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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545 0047 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2011 calendar year, or tax year beginning 2011, and ending D Employer Identification Number Check if applicable INTERNATIONAL FREIGHT FORWARDERS AND 58-1466324 Address change CUSTOMS HOUSE BROKER ASSOCIATION, INC. E Telephone number Name change P.O. BOX 45284 (770) 688-1206 Initial return ATLANTA, GA 30320 Terminated 53,886. G Gross receipts \$ Amended return F Name and address of principal officer H(a) Is this a group return for affiliates? Yes Application pending H(b) Are all affiliates included? SAME AS C ABOVE If 'No,' attach a list (see instructions) 501(c)(3) X 501(c) (6 4947(a)(1) or 527 Tax-exempt status) < (insert no) Website: ► H(c) Group exemption number X Corporation 1981 M State of legal domicile GA Form of organization Part Summary Briefly describe the organization's mission or most significant activities THE MISSION OF IFFCHBA IS TO PROMOTE THE COMMON BUSINESS INTERESTS OF CUSTOMS BROKERS & INTERNATIONAL FREIGHT FORWARDERS: TO ENCOURAGE THE PROFESSIONALISM WITHIN OUR INDUSTRY: TO MAINTAIN A STANDARD OF INTEGRITY & EFFICIENCY THAT WILL PROTECT THE TRADE AND THE GOVERNMENT __ Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) 6 10 7a Total unrelated business revenue from Part VIII, column (C), line 12 7 a b Net unrelated business taxable income from Form 990-T, line 34 7b 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 525 6,907. 53,403. 46,979. Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 Total revenue — add lines 8 through 11 (nous) equal Part VIII, column (A), line 12)
Grants and similar amounts paid (Part X, column (A), lines 1-3) 53,928 53,886. 12 Benefits paid to or for members (Part IX, column (A), lines Salaries, other compensation employee ben fit 20 Part 12 18 lumn (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11) b Total fundraising expenses (Part IX column (N), lift 25) >

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 58,193 53,575. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 58,193. 53,575. -4,265 311 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) 580 3,891. 21 Total liabilities (Part X, line 26) 0 0. Net assets or fund balances Subtract line 21 from line 20 3,580 3,891. Partill Signature Block including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and information of which preparer has any knowledge Sign V DASUVO Here Type or print name and PTIN Print/Type preparer's name SHEILA M. KOZAK. CPA P00687026 Paid self-employed ► FULTON & KOZAK, CPA Preparer **Use Only** 7187 JONESBORO RD STE 100A Firm's EIN ► 20-1403280 Firm's address 770-961-4200 MORROW, GA 30260-2944 Yes May the IRS discuss this return with the preparer shown above? (see instructions) No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2011)

TEEA0113L 08/18/11

Form 990 (2011) I	NTERNATIONAL FREIGHT FORWARDERS AND	58-146632	24	_Pa	ge 2
Part III Statem	ent of Program Service Accomplishments				
Check if	Schedule O contains a response to any question in this Part III				X
	the organization's mission.				
SEE SCHEDU					
2 - 2 - 2 - 2 - 2					
					- -
					
2 Ded the second					
_	ation undertake any significant program services during the year which were not listed on the	a prior	6		
Form 990 or 99			Yes (X I	No
•	e these new services on Schedule O		-	_,	
3 Did the organiza	ation cease conducting, or make significant changes in how it conducts, any program service	∍s?	Yes [ΧI	Vo
If 'Yes,' describ	e these changes on Schedule O				
4 Describe the or	ganization's program service accomplishments for each of its three largest program services	, as measure	d by exp	ense:	s.
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amou expenses, and revenue, if any, for each program service reported	nt of grants a	and alloc	ations	i to
others, the total	expenses, and revenue, it any, for each program service reported				
0.000					
	(Expenses \$ 46,844. including grants of \$) (Reve	nue \$		<u>, 979</u>	<u>.</u>)
	TO EDUCATE THEIR MEMBERS AND FURTHER THEIR PROGRAMMING, TH				
HOSTS MONT	THLY LUNCH SEMINARS AND ATTENDS THE GOVERNMENT AFFAIRS AND	THE NAT	IONAL		
CUSTOMS BE	ROKERS FORWARDERS ASSOCIATION OF AMERICA, INC CONFERENCES	IN WASHI	NGTON	$\bar{D}.\bar{C}$	
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Ad Other access	Converse (Describe in Schodule O.)		 -		
	services (Describe in Schedule O)				
(Expenses \$					
4e Total program s	service expenses ► 46,844.				

			res	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		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	_ 3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, 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_		х
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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8_		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
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	11 a		<u>X</u>
	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	11 b		Х
	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	11 c		Х
	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	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		<u>X</u>
	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	11 f		<u>x</u>
	a 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
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
1	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		<u>x</u>
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		<u>X</u>
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		<u>x</u>
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
	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		<u>X</u> _
20	aDid the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u>X</u>
ı	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 Ь		

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
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 27 If 'Yes,' complete Schedule I, Parts I and III	22		х
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		Х
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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		x
ŧ	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? If 'Yes,' complete Schedule L, Part I	25a		
1	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		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? If 'Yes,' complete Schedule L, Part III	27		Х
	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).		\$ 55 #1655	
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV .	28a		X
İ	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	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? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c		X
29		29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31	{	<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		<u>X</u> _
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u> _
ŀ	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		_ 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	х	
BAA		Form	990 (2	2011)

INTERNATIONAL FREIGHT FORWARDERS AND 58-1466324 Part V Statements Regarding Other IRS Filings and Tax Compliance Check 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 1 a 0 **b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-0 ments, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3*a* X b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account) 42 Х **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? X 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b Х c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization X solicit any contributions that were not tax deductible? 6a **b** If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6Ł 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 7 a services provided to the payor? 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 7с Form 8282? d If 'Yes,' indicate the number of Forms 8282 filed during the year المراقعة r e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 71 g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? **7**h 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 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b 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? 13a Note. See the instructions for additional information the organization must report on Schedule O. **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 1 . 13c c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14h

Form 990 (2011) INTERNATIONAL FREIGHT FORWARDERS AND 58-1466324 Page 6 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 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 1a 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. b Enter the number of voting members included in line 1a, above, who are independent . 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee or key employee? 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 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? SEE SCHEDULE O 6 Х 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? SEE SCHEDULE O Х 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? SEE SCH O 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a X 86 **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director or 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Х 10a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes Х 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O ر الدوة بود Х 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c X 13 X 13 Did the organization have a written whistleblower policy? X Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent 7.3 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Х X 15b b Other officers of key employees of the organization 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 16a X taxable entity during the year? 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed - GA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization.

►LISA KENDRICK 1925 VARIATIONS DRIVE ATLANTA GA 30329 770-688-1206

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58-1466324

age 7

| <u>Partivili</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check 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.

X Check this box if neither the organization	n nor any	relate	d or	gan	ızat	ion co	mpe	ensated any current of	ficer, director, or trus	tee
(A) Name and title	(B) Average hours per week (do not check more that unless person is both a and a director/trus		h an offi	box, cer	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation			
	(describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	related organizations (W-2/1099 MISC)	from the organization and related organizations
(1) PAM BROWN	<u> </u>									
PRESIDENT	10	_		X				0.	0.	0.
(2) LAURIE ARNOLD VICE PRESIDENT	10			Х				0.	0.	0.
(3) LISA KENDRICK	ļ									
TREASURER	10	ļ		Х	<u> </u>			0.	0.	0.
(4) LISA MAXWELL SECRETARY	10			Х				0.	0.	0.
_(5)										
		-								
(10)										
(11)										
(12)										
(13)										
(14)										
							_			

Rant VIII Section A. Officers, Directors, Trust	ees, l	Key	<u>En</u>	<u>ıplo</u>	oye	es,	and	d Highest Con	pensated Er	nployees (con	1t)
(A) Name and title	(B) Average hours per	offe	, unle cer ar	Pos heck	rson	than is boi	h an	(D) Reportable compensation from the organization	(E) Reportable compensation fro	Estimated amount of oft compensation	her
	week (describ e hours for related organi- zations in Sch O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W 2/1099 MISC)	related organizatio (W-2/1099 MISC	from the organization and related organization	n d
(15)											
<u>(16)</u>											
<u>(17)</u>											
(18)											
(19)											
(20)											
(21)					-						
(22)											
(23)											
(24)									-		
(25)											
1 b Sub-total c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	Α	<u> </u>					A A A	0. 0.		0. 0.	0.
2 Total number of individuals (including but not limited from the organization ► 0	d to the	se li	sted	iabo	ove)	who	rec	ceived more than	\$100,000 of repo	ortable compensa	
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	ndıvıdua	al	_		•					Yes 3	No X
4 For any individual listed on line 1a, is the sum of re- the organization and related organizations greater the such individual	portable nan \$15	e co: 50,00	mpe 00?	nsat <i>If 'Y</i>	ion 'es'	and com	othe plet	er compensation f e Schedule J for	rom	4	<u>X</u>
5 Did any person listed on line 1a receive or accrue or for services rendered to the organization? If 'Yes,' or	ompens omplet	satıo e Sc	n fro	om a ule .	any i <i>J foi</i>	unre Suc	late h po	d organization or erson	ındıvıdual	5	X
Section B. Independent Contractors 1 Complete this table for your five highest compensate	ed inde	pend	dent	con	trac	tors	that	t received more th	an \$100,000 of		
compensation from the organization Report comper (A)	sation	for t	the c	caler	ndar	yea	r er	nding with or within		on's tax year (C)	
None and business address	<u> </u>							Description of		Compensation	1
					_		\exists				
2 Total number of independent contractors (including \$100,000 in compensation from the organization >		lımı	ted t	to th	ose	liste	ed a	bove) who receive	d more than		

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S .0	1a Federated campaigns 1a		-	10,0,140		312, 313, 01 314
AN	b Membership dues 1b	6,907.	1			
, G	c Fundraising events. 1c		1		ļ	
FIS	d Related organizations 1 d		1			
NS, G	e Government grants (contributions) 1e		j			
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f				ļ	,
ž S	g Noncash contributions included in lns 1a-1f \$					
	h Total. Add lines 1a-1f		6,907.	`		<u> </u>
PROGRAM SERVICE REVENUE		Business Code				
E	2a LUNCHEON INCOME		45,479.			
Ξ.	b_SEMINAR_INCOME		1,500.	1,500.		
<u> </u>	c	 				
SEI	d					
RAM	e					
20	f All other program service revenue					<u> </u>
_=	g Total. Add lines 2a-2f	<u> </u>	46,979.		· · · · · · · · · · · · · · · · · · ·	
	3 Investment income (including dividends other similar amounts)	s, interest and		İ		
	•			 		
	The state of the contract of t	bond proceeds		 		
	5 Royalties	(ii) Personal			, ,	
	6a Gross rents.	(ii) Personal	A STATE OF THE PARTY			1.0
	b Less. rental expenses	 				- 1 , j
	c Rental income or (loss)	 				
	d Net rental income or (loss)				<u>-1</u>	
	(A) Convention	(ii) Other		3.00	50-	
	7a Gross amount from sales of assets other than inventory	(ii) Other				
		 	1.5° (
	b Less cost or other basis and sales expenses					
	c Gain or (loss)	T				
	d Net gain or (loss)	>	<u> </u>			
3	8a Gross income from fundraising events (not including \$					
ÆNUE	of contributions reported on line 1c).		1 1 1			1
OTHER REVE	See Part IV, line 18					, ,
쁖	b Less. direct expenses					
5	c Net income or (loss) from fundraising e		ينييا أواليد الإسافة الماء			'
	9a Gross income from gaming activities			- k	1	
	b Less. direct expenses . b				* (
ĺ	c Net income or (loss) from gaming activi	·				<u>``</u>
		lies		-		
	10a Gross sales of inventory, less returns and allowances a		,			
	b Less. cost of goods sold			, , , , , ,		
Į	c Net income or (loss) from sales of inver	ntory				
- [Miscellaneous Revenue	Business Code				
	¹¹ a					<u></u>
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d	>		•		
	12 Total revenue. See instructions .	>	53,886.	46,979.	0.	0.

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 questic	n in this Part IX		[]
Do . 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21			·	
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages.				
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
	a Management				
	Legal				
	Accounting	1,600.	800.	800.	
	Lobbying		- 300		
	Professional fundraising services See Part IV, line 17		-0.	St 7, 52 7, 7, 7,	
	Investment management fees		<u> </u>		
	Other				
	Advertising and promotion				
		251.		251.	
13	·	231.			
14	Information technology				
15	Royalties				
	Occupancy	2 516	1 750	1 750	
	Travel	3,516.	1,758.	1,758.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings Interest	9,952.	9,952.		
21	Payments to affiliates	-			
22	Depreciation, depletion, and amortization				
23	Insurance	858.	429.	429.	
	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	And the second s			The second second
	expenses on Schedule O.)	, , , , , , , , , , , , , , , , , , , ,		36.14	
	LUNCHEON EXPENSE	25,476.	25,476.		
	MEMBER PICNIC	2,622.	2,622.		
	FLOWERS & GIFTS	2,576.		2,576.	
	SEMINAR EXPENSE	2,557.	2,557.		
	All other expenses	4,167.	3,250.	917.	
25	Total functional expenses. Add lines 1 through 24e	53,575.	46,844.	6,731.	0.
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 ► if following SOP 98-2 (ASC 958-720)	,			

Balance Sheet

Part X

(A) End of year Beginning of year 3,580 3,891 1 Cash - non-interest-bearing 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net Δ Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 5 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) 6 Notes and loans receivable, net. 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10 a Land, buildings, and equipment, cost or other basis Complete Part VI of Schedule D 10a b Less accumulated depreciation 10b 10 c 11 Investments - publicly traded securities Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets Other assets. See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 3,580 16 3.891 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 24 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 25 0. Total liabilities. Add lines 17 through 25 0 26 Organizations that follow SFAS 117, check here X and complete lines 18 1 1 1 mg 18/34 C 34 40 7 27 through 29 and lines 33 and 34. 3,580. 3,891. 27 27 Unrestricted net assets 28 Temporarily restricted net assets Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 3,580 33 3,891 3,580 34 3,891. 34 Total liabilities and net assets/fund balances

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Form 990 (2011)

Form 990 (2011) INTERNATIONAL FREIGHT FORWARDERS AND	58-1466324	Page 12
Part XI Reconciliation of Net Assets		
Check if Schedule O contains a response to any question in this Part XI	<u> </u>	
	1 1	
1 Total revenue (must equal Part VIII, column (A), line 12)	1	53,886.
2 Total expenses (must equal Part IX, column (A), line 25)	2	53,575.
3 Revenue less expenses Subtract line 2 from line 1	3	311.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,580.
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	3,891.
Part XII Financial Statements and Reporting		
Check if Schedule O contains a response to any question in this Part XII		
1 Accounting method used to prepare the Form 990. X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		Yes No
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X
b Were the organization's financial statements audited by an independent accountant?		2b X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for overs review, or compilation of its financial statements and selection of an independent accountant?	ight of the audit,	2c X
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ıın	
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year was separate basis, consolidated basis, or both.	ere issued on a	
Separate basis Consolidated basis Both consolidated and separate basis		ES LEW NO.
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?	ı ın the Sıngle	3a X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo or audits, explain why in Schedule O and describe any steps taken to undergo such audits	the required audit	3b
BAA		Form 990 (2011)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

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.

EZ	OHB 110 1343 0047
on .	2011
	Openito Public in Inspections
Employer id	entification number

OMP No. 1645 0047

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

PAGE 1

INTERNATIONAL FREIGHT FORWARDERS AND CUSTOMS HOUSE BROKER ASSOCIATION, INC.

58-1466324

FORM 990, PART IX, LINE 24E OTHER EXPENSES

	_	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) <u>FUNDRAISING</u>
BANK CHARGES CONTRIBUTIONS DUES & SUBSCRIPTIONS GOLF OUTING MEALS & ENTERTAINMENT POSTAGE AND SHIPPING TAXES AND REGISTRATION WEBSITE	TOTAL \$	16. 700. 1,898. 450. 250. 39. 50. 764.	350. 1,898. 450. 125. 20. 25. 382. \$ 3,250.	16. 350. 125. 19. 25. 382. \$ 917.	\$ 0.