



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



Return of Organization Exempt From Income Tax

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

A For the 2011 calendar year, or tax year beginning , 2011, and ending , 20

B Check if applicable

<input type="checkbox"/>	Address change
<input type="checkbox"/>	Name change
<input type="checkbox"/>	Initial return
<input type="checkbox"/>	Terminated
<input type="checkbox"/>	Amended return
<input type="checkbox"/>	Application pending

C Name of organization INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION		D Employer identification number 23-7067291
Doing Business As ISACA		
Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number
3701 ALGONQUIN ROAD	1010	(847) 253-1545
City or town, state or country, and ZIP + 4		G Gross receipts \$ 58,089,867.
ROLLING MEADOWS, IL 60008		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
F Name and address of principal officer SUSAN M. CALDWELL		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
SAME AS C ABOVE		If "No," attach a list (see instructions)
I Tax-exempt status	501(c)(3) <input checked="" type="checkbox"/> 501(c)(6) <input type="checkbox"/> (insert no) 4947(a)(1) or 527	H(c) Group exemption number 2504
J Website: WWW.ISACA.ORG	K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	L Year of formation 1969 M State of legal domicile IL

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE PRIMARY PURPOSE OF THE ASSOCIATION IS TO PROMOTE THE EDUCATION OF INDIVIDUALS IN INFORMATION SYSTEMS AUDIT AND CONTROL AND RELATED TOPICS.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	11.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11.
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	116.
	6 Total number of volunteers (estimate if necessary)	6	573.
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	234,167.
b Net unrelated business taxable income from Form 990-T, line 34	7b	69,601.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 0	Current Year 0
	9 Program service revenue (Part VIII, line 2g)	34,413,716.	39,541,900.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,288,034.	-571,981.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,446,801.	4,034,970.
	12 Total revenue. Add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,148,551.	43,004,889.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	240,000.	16,000.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
Expenses	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	13,577,935.	15,010,348.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25)	0	0
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	20,301,391.	21,851,042.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	34,119,326.	36,877,390.
	19 Revenue less expenses. Subtract line 18 from line 12	7,029,225.	6,127,499.
	Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 65,717,501.
21 Total liabilities (Part X, line 26)		15,177,446.	15,962,475.
22 Net assets or fund balances. Subtract line 21 from line 20.		50,540,055.	56,667,554.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here		Date 7 May 2012			
	SUSAN M. CALDWELL Type or print name and title CEO				
Paid Preparer Use Only	Print/Type preparer's name DANIEL ROMANO	Preparer's signature	Date 5/6/12	Check <input type="checkbox"/> if self-employed	PTIN P00504182
	Firm's name GRANT THORNTON LLP	Firm's EIN 36-6055558			
	Firm's address 175 W JACKSON BLVD STE 2000 CHICAGO, IL 60604	Phone no 312-856-0200			

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions

Form 990 (2011)

25

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☒ **X****1** Briefly describe the organization's mission:ATTACHMENT 1**2** Did the organization undertake any significant program services during the year which were not listed on the prior 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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported**4a** (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)ATTACHMENT 2**4b** (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)ATTACHMENT 3**4c** (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)ATTACHMENT 4**4d** Other program services (Describe in Schedule O)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses ►

Part IV Checklist of Required Schedules

	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	X
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X
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	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which 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	X
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	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	X
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	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	X
b 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	11b	X
c 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	11c	X
d 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	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X
f 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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X
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, Parts II and IV	15	X
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, Parts III and IV	16	X
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 (see instructions)	17	X
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	X
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	X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	21 X	
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? <i>If "Yes," complete Schedule I, Parts I and III.</i>	22	X
23 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? <i>If "Yes," complete Schedule J.</i>	23 X	
24 a 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i>	24a	X
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	
25 a 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? <i>If "Yes," complete Schedule L, Part I.</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? <i>If "Yes," complete Schedule L, Part I.</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? <i>If "Yes," complete Schedule L, Part II.</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>	27	X
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)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>	32	X
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? <i>If "Yes," complete Schedule R, Part I.</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i>	34 X	
35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a X	
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	35b X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	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? <i>If "Yes," complete Schedule R, Part VI.</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38 X	

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V. ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a 71		
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?	1c	X	
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.	2a 116		
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 (see instructions).	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	X	
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)?	4a		X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a 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		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
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 provided to the payor?	7a		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d If "Yes," indicate the number of Forms 8282 filed during the year.	7d		
e Did the organization 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 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 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?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a 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.	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders.	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b		
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.	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b		
c Enter the amount of reserves on hand.	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

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.

Check if Schedule O contains a response to any question in this Part VI. ☒ X

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a 11		
b Enter the number of voting members included in line 1a, above, who are independent.	1b 11		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6	X	
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X	
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c	X	
13 Did the organization have a written whistleblower policy?	13	X	
14 Did the organization have a written document retention and destruction policy?	14	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a The organization's CEO, Executive Director, or top management official.	15a	X	
b Other officers or key employees of the organization.	15b	X	
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 arrangement with a taxable entity during the year?	16a		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section 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 Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. NEVILLE RADEMEYER 3701 ALGONQUIN ROAD SUITE 1010 ROLLING MEADOWS, IL 60008 (847) 253-1545

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII ☒**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.

- 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, if any. 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, 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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ATTACHMENT 5										
(1) KENNETH VANDER WAL PRESIDENT	12.00	X		X				0	0	0
(2) CHRISTOS DIMITRIADIS VICE PRESIDENT	3.00	X		X				0	0	0
(3) GREGORY GROCHOLSKI VICE PRESIDENT/TREASURER	3.00	X		X				0	0	0
(4) TONY HAYES VICE PRESIDENT	3.00	X		X				0	0	0
(5) NIRAJ KAPASI VICE PRESIDENT	3.00	X		X				0	0	0
(6) JEFF SPIVEY VICE PRESIDENT	3.00	X		X				0	0	0
(7) JO STEWART-RATTRAY VICE PRESIDENT	3.00	X		X				0	0	0
(8) MARC VAEL DIRECTOR	3.00	X						0	0	0
(9) ALLAN BOARDMAN DIRECTOR	3.00	X						0	0	0
(10) LYNN LAWTON PAST PRESIDENT	3.00	X						0	0	0
(11) EMIL D'ANGELO PAST PRESIDENT	3.00	X						0	0	0
(12) SUSAN CALDWELL CEO/SECRETARY	50.00			X				1,096,792.	0	32,513.
(13) RONALD RIBA COO	50.00				X			546,800.	0	39,669.
(14) NEVILLE RADEMEYER CFO	50.00				X			344,269.	0	15,894.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
15) SCOTT ARTMAN CVMO	50.00				X			310,160.	0	36,717.
16) JANE SEAGO CCO	50.00				X			323,627.	0	36,964.
17) TERENCE TRSAR CPDO	50.00				X			302,324.	0	41,906.
18) RON HALE CRO	50.00				X			320,148.	0	42,893.
19) DIANE NELSON CMO	50.00				X			288,179.	0	32,702.
20) CHARLES CRIBARO CHRAO	50.00				X			315,956.	0	34,464.
21) PRIYA SINGH DIRECTOR OF IT	50.00					X		213,181.	0	37,820.
22) BRIAN SELBY DIRECTOR OF COBIT INITIATIVES	50.00					X		248,591.	0	31,851.
23) THOMAS LAMM DIRECTOR OF PROF. ADVOCACY	50.00					X		228,154.	0	38,564.
24) SHANNON DONAHUE DIR. INFO. SECURITY PRACTICES	50.00					X		178,889.	0	10,486.
25) KARYN WALLER DIRECTOR OF CERTIFICATION	50.00					X		148,889.	0	26,879.
1b Sub-total								1,987,861.	0	88,076.
c Total from continuation sheets to Part VII, Section A								2,878,098.	0	371,246.
d Total (add lines 1b and 1c)								4,865,959.	0	459,322.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **33**

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3		X
4	X	
5		X

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 individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

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 Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 6		

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 **34**

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		0			
Program Service Revenue				Business Code			
	2a	CERTIFICATION PROGRAMS	611430	17,572,580.	17,572,580.		
	b	MEMBERSHIP DUES - NONDEDUCTIBLE	611600	15,166,175.	15,166,175.		
	c	CONFERENCES & SEMINARS	611430	5,770,440.	5,538,795.		231,645.
	d	COBIT LICENSE FEES	541519	435,783.	435,783.		
	e	PUBLICATIONS & SUBSCRIPTIONS	541800	265,303.	31,136.	234,167.	
	f	All other program service revenue	541519	331,619.	331,619.		
	g	Total. Add lines 2a-2f		39,541,900.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,217,600.			1,217,600.
	4	Income from investment of tax-exempt bond proceeds		0			
	5	Royalties		730,953.			730,953.
		(i) Real	(ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)		0			
		(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	12,367,302.				
	b	Less: cost or other basis and sales expenses	14,156,883.				
	c	Gain or (loss)	-1,789,581.				
	d	Net gain or (loss)		-1,789,581.			-1,789,581.
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from fundraising events		0			
	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less: direct expenses	b				
c	Net income or (loss) from gaming activities		0				
10a	Gross sales of inventory, less returns and allowances	a	3,629,297.				
b	Less: cost of goods sold	b	928,095.				
c	Net income or (loss) from sales of inventory		2,701,202.	2,701,202.			
Miscellaneous Revenue			Business Code				
11a	SPONSORSHIP REVENUE	900004	450,379.			450,379.	
b	MISCELLANEOUS	900099	152,436.			152,436.	
c							
d	All other revenue						
e	Total. Add lines 11a-11d		602,815.				
12	Total revenue. See instructions		43,004,889.	41,777,290.	234,167.	993,432.	

Part IX Statement of Functional Expenses

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)

Check if Schedule O contains a response to any question in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	16,000.			
2 Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States 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	4,161,977.			
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	8,215,544.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	553,209.			
9 Other employee benefits	1,334,138.			
10 Payroll taxes	745,480.			
11 Fees for services (non-employees)	0			
a Management	0			
b Legal	133,967.			
c Accounting	93,366.			
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	152,551.			
g Other	5,830,019.			
12 Advertising and promotion	3,519,461.			
13 Office expenses	5,176,202.			
14 Information technology	520,874.			
15 Royalties	430,825.			
16 Occupancy	609,649.			
17 Travel	1,960,711.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	1,943,347.			
20 Interest	0			
21 Payments to affiliates	35,850.			
22 Depreciation, depletion, and amortization	793,136.			
23 Insurance	99,290.			
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a CLERICAL & ADMIN SERVICES	185,997.			
b RECRUITMENT	122,201.			
c PRODUCTION DEVELOPMENT AMORT	55,788.			
d FRANCHISE FEE	50,000.			
e All other expenses	137,808.			
25 Total functional expenses Add lines 1 through 24e	36,877,390.			
26 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0			

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	0	1	0
	2 Savings and temporary cash investments	1,182,705.	2	7,354,756.
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	936,358.	4	855,527.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	751,470.	8	587,493.
	9 Prepaid expenses and deferred charges	1,278,730.	9	1,274,173.
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 6,280,699.		
	b Less accumulated depreciation	10b 3,643,768.		
		2,325,777.	10c	2,636,931.
	11 Investments - publicly traded securities	59,023,365.	11	59,859,611.
	12 Investments - other securities See Part IV, line 11	0	12	0
	13 Investments - program-related See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
15 Other assets. See Part IV, line 11	219,096.	15	61,538.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	65,717,501.	16	72,630,029.	
Liabilities	17 Accounts payable and accrued expenses	5,041,333.	17	5,218,958.
	18 Grants payable	0	18	0
	19 Deferred revenue	9,931,805.	19	10,524,952.
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	204,308.	25	218,565.
	26 Total liabilities. Add lines 17 through 25	15,177,446.	26	15,962,475.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	50,540,055.	27	56,667,554.
	28 Temporarily restricted net assets	0	28	0
	29 Permanently restricted net assets	0	29	0
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	50,540,055.	33	56,667,554.
	34 Total liabilities and net assets/fund balances	65,717,501.	34	72,630,029.

Form **990** (2011)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI. ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	43,004,889.
2	Total expenses (must equal Part IX, column (A), line 25)	2	36,877,390.
3	Revenue less expenses. Subtract line 2 from line 1	3	6,127,499.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	50,540,055.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	56,667,554.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII. ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	X	
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 separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and 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?		
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		

Form **990** (2011)

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.**

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III

Name of organization **INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION**

Employer identification number
23-7067291

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$ **0**
- 3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ **0**
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

Schedule C (Form 990 or 990-EZ) 2011

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2011

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i.			
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	X	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		X

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	0
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, and Part II-B, line

1 Also, complete this part for any additional information

Part IV Supplemental Information *(continued)*

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number
23-7067291

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2011

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition d ☐ Loan or exchange programs
 b ☐ Scholarly research e ☐ Other _____
 c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and 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 current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ► _____ %
 b Permanent endowment ► _____ %
 c Temporarily restricted endowment ► _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		802,428	454,204	348,224
d Equipment		5,478,271	3,189,564	2,288,707
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).				2,636,931

Schedule D (Form 990) 2011

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
(I) _____		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) _____		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
(10) _____		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) _____	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
(10) _____	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) UNAPPLIED PAYMENTS	141,762.
(3) STATE CHECK LIABILITY	76,203.
(4) CONSIGNMENT GOODS	600.
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
(10) _____	
(11) _____	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	
218,565.	

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

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

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 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	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 revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	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 must equal Form 990, Part I, line 18.)	5	

Part XIV Supplemental Information

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, line 2, 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.

SEE PAGE 5

Part XIV Supplemental Information (continued)

FORM 990, SCHEDULE D, PART X, QUESTION 2

FIN 48 (ASC 740) FOOTNOTE

THE ORGANIZATION ADOPTED ACCOUNTING STANDARDS CODIFICATION ("ASC") 740-10 AS OF 1 JANUARY 2009. ASC 740-10 CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN BE RECOGNIZED IN THE FINANCIAL STATEMENTS ONLY IF THE POSITION IS MORE LIKELY THAN NOT TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED. THE ORGANIZATION IS EXEMPT FROM INCOME TAX UNDER INTERNAL REVENUE CODE ("IRC") SECTIONS 501(C)(3) AND 501(C)(6), THOUGH IT IS SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSES, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE IRC. THE TAX YEARS ENDED 2008, 2009 AND 2010 MAY STILL BE SELECTED FOR AUDIT FOR BOTH FEDERAL AND STATE PURPOSES BASED ON INTERNAL REVENUE SERVICE STATUTE OF LIMITATIONS. THE ADOPTION OF ASC 740-10 DID NOT HAVE ANY IMPACT ON THE ORGANIZATION'S FINANCIAL STATEMENTS.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2011

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

Name of the organization **INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION**

Employer identification number
23-7067291

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to
Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) EUROPE			PROGRAM SERVICES	EDUC & CONFERENCES	631,294.
(2) EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	CERTIFICATION EXAMS	479,504.
(3) EUROPE			PROGRAM SERVICES	CERTIFICATION EXAMS	304,110.
(4) SUB-SAHARAN AFRICA			PROGRAM SERVICES	CERTIFICATION EXAMS	219,975.
(5) SOUTH ASIA			PROGRAM SERVICES	CERTIFICATION EXAMS	187,377.
(6) MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	EDUC & CONFERENCES	123,887.
(7) MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	CERTIFICATION EXAMS	83,465.
(8) NORTH AMERICA			PROGRAM SERVICES	EDUC & CONFERENCES	77,038.
(9) NORTH AMERICA			PROGRAM SERVICES	CERTIFICATION EXAMS	72,403.
(10) SOUTH AMERICA			PROGRAM SERVICES	CERTIFICATION EXAMS	43,073.
(11) CENTRAL AMERICA/CARIBBEAN			PROGRAM SERVICES	CERTIFICATION EXAMS	19,525.
(12) RUSSIA/INDEPENDENT STATES			PROGRAM SERVICES	CERTIFICATION EXAMS	13,995.
(13) EAST ASIA AND THE PACIFIC			SEND AGENTS TO SEMINAR	CONFERENCE SUPPORT	3,153.
(14) EUROPE			SEND AGENTS TO SEMINAR	CONFERENCE SUPPORT	3,046.
(15) NORTH AMERICA			SEND AGENTS TO SEMINAR	CONFERENCE SUPPORT	2,346.
(16)					
(17)					
3a Sub-total,					2,264,191.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					2,264,191.

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule F (Form 990) 2011

JSA
1E1274 1 000

89388J 649R

1447160

PAGE 23

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. ☒ X

Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. ☒ ☒3 Enter total number of other organizations or entities ☒ ☒

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2011

Part IV Foreign Forms

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926). ☐ Yes ☒ No
- 2** Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A). ☐ Yes ☒ No
- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471). ☐ Yes ☒ No
- 4** Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621). ☐ Yes ☒ No
- 5** Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865). ☐ Yes ☒ No
- 6** Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713). ☐ Yes ☒ No

Schedule F (Form 990) 2011

Part V**Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE I
(Form 990)

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization
CONTROL ASSOCIATION

INFORMATION SYSTEMS AUDIT AND

Employer identification number

23-7067291

OMB No. 1545-0047

2011

Open to Public
Inspection

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000.

Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	AMERICAN RED CROSS 2200 W. HARRISON STREET CHICAGO, IL 60612	53-0196605	501(C)(3)	10,000.				EARTHQUAKE & TSUNAMI
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 1

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2011)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

FORM 990, SCHEDULE I, PART I, QUESTION 2

THE ORGANIZATION'S PROCEDURES FOR MONITORING GRANTS IN THE U.S.

MEMBERS OF THE INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION'S BOARD

OF DIRECTORS AND THE BOARD OF TRUSTEES OF THE IT GOVERNANCE INSTITUTE,

MONITOR ALL GRANTS AND WHERE APPLICABLE THE USE OF CONTRIBUTED FUNDS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

**Open to Public
Inspection**

Name of the organization **INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION**

Employer identification number
23-7067291

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization

- | | | |
|--|-----------|---|
| a Receive a severance payment or change-of-control payment? | 4a | X |
| b Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | X |
| c Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | X |
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

- | | | |
|------------------------------------|-----------|--|
| a 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 1a, did the organization pay or accrue any compensation contingent on the net earnings of

- | | | |
|------------------------------------|-----------|--|
| a The organization? | 6a | |
| b Any related organization? | 6b | |
- If "Yes" to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule J (Form 990) 2011

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation				(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation					
1 SUSAN CALDWELL	(i) 777,000.	(ii) 155,000.	(iii) 164,792.		16,500.	16,013.	1,129,305.	
	(ii) 0	0	0					
2 RONALD RIBA	(i) 465,900.	(ii) 69,900.	(iii) 11,000.		16,500.	23,169.	586,469.	
	(ii) 0	0	0					
3 NEVILLE RADEMMEYER	(i) 323,077.	(ii) 15,000.	(iii) 6,192.		3,077.	12,817.	360,163.	
	(ii) 0	0	0					
4 SCOTT ARTMAN	(i) 269,255.	(ii) 29,900.	(iii) 11,005.		13,713.	23,004.	346,877.	
	(ii) 0	0	0					
5 JANE SEAGO	(i) 288,300.	(ii) 24,000.	(iii) 11,327.		14,665.	22,299.	360,591.	
	(ii) 0	0	0					
6 TERENCE TRSAR	(i) 264,819.	(ii) 26,500.	(iii) 11,005.		12,222.	29,684.	344,230.	
	(ii) 0	0	0					
7 RON HALE	(i) 278,308.	(ii) 32,000.	(iii) 9,840.		12,844.	30,049.	363,041.	
	(ii) 0	0	0					
8 DIANE NELSON	(i) 248,439.	(ii) 29,900.	(iii) 9,840.		11,474.	21,228.	320,881.	
	(ii) 0	0	0					
9 CHARLES CRIBARO	(i) 282,300.	(ii) 24,200.	(iii) 9,456.		13,131.	21,333.	350,420.	
	(ii) 0	0	0					
10 PRIYA SINGH	(i) 196,681.	(ii) 16,500.			9,596.	28,224.	251,001.	
	(ii) 0	0	0					
11 BRIAN SELBY	(i) 233,591.	(ii) 15,000.			11,014.	20,837.	280,442.	
	(ii) 0	0	0					
12 THOMAS LAMM	(i) 213,154.	(ii) 15,000.			10,169.	28,395.	266,718.	
	(ii) 0	0	0					
13 SHANNON DONAHUE	(i) 171,389.	(ii) 7,500.			8,569.	1,917.	189,375.	
	(ii) 0	0	0					
14 KARYN WALLER	(i) 141,389.	(ii) 7,500.			7,588.	19,291.	175,768.	
	(ii) 0	0	0					
15								
16								

Schedule J (Form 990) 2011

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

**Open to Public
Inspection**

Name of the organization **INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION**

Employer identification number
23-7067291

FORM 990, PART III, QUESTION 4D

OTHER PROGRAM SERVICES

INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) TARGETS TWO GOALS WITH ITS ACTIVITIES: INCREASING THE CREDIBILITY AND CAPABILITY OF ITS CONSTITUENTS. THE ASSOCIATION ACHIEVES THOSE ACTIVITIES BY PROVIDING INFORMATION, STANDARDS, PUBLICATIONS AND ACADEMIC GUIDANCE (IN ADDITION TO THE ITEMS NOTED IN THE DESCRIPTIONS OF PROGRAM ACHIEVEMENTS 1, 2 AND 3).

THE ISACA JOURNAL IS ISACA'S OFFICIAL MAGAZINE. ISSUED BIMONTHLY, AND SUPPORTED IN THE OFF MONTHS BY ONLINE ARTICLES, THE JOURNAL SEEKS TO ENHANCE THE PROFICIENCY AND COMPETITIVE ADVANTAGE OF ITS INTERNATIONAL READERSHIP BY PROVIDING PEER-REVIEWED MANAGERIAL AND TECHNICAL GUIDANCE FROM EXPERIENCED GLOBAL AUTHORS. IT IS AVAILABLE VIA AN IPHONE APP AS WELL, LAUNCHED IN 2011. OTHER REGULAR PERIODICALS ISSUED BY ISACA INCLUDE @ISACA, AN ELECTRONIC NEWSLETTER DEDICATED TO ISACA NEWS; EXPRESSLINE, PUBLISHED MONTHLY AND PROVIDING CHAPTER LEADERS INFORMATION AND RESOURCES TO HELP THEM CARRY OUT THEIR RESPONSIBILITIES; AND COBIT FOCUS, ISSUED QUARTERLY TO COBIT USERS, TO PROVIDE THEM CASE STUDIES, INFORMATION ON NEW PRODUCTS AND EDUCATIONAL OPPORTUNITIES, AND GENERAL TIPS AND TECHNIQUES.

THE ISACA BOOKSTORE OFFERS A SELECTION OF PEER-REVIEWED PUBLICATIONS ON PROFESSIONAL TOPICS OF INTEREST TO ISACA MEMBERS, AT DISCOUNTED PRICES.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

NEW SELECTIONS ARE ADDED REGULARLY, TO ENSURE THE CATALOG REMAINS CURRENT WITH CHANGING TRENDS AND MEMBER NEEDS. IN 2011, MORE THAN 93 BOOKS WERE ADDED TO THE BOOKSTORE ROSTER, IN LANGUAGES INCLUDING ENGLISH, CHINESE SIMPLIFIED, FRENCH, GERMAN, ITALIAN, JAPANESE AND SPANISH. AMONG THOSE PUBLICATIONS WERE ISACA'S RESEARCH PUBLICATIONS AND CERTIFICATION STUDY AIDS.

ISACA DEDICATES CONSIDERABLE ATTENTION TO UNIVERSITIES (PROFESSORS, STUDENTS AND CURRICULA), RECOGNIZING THAT THEY HOLD THE FUTURE OF THE PROFESSION. THE NUMBER OF ACADEMIC ADVOCATES (PROFESSORS) INCREASED BY 20 PERCENT FROM 2010 TO 2011 AND THE NUMBER OF STUDENT MEMBERS TOPPED 900.

ISACA ISSUES IS AUDITING STANDARDS, GUIDELINES AND PROCEDURES, WHICH PROVIDE PRESCRIPTIVE OR SUGGESTED GUIDANCE ON HOW AUDITS SHOULD BE UNDERTAKEN. THE STANDARDS, GUIDELINES AND PROCEDURES ARE CONTINUALLY REVIEWED TO ENSURE THAT NEW ONES ARE DEVELOPED OR EXISTING ONES ARE REVISED AS NEEDED TO ALIGN WITH NEW REGULATIONS OR TECHNOLOGIES. IN 2011, ISACA COLLABORATED WITH TWO INFORMATION SECURITY ORGANIZATIONS, INFORMATION SECURITY FORUM (ISF) AND INTERNATIONAL INFORMATION SYSTEMS SECURITY CERTIFICATION CONSORTIUM ([ISC]2), TO ISSUE PRINCIPLES FOR INFORMATION SECURITY PRACTITIONERS.

FORM 990, PART VI, SECTION A, QUESTION 6

MEMBERS OR STOCKHOLDERS

INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) MAINTAINS A MEMBERSHIP OF INDIVIDUALS; THERE IS NO CORPORATE MEMBERSHIP CATEGORY.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

ANYONE INTERESTED IN THE PURPOSES AND OBJECTIVES OF THE ASSOCIATION IS ELIGIBLE FOR MEMBERSHIP. THE VAST MAJORITY OF ISACA MEMBERS ALSO BELONG TO A LOCAL CHAPTER (MEMBERSHIP IN ISACA IS REQUIRED FOR ANYONE HOLDING MEMBERSHIP IN A CHAPTER). A MEMBER-AT-LARGE CATEGORY EXISTS FOR INDIVIDUALS WHO WISH TO JOIN ISACA BUT WHO LIVE AT SUCH A DISTANCE FROM A LOCAL CHAPTER THAT ATTENDANCE AT MEETINGS IS PROHIBITIVE. STUDENT AND RETIRED MEMBER CATEGORIES ARE OFFERED AS WELL.

ISACA'S MEMBERSHIP IS CHARACTERIZED BY DIVERSITY. THE CONSTITUENTS LIVE AND WORK IN 182 COUNTRIES AND RUN THE GAMUT OF JOB TITLES, INCLUDING IS AUDITOR, CONSULTANT, EDUCATOR, INFORMATION SECURITY MANAGER, REGULATOR, CHIEF INFORMATION OFFICER, INTERNAL AND EXTERNAL AUDITOR, COMPLIANCE OFFICER, RISK MANAGER AND STUDENT. SOME ARE NEW TO THE FIELD, WHILE OTHERS ARE AT MIDDLE MANAGEMENT LEVELS OR SENIOR RANKS. THEY WORK IN FINANCE AND BANKING, PUBLIC ACCOUNTING, HOSPITALITY, HEALTHCARE, GOVERNMENT AND THE PUBLIC SECTOR, UTILITIES, MANUFACTURING, AND RETAIL. ISACA MEMBERS EMBRACE THIS DIVERSITY AS PROVIDING A VAST LEARNING GROUND WHERE THEY MAY DELVE INTO THE CHALLENGES AND OPPORTUNITIES FACED BY COLLEAGUES IN OTHER COUNTRIES, POSITIONS OR INDUSTRIES.

ISACA RECOGNIZES THAT ITS MEMBERS CONSTITUTE AN EXTENSIVE AND VARIED POOL OF EXPERTISE; EXPERTISE THE ASSOCIATION COUNTS ON TO HELP PROVIDE SERVICES AND PRODUCTS THAT ENGENDER CREDIBILITY AND CAPABILITY IN ITS CONSTITUENTS. THE MORE MEMBERS, THE MORE EXPERTISE; THE MORE EXPERTISE, THE BETTER THE ABILITY TO MEET CONSTITUENT NEEDS. ISACA'S MEMBERS ARE ITS

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

MOST VALUABLE ASSET.

FORM 990, PART VI, SECTION A, QUESTION 7A

PERSONS WHO MAY ELECT GOVERNING BODY MEMBERS

INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) HAS A
NOMINATING COMMITTEE THAT PREPARES A SLATE OF OFFICERS (INTERNATIONAL
PRESIDENT AND VICE PRESIDENTS) FOR MEMBER REVIEW. MEMBERS MAY SUBMIT THE
NAMES OF ADDITIONAL CANDIDATES BY WAY OF PETITION PRIOR TO 120 DAYS
BEFORE THE ANNUAL MEETING OF THE MEMBERSHIP. THE PETITION MUST BE SIGNED
BY ONE-TWENTIETH OF 1 PERCENT OF THE MEMBERS IN GOOD STANDING, EQUALING A
MINIMUM OF 100 MEMBERS, NO MORE THAN 20 OF WHICH MAY BE FROM ANY ONE
CHAPTER. IF MEMBERS PROPOSE ADDITIONAL CANDIDATES OR IF THE NOMINATING
COMMITTEE ITSELF PROPOSES MORE CANDIDATES THAN THERE ARE OPENINGS ON THE
BOARD OF DIRECTORS, AN ELECTION IS HELD.

THE ELECTION IS CONDUCTED BY MAIL BALLOT. ONLY THOSE BALLOTS RECEIVED 20
OR MORE DAYS PRIOR TO THE ANNUAL MEETING ARE COUNTED. RESULTS OF THE
ELECTION ARE CERTIFIED BY AN INDEPENDENT PROFESSIONAL GROUP AND ANNOUNCED
AT THE ANNUAL MEETING.

IF NO ADDITIONAL CANDIDATES ARE PROPOSED BY THE MEMBERS, OR THE
NOMINATING COMMITTEE'S SLATE PRESENTS THE EXACT NUMBER OF CANDIDATES FOR
THE OPENINGS AVAILABLE, THE COMMITTEE'S SLATE IS CONSIDERED ELECTED BY
ACCLAMATION.

FORM 990, PART VI, SECTION A, QUESTION 7B

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

GOVERNING BODY DECISIONS SUBJECT TO APPROVAL

WHEREAS NOT ALL DECISIONS OF THE BOARD OF DIRECTORS ARE SUBJECT TO REVIEW
AND APPROVAL BY THE MEMBERSHIP, CERTAIN ONES ARE. EACH YEAR, AT THE
ANNUAL MEETING OF THE MEMBERSHIP, THE FOLLOWING ITEMS ARE PRESENTED TO
THE MEMBERS IN ATTENDANCE FOR APPROVAL:

- A HIGHLIGHT OF DECISIONS MADE BY THE BOARD OVER THE PREVIOUS YEAR
- THE PREVIOUS ANNUAL MEETING'S MINUTES
- THE TREASURER'S REPORT
- APPOINTMENT OF THE ASSOCIATION'S INDEPENDENT AUDITORS FOR THE
FOLLOWING YEAR

IN ADDITION, IF THE BOARD OF DIRECTORS HAS MADE ANY REVISIONS TO THE
BYLAWS, THOSE REVISIONS MUST BE PRESENTED BY WRITTEN BALLOT TO THE
MEMBERS FOR RATIFICATION. THE REVISIONS TAKE EFFECT ONLY AFTER MEMBER
RATIFICATION IS ATTAINED.

FORM 990, PART VI, SECTION B, QUESTION 11B

SUMMARY OF THE FORM 990 REVIEW PROCESS

THE 2011 FORM 990 FOR INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION
(ISACA) WAS PREPARED BY GRANT THORNTON LLP (GRANT THORNTON), BASED UPON
INFORMATION PROVIDED BY ISACA. THIS DOCUMENT SUMMARIZES THE REVIEW POINTS
AND AVAILABILITY ASSOCIATED WITH THE RETURNS.

THE DATA FOR THE RETURN WAS COMPILED BASED ON INFORMATION PREPARED FOR
THE 2011 AUDIT, AS WELL AS OTHER ACCOUNTING RECORDS. THIS INFORMATION WAS

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

SUBMITTED TO GRANT THORNTON FOR PREPARATION OF THE RETURNS. IN ADDITION TO THE FINANCIAL INFORMATION GRANT THORNTON RECEIVED, GRANT THORNTON HAD AN OPPORTUNITY TO RAISE QUESTIONS ABOUT GOVERNANCE AND OTHER ISSUES, AND REQUEST ADDITIONAL INFORMATION AS NEEDED. THE NARRATIVE EXPLANATIONS OF PROGRAM ACCOMPLISHMENTS AND POLICIES WERE COORDINATED WITH THE ISACA CHIEF COMMUNICATIONS OFFICER AND APPROPRIATE CHIEFS AND DIRECTORS OF THE ORGANIZATION.

UPON COMPLETION OF THE RETURN, SEVERAL LAYERS OF REVIEW WERE CONDUCTED:

- INITIAL REVIEWS OF RETURN:

THE INITIAL REVIEW OF THE COMPLETED RETURN WAS COMPLETED BY THE RESPECTIVE STAFF WITHIN THE FINANCE DEPARTMENT.

- SENIOR MANAGEMENT REVIEW:

FOLLOWING THE INITIAL REVIEW, THE CEO, CHIEFS, AND DIRECTORS WERE PROVIDED A COPY OF THE RETURN FOR COMMENT. THE CEO AND CHIEF HUMAN RESOURCES AND ADMINISTRATION OFFICER ALSO PROVIDED AN ADDITIONAL REVIEW OF THE COMPENSATION-RELATED AREAS. COMMENTS WERE FORWARDED TO GRANT THORNTON FOR INCORPORATION INTO THE RETURN.

- VOLUNTEER REVIEW:

THE COMPENSATION COMMITTEE WAS DELEGATED THE REVIEW OF THE COMPENSATION-RELATED SECTIONS OF THE RETURN (AS OUTLINED IN ITS CHARTER). A DETAILED REVIEW OF THE FORM 990 COMPENSATION DATA AND THE APPLICABLE SUPPORTING DOCUMENTATION WAS COMPLETED BY THE ISACA GOVERNANCE

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

CONSULTANT. THE CONCLUSIONS OF THE REVIEW WERE PROVIDED TO THE
COMPENSATION COMMITTEE AS PART OF ITS REVIEW OF THE RELATED DISCLOSURES
PERTAINING TO COMPENSATION.

-- THE ORGANIZATION'S GOVERNANCE ADVISORY COUNCIL (GAC) CHAIR AND A
DESIGNATED MEMBER OF GAC (ISACA GOVERNANCE CONSULTANT FOR THE 2011
RETURN) REVIEWED THE REMAINDER OF THE RETURN. THE INTERNATIONAL PRESIDENT
ALSO WAS PROVIDED THE OPPORTUNITY TO REVIEW THE RETURN AT THIS TIME.

-- COMMENTS FROM THESE REVIEWS WERE EVALUATED AND PROVIDED TO GRANT
THORNTON, WHO UPDATED THE RETURN, IF APPLICABLE.

-- THE BOARD OF DIRECTORS WAS PROVIDED ACCESS TO THE RETURN VIA THE
BOARD PORTAL (WEB SITE) PRIOR TO ITS FILING.

FORM 990, PART VI, SECTION B, QUESTION 12C
COMPLIANCE WITH WRITTEN CONFLICT OF INTEREST POLICY
INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) HAS A WRITTEN
CONFLICT OF INTEREST POLICY ADDRESSING INSTANCES WHERE A THIRD-PARTY
RELATIONSHIP OF A PAID CONSULTANT, VOLUNTEER AND/OR EMPLOYEE COULD IN
SOME WAY POTENTIALLY PRESENT OR APPEAR TO PRESENT A COMPROMISE RELATED TO
ACTIONS AND DECISIONS MADE ON BEHALF OF ISACA. THE POLICY ALLOWS FOR
REMEDIES AND/OR APPROPRIATE RESPONSES BASED ON A JOINT DETERMINATION BY
ISACA MANAGEMENT AND VOLUNTEER LEADERSHIP OF THE NATURE AND EXTENT OF THE
POTENTIAL CONFLICT. THE CONFLICT OF INTEREST POLICY IS REVIEWED ON A
PERIODIC BASIS BY THE GOVERNANCE ADVISORY COUNCIL AND APPROVED BY THE
ISACA BOARD OF DIRECTORS.

POTENTIAL CONFLICTS OF INTEREST ARE DOCUMENTED AND MONITORED EACH YEAR,

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

THROUGH (1) SELF-PROCLAMATIONS MADE BY INDIVIDUAL VOLUNTEERS WHO SIGN THE PARTICIPATION AGREEMENTS REQUIRED FOR PARTICIPATION IN ASSOCIATION BOARDS, COMMITTEES, SUBCOMMITTEES AND TASK FORCES; (2) DISCLOSURE OF CONFLICTS IN STANDARD CONSULTING AGREEMENTS; AND (3) DISCLOSURE BY ISACA EMPLOYEES UPON HIRE (AND ANNUALLY) BY REVIEW AND SIGNATURE OF THE ORGANIZATION'S EMPLOYEE AGREEMENT. CONSULTANTS, VOLUNTEERS AND EMPLOYEES ARE ENCOURAGED TO REPORT ANY CONFLICTS THAT MAY ARISE THROUGHOUT THE YEAR. IF SUCH INSTANCES ARE REPORTED, THEY ARE DEALT WITH AT THAT TIME AND BASED ON THE CIRCUMSTANCES RELATING TO THE POTENTIAL CONFLICT.

FORM 990, PART VI, SECTION B, QUESTION 15

PROCESS FOR DETERMINING COMPENSATION

THE COMPENSATION PHILOSOPHY OF INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA), WHICH IS AFFIRMED BY THE BOARD OF DIRECTORS, IS TO PROVIDE COMPETITIVE COMPENSATION AND BENEFITS COVERAGE IN SUPPORT OF THE GOALS AND OBJECTIVES OF THE ORGANIZATION. THE COMPENSATION PHILOSOPHY IS SUPPORTED BY THE USE OF AN INDEPENDENT COMPENSATION CONSULTING FIRM AND THE ESTABLISHMENT OF A COMPENSATION COMMITTEE COMPOSED OF INDEPENDENT MEMBERS OF THE BOARD OF DIRECTORS (CURRENT AND TWO IMMEDIATE PAST INTERNATIONAL PRESIDENTS).

BASED ON THE COMPENSATION PHILOSOPHY, COMPENSATION RANGES FOR THE CEO AND THE EXECUTIVE MANAGEMENT TEAM ARE DEVELOPED BY THE COMPENSATION CONSULTANT AND REPORTED TO THE COMMITTEE. RANGES ARE CALCULATED BASED ON POSITION RESPONSIBILITIES AND A COMPILATION OF PUBLISHED COMPENSATION SURVEYS FOR DEFINED COMPARATIVE GROUPS REPRESENTATIVE OF ISACA. IN

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

ADDITION, AVAILABLE DATA FROM FILED IRS FORM 990S MAY BE USED TO
SUPPLEMENT THE SURVEY DATA UTILIZED BY THE COMPENSATION COMMITTEE.

THE FINAL REPORT OF THE COMPENSATION CONSULTANT AS ACCEPTED BY THE
COMMITTEE, THE COMPENSATION PHILOSOPHY, AND CONTRACT (IF APPLICABLE) THEN
SERVE AS THE BASIS FOR THE DETERMINATION OF COMPENSATION, CONSISTING OF
BASE SALARY, TOTAL CASH COMPENSATION AND BENEFITS. DETERMINATION FOR
EXECUTIVE MANAGEMENT IS MADE BY THE CEO BASED UPON THE ACCEPTED
COMPENSATION RANGES. DETERMINATION FOR THE CEO IS MADE BY THE
COMPENSATION COMMITTEE ITSELF.

THIS PROCESS IS COMPLETED ON AN ANNUAL BASIS, GATHERING THE INFORMATION
NECESSARY TO EVALUATE THE MARKET COMPETITIVENESS OF ISACA'S COMPENSATION;
PROVIDE DATA ON EXECUTIVE COMPENSATION FROM A CONTROL AND GOVERNANCE
STANDPOINT; AND FACILITATE ISACA'S ABILITY TO ATTRACT, RETAIN AND
MOTIVATE QUALITY STAFF, ACCOMPLISH ORGANIZATIONAL OBJECTIVES AND PROVIDE
VALUE TO ITS CONSTITUENTS, WHICH ISACA CONSIDERS CRITICALLY IMPORTANT TO
ITS FUTURE.

FORM 990, PART VI, SECTION C, QUESTION 19
INFORMATION MADE AVAILABLE TO THE PUBLIC
THE FOLLOWING DOCUMENTS ARE POSTED TO THE WEB SITE AND PROVIDED UPON
REQUEST: (1) PARTICIPATION AGREEMENT, WHICH OUTLINES THE CONFLICT OF
INTEREST POLICY AND INTELLECTUAL PROPERTY OWNERSHIP ISSUES AND IS
REQUIRED TO BE SIGNED BY ALL VOLUNTEERS; (2) THE BYLAWS OF THE
ORGANIZATION; AND (3) THE ANNUAL REPORT. INFORMATION SYSTEMS AUDIT AND

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

CONTROL ASSOCIATION (ISACA) DOES NOT HAVE A FORM 1023, BUT IT DOES
PROVIDE THE IRS LETTER OF DETERMINATION, UPON REQUEST. IN ADDITION, FORM
990 IS PUBLICLY AVAILABLE THROUGH GUIDESTAR'S WEBSITE AND THE ILLINOIS
ATTORNEY GENERAL'S WEBSITE.

FORM 990, PART VIII, QUESTION 2B

MEMBERSHIP DUES - NONDEDUCTIBLE

BASED ON CLARIFICATION OF IRS GUIDELINES, MEMBERSHIP DUES ARE REFLECTED
IN PART VIII, LINE 2B, AS THE DUES ARE ATTRIBUTABLE TO CERTAIN MEMBERSHIP
BENEFITS AND CONSIDERED PROGRAM SERVICE REVENUE OF ISACA. THE PRIOR YEAR
AMOUNT REPORTED ON PART I, LINE 8 HAS BEEN REVISED IN ORDER TO PRESENT
THIS REVENUE IN A CONSISTENT MANNER.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) SERVES BOTH
INDIVIDUALS AND ENTERPRISES BY BEING A LEADING GLOBAL PROVIDER OF
KNOWLEDGE, CERTIFICATIONS, COMMUNITY, ADVOCACY AND EDUCATION ON
INFORMATION SYSTEMS ASSURANCE AND SECURITY, ENTERPRISE GOVERNANCE OF
INFORMATION TECHNOLOGY (IT), AND IT-RELATED RISK AND COMPLIANCE.
FOUNDED IN 1969, ISACA SPONSORS INTERNATIONAL CONFERENCES, PUBLISHES
THE ISACA JOURNAL, AND DEVELOPS INTERNATIONAL INFORMATION SYSTEMS
AUDITING AND CONTROL STANDARDS. ISACA ALSO ADMINISTERS THE GLOBALLY
RESPECTED CERTIFIED INFORMATION SYSTEMS AUDITOR (CISA), CERTIFIED
INFORMATION SECURITY MANAGER (CISM), CERTIFIED IN THE GOVERNANCE OF
ENTERPRISE IT (CGEIT), AND CERTIFIED IN RISK AND INFORMATION SYSTEMS

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

ATTACHMENT 1 (CONT'D)FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

CONTROL (CRISC) DESIGNATIONS.

ISACA SUPPORTS DEVELOPMENT, UPDATE AND EDUCATION ACTIVITIES RELATED
TO THE COBIT, VAL IT AND RISK IT FRAMEWORKS, WHICH HELP IT
PROFESSIONALS AND ENTERPRISE LEADERS FULFILL THEIR IT GOVERNANCE
RESPONSIBILITIES AND DELIVER VALUE TO THE BUSINESS WHILE USING
RESOURCES WISELY, MANAGING RISK AND MEASURING PERFORMANCE.

ATTACHMENT 2FORM 990, PART III - PROGRAM SERVICE, LINE 4A

INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION'S (ISACA)
PRIMARY PURPOSE IS TO SERVE ITS MEMBERS. ONE WAY ISACA DOES THAT
IS BY HELPING THEM DO THEIR JOBS BETTER, BY OFFERING THEM
PRAGMATIC GUIDANCE ON EMERGING TECHNOLOGIES THEY DEAL WITH EVERY
DAY. IN 2011 A THREE-PART COBIT ASSESSMENT PROGRAM, CONSISTING OF
A PROCESS ASSESSMENT MODEL, AN ASSESSOR GUIDE AND A
SELF-ASSESSMENT GUIDE, WAS PUBLISHED. SIX WHITE PAPERS WERE
ISSUED, COVERING TOPICS RANGING FROM DATA ANALYTICS TO GEOLOCATION
TO MOBILE PAYMENTS-BRINGING THE TOTAL NUMBER OF WHITE PAPERS TO
15. TWELVE AUDIT/ASSURANCE PROGRAMS WERE ADDED, EXPENDING THE
TOTAL LIBRARY TO 29. RECOGNIZING THE EXPANDING PRESENCE OF CLOUD
COMPUTING AND THE RISK IT CAN REPRESENT (IN ADDITION TO
OPPORTUNITY) ISACA RELEASED IT CONTROL OBJECTIVES FOR CLOUD
COMPUTING: CONTROLS AND ASSURANCE IN THE CLOUD, PROVIDING THE SAME
SORT OF PRACTICAL GUIDANCE FOR THE CLOUD AS ISACA OFFERS FOR

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

ATTACHMENT 2 (CONT'D)

SARBANES-OXLEY AND BASEL II. ALL RESEARCH PUBLICATIONS ARE OFFERED
TO MEMBERS FOR FREE DOWNLOAD AS A BENEFIT OF MEMBERSHIP.

THE ASSOCIATION OFFERS MEMBER BENEFITS IN THE AREAS OF
PROFESSIONAL DEVELOPMENT, COMMUNITY AND LEADERSHIP, AND
CONTINUALLY REVIEWS AND EXPANDS ITS PORTFOLIO OF BENEFITS TO
ADDRESS THE CHANGING NEEDS OF MEMBERS. MANY MEMBER BENEFITS ARE
DOCUMENTED AND FURTHER EXPLAINED WITHIN THE OTHER RESPONSES ON
THIS FORM.

AS A RESULT OF THIS ACTIVITY, ISACA MEMBERSHIP GREW 5.6 PERCENT
FROM 31 DECEMBER 2010 TO 31 DECEMBER 2011, AND REACHED A 10-YEAR
HIGH IN RETENTION, AT 81 PERCENT. FIVE NEW CHAPTERS WERE ADDED,
TALLAHASSEE, FLORIDA, USA; SPRINGFIELD, MISSOURI, USA; VENICE,
ITALY; WARSAW, POLAND; AND ANKARA, TURKEY. THEIR ADDITION BROUGHT
THE TOTAL NUMBER OF CHAPTERS TO 195 AT YEAR-END. AMONG THOSE 195
CHAPTERS ARE SEVEN WHOSE INDIVIDUAL MEMBERSHIP IS IN EXCESS OF
2,000.

ATTACHMENT 3

FORM 990, PART III - PROGRAM SERVICE, LINE 4B

INFORMATION TECHNOLOGY (IT) IS A RAPIDLY CHANGING INDUSTRY, AND IT
DEMANDS A COMMITMENT ON THE PART OF ITS PRACTITIONERS TO LEARN
CONTINUOUSLY AND MASTER NEW SKILLS. CERTIFICATION IS ONE WAY TO
EXPAND ONE'S SKILL SET AND BE RECOGNIZED FOR DOING SO. HOLDING AN

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

ATTACHMENT 3 (CONT'D)

INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA)
PROFESSIONAL CERTIFICATION DEMONSTRATES EXCELLENCE IN THE TOPIC
AND A COMMITMENT TO REMAINING CURRENT AND INFORMED; IT
DISTINGUISHES AN INDIVIDUAL FROM HIS/HER PEERS.

INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) OFFERS
FOUR CERTIFICATIONS: CERTIFIED INFORMATION SYSTEMS AUDITOR (CISA),
CERTIFIED INFORMATION SECURITY MANAGER (CISM), CERTIFIED IN THE
GOVERNANCE OF ENTERPRISE IT (CGEIT) AND CERTIFIED IN RISK AND
INFORMATION SYSTEMS CONTROL (CRISC). IN 2011, CISA CELEBRATED ITS
33RD YEAR WITH EXAM REGISTRATIONS TOTALING MORE THAN 18,000. THE
CISA EXAM WAS AVAILABLE IN 12 LANGUAGES AT MORE THAN 200
LOCATIONS. THE CISA DESIGNATION HAS BEEN EARNED BY MORE THAN
90,000 PROFESSIONALS SINCE ITS INCEPTION. CISM, WHICH WAS FIRST
OFFERED IN 2002, SAW MORE THAN 4,600 CANDIDATES REGISTERED FOR THE
TWO EXAM OFFERINGS. BY YEAR-END, MORE THAN 18,000 CISMS HAD BEEN
CERTIFIED SINCE THE PROGRAM'S INCEPTION. CGEIT WAS INTRODUCED IN
2007, HAD MORE THAN 1,000 REGISTRANTS FOR 2011 EXAMS, AND HAS
SINCE BEEN AWARDED TO MORE THAN 4,800 INDIVIDUALS WHO HAVE A
SIGNIFICANT MANAGEMENT, ADVISORY OR ASSURANCE ROLE RELATED TO THE
GOVERNANCE OF IT. CRISC, ISACA'S NEWEST CERTIFICATION, WAS
AVAILABLE ONLY VIA GRANDFATHERING THROUGH THE END OF JUNE 2011.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

ATTACHMENT 3 (CONT'D)

ITS FIRST EXAMS WERE OFFERED IN JUNE AND DECEMBER 2011, ATTRACTING
MORE THAN 750 REGISTRANTS.

2011 MARKED THE SIXTH YEAR THE CISA AND CISM CERTIFICATIONS WERE
ACCREDITED UNDER INTERNATIONAL STANDARD ANSI/ISO/IEC 17024 FROM
THE INTERNATIONAL ORGANIZATION FOR STANDARDIZATION (ISO), AND THE
FIRST YEAR CGEIT RECEIVED THAT ACCREDITATION.

ATTACHMENT 4FORM 990, PART III - PROGRAM SERVICE, LINE 4C

WITH A ROSTER OF EVENTS THAT INCLUDED THE GLOBAL COMPUTER AUDIT,
CONTROL AND SECURITY (CACS) CONFERENCES AND OTHER SPECIALIZED
TRAINING EVENTS, 2011 WAS DISTINGUISHED BY THE FIRST OFFERING OF
THE WORLD CONGRESS, A CONFERENCE EVENT DIFFERENT FROM OTHER ISACA
EDUCATIONAL OFFERINGS IN ITS PANEL-DRIVEN AND COLLABORATIVE
PRESENTATION STYLE AND ITS FOCUS ON BUSINESS AND MANAGEMENT,
RATHER THAN TECHNICAL, TOPICS. WITH THE ADDITION OF THE WORLD
CONGRESS, ISACA CEMENTED ITS POSITION AS ONE OF THE MOST HIGHLY
RESPECTED AND SOUGHT-AFTER SOURCES FOR PROFESSIONAL EDUCATION IN
INFORMATION SYSTEMS SECURITY, ASSURANCE AND CONTROL.

ISACA IS DEDICATED TO MONITORING THE PROFESSIONAL ENVIRONMENT AND
DEVELOPING NEW PROGRAMS AS NEEDED TO COMPLEMENT ITS ESTABLISHED
PORTFOLIO OF EVENTS. THE ASSOCIATION HAS FOCUSED A CONSIDERABLE
AMOUNT OF EFFORT ON DISTANCE LEARNING, AS IT PROVIDES A WAY TO

Name of the organization **INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION**

Employer identification number

ATTACHMENT 4 (CONT'D)

OFFER LOW-COST EDUCATION TO A GLOBALLY DISPERSED AUDIENCE. A COMPLIMENTARY E-SYMPOSIUM ON TOPICS RELEVANT TO ISACA MEMBERS IS PRESENTED MONTHLY. THIS E-SYMPOSIUM SERIES PROVIDED OVER 30 HOURS OF FREE ONLINE EDUCATION AND CONTINUING PROFESSIONAL EDUCATION CREDIT IN 2011. REGISTRATION FOR THE E-SYMPOSIA AVERAGES MORE THAN 2,400 PER OFFERING. IN ADDITION, ISACA PARTICIPATED IN FOUR VIRTUAL TRADE SHOWS IN 2011, AVERAGING MORE THAN 2,300 ATTENDEES PER PRESENTATION. ONLINE TRAINING IS MADE AVAILABLE FOR THE CERTIFIED INFORMATION SYSTEMS AUDITOR (CISA) CERTIFICATION AND THE COBIT CONTROL FRAMEWORK AS WELL. THE COBIT COURSE AWARDED MORE THAN 7,500 CERTIFICATES IN 2011.

AS VALUABLE AS DISTANCE LEARNING IS, THE BENEFITS OF FACE-TO-FACE TRAINING CONTINUES TO BE APPRECIATED. IN 2011, ISACA'S ONSITE TRAINING PROGRAMS, LAUNCHED IN 2009 AND WHICH ENTERPRISES CAN USE AS LOW-COST, CUSTOMIZABLE WAYS TO EDUCATE MULTIPLE EMPLOYEES AT ONCE, GAINED TRACTION, OFFERING 40 ONSITE TRAINING DAYS DURING THE YEAR.

ATTACHMENT 5

FORM 990, PART VII, COLUMN B - ESTIMATED AVERAGE PER WEEK

NAME AND TITLE	HOURS DEVOTED FOR RELATED ORGANIZATION
KENNETH VANDER WAL PRESIDENT	12.00
CHRISTOS DIMITRIADIS VICE PRESIDENT	2.00
GREGORY GROCHOLSKI VICE PRESIDENT/TREASURER	2.00

Name of the organization **INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION**

Employer identification number

ATTACHMENT 5 (CONT'D)

TONY HAYES	
VICE PRESIDENT	2.00
NIRAJ KAPASI	
VICE PRESIDENT	2.00
JEFF SPIVEY	
VICE PRESIDENT	2.00
JO STEWART-RATTRAY	
VICE PRESIDENT	2.00
LYNN LAWTON	
PAST PRESIDENT	2.00
EMIL D'ANGELO	
PAST PRESIDENT	2.00
SUSAN CALDWELL	
CEO/SECRETARY	4.00
RONALD RIBA	
COO	4.00
NEVILLE RADEMEYER	
CFO	4.00
SCOTT ARTMAN	
CVMO	4.00
JANE SEAGO	
CCO	4.00
TERENCE TRSAR	
CPDO	4.00
RON HALE	
CRO	4.00
DIANE NELSON	
CMO	4.00
CHARLES CRIBARO	
CHRAO	4.00

ATTACHMENT 6

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
KELMSCOTT PRESS INC. 1665 MALLETE ROAD AURORA, IL 60505-1090	PRINTING SERVICES	2,879,934.
FEDERAL EXPRESS CORPORATION P.O. BOX 94515 PALATINE, IL 60094-4515	DELIVERY SERVICES	2,001,847.
PROFESSIONAL EXAMINATION SERVICE CHURCH STREET STATION, P.O. BOX 6443 NEW YORK, NY 10249-6443	EXAM ADMIN. SERVICE	1,686,250.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION

Employer identification number

ATTACHMENT 6 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
MCKINSEY & COMPANY, INC. 55 EAST 52ND STREET NEW YORK, NY 10022	PROFESS. SERVICES	1,335,000.
PRICEWATERHOUSECOOPERS WOLUWE GARDEN, WOLUWEDAL 18 B-1932 SINT-STEVENSS-WOLUWE BELGIUM	PRODUCT DEV, RESEARCH	475,937.
TOTAL COMPENSATION		<u>8,378,968.</u>

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2011

**Open to Public
Inspection**

Name of the organization

INFORMATION SYSTEMS AUDIT AND

CONTROL ASSOCIATION

Employer identification number

23-7067291

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

(1)	(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

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

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
							Yes	No
(1)	IT GOVERNANCE INSTITUTE 3701 ALGONQUIN ROAD SUITE 1010 95-3080691 ROLLING MEADOWS, IL 60008	RESEARCH/DEV	IL	501 (C) (3)	LINE 9	ISACA	X	
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2011

JSA

1E1307 1 000

89388J 649R

1447160

PAGE 50

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) _____												
(2) _____												
(3) _____												
(4) _____												
(5) _____												
(6) _____												
(7) _____												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to 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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) _____							
(2) _____							
(3) _____							
(4) _____							
(5) _____							
(6) _____							
(7) _____							

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		<input checked="" type="checkbox"/>
b Gift, grant, or capital contribution to related organization(s)		<input checked="" type="checkbox"/>
c Gift, grant, or capital contribution from related organization(s)		<input checked="" type="checkbox"/>
d Loans or loan guarantees to or for related organization(s)		<input checked="" type="checkbox"/>
e Loans or loan guarantees by related organization(s)		<input checked="" type="checkbox"/>
f Sale of assets to related organization(s)		<input checked="" type="checkbox"/>
g Purchase of assets from related organization(s)		<input checked="" type="checkbox"/>
h Exchange of assets with related organization(s)		<input checked="" type="checkbox"/>
i Lease of facilities, equipment, or other assets to related organization(s)		<input checked="" type="checkbox"/>
j Lease of facilities, equipment, or other assets from related organization(s)		<input checked="" type="checkbox"/>
k Performance of services or membership or fundraising solicitations for related organization(s)		<input checked="" type="checkbox"/>
l Performance of services or membership or fundraising solicitations by related organization(s)		<input checked="" type="checkbox"/>
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		<input checked="" type="checkbox"/>
n Sharing of paid employees with related organization(s)		<input checked="" type="checkbox"/>
o Reimbursement paid to related organization(s) for expenses		<input checked="" type="checkbox"/>
p Reimbursement paid by related organization(s) for expenses		<input checked="" type="checkbox"/>
q Other transfer of cash or property to related organization(s)		<input checked="" type="checkbox"/>
r Other transfer of cash or property from related organization(s)		<input checked="" type="checkbox"/>

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

	(a) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved	(d) Method of determining amount involved
(1) IT GOVERNANCE INSTITUTE		M	39,500.	CASH
(2) IT GOVERNANCE INSTITUTE		N	34,000.	CASH
(3) IT GOVERNANCE INSTITUTE		P	73,500.	CASH
(4) IT GOVERNANCE INSTITUTE		Q	168,817.	CASH
(5)				
(6)				

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.

(1) Name, address, and EIN of entity	(2) Primary activity	(3) Legal domicile (state or foreign country)	(4) Predominant income (related, unrelated, excluded from tax under section 512-514)	(5) Are all partners section 501(c)(3) organizations?		(6) Share of total income	(7) Share of end-of-year assets	(8) Disproportionate allocations?		(9) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(10) General or managing partner?		(11) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) _____													
(2) _____													
(3) _____													
(4) _____													
(5) _____													
(6) _____													
(7) _____													
(8) _____													
(9) _____													
(10) _____													
(11) _____													
(12) _____													
(13) _____													
(14) _____													
(15) _____													
(16) _____													

Schedule R (Form 990) 2011

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).