A) Beginning of year 7,845. 21,690. 1 1 Cash - non-interest-bearing 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) 6 and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10 a 10a Land, buildings, and equipment, cost or other basis Complete Part VI of Schedule D 10 c 10b b Less accumulated depreciation. 11 11 Investments - publicly-traded securities 12 12 Investments - other securities See Part IV, line 11 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 21,690 7,845 Total assets Add lines 1 through 15 (must equal line 34) 16 16 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities Complete Part X of Schedule D 0. 0 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. 21,690. 27 7,845. ASSETS 27 Unrestricted net assets 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Q R Organizations that do not follow SFAS 117, check here and complete FUZD lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 BALANCE 31 Paid-in or capital surplus, or land, building, and equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 21,690. 7,845. 33 Total net assets or fund balances. 7,845. 21,690. 34 34 Total liabilities and net assets/fund balances

Form 990 (2009)

Form <b>990</b> (2009)	INDEPENDENT	FREIGHT	FORWARDERS	AND

58-1466324

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Pa	rt XI   Financial Statements and Reporting		,	
•			Yes	No
1	Accounting method used to prepare the Form 990 $\overline{\mathrm{X}}$ Cash $\overline{}$ Accrual $\overline{}$ Other			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	<u> </u>
1	Were the organization's financial statements audited by an independent accountant?	2b		Х
•	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
(	I If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both.			
	Separate basis Consolidated basis Both consolidated and separate basis			
3	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		Х
ı	olf '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.	3 b		

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Form **990** (2009)

#### SCHEDULE O (Form 990)

## **Supplemental Information to Form 990**

OMB No 1545 0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

Name of the organization INDEPENDENT FREIGHT FORWARDERS AND CUSTOMS HOUSE BROKER ASSOCIATION, INC.	Employer identification number 58-1466324
FORM 990, PART III, LINE 1 - ORGANIZATION MISSION	
THE MISSION OF IFFCHBA IS TO PROMOTE THE COMMON BUSINESS INTERE	STS_OF_CUSTOMS
BROKERS & INTERNATIONAL FREIGHT FORWARDERS; TO ENCOURAGE THE PR	OFESSIONALISM WITHIN
OUR INDUSTRY; TO MAINTAIN A STANDARD OF INTEGRITY & EFFICIENCY	THAT WILL PROTECT THE
TRADE AND THE GOVERNMENT IN THE FAIR, REASONABLE, AND EQUITABLE	ADMINISTRATION OF
IMPORT_AND_EXPORT_LAWS_& REGULATIONS; AND, TO DEVELOP GOOD_FELL	OWSHIP AMONG THE
MEMBERS.	
FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAR	EHOLDE
THE ORGANIZATION HAS MEMBERS THAT GOVERN SOME OF ITS ACTIONS.	
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVE	RNING BODY
MEMBERS ELECT THE GOVERNING BODY.	
FORM 990, PART VI, LINE 7B - DECISIONS OF GOVERNING BODY APPROVAL BY M	EMBERS OR SHAREHOLDERS
MEMBERS HAVE VOTING ABILITY ON ALL NEW MEMBERS AS WELL AS ANY C	HANGES TO THE BY LAWS
OF THE ASSOCIATION.	
FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS	
THE ORGANIZATION'S ACCOUNTANT PROVIDES A COPY OF FORM 990 TO THE	E BOARD FOR REVIEW
AND APPROVAL PRIOR TO FILING.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	AILABLE
THE ORGANIZATION'S ACCOUNTANT PROVIDES A COPY OF FORM 990 SPECIAL	FICALLY FOR PUBLIC
INSPECTION. THIS FORM IS AVAILABLE UPON REQUEST.	