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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


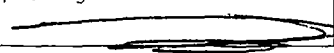
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION CHAPTERS		D Employer identification number 94-2919522
	Doing Business As		E Telephone number (847) 253-1545
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	3701 ALGONQUIN ROAD	1010	
	City or town, state or country, and ZIP + 4 ROLLING MEADOWS, IL 60008		G Gross receipts \$ 3,471,550.
	F Name and address of principal officer SUSAN M. CALDWELL SAME AS C ABOVE		H(a) Is this a group return for affiliates? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No H(b) Are all affiliates included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) ATCH 1
I Tax-exempt status	<input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c)(6) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 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	M State of legal domicile

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities PROVIDE CONTINUING PROFESSIONAL EDUCATION, FACILITATE NETWORKING AND COMMUNITY THROUGH CHAPTER MEETINGS, AND FURTHER PROMOTE AND ELEVATE THE VISIBILITY OF IT GOVERNANCE, SECURITY, AND AUDIT PROFESSIONALS.		
	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	796.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	795.
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	1,168.
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	4,000.	40,610.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,828,322.	3,395,548.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11,575.	9,291.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	85,968.	20,236.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,929,865.	3,465,685.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	97,848.	194,412.
Expenses	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0	0
	16a Professional fundraising fees (Part IX, column (A), line 11e)	2,500.	9,140.
	b Total fundraising expenses (Part IX, column (D), line 25)	0	0
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,652,411.	3,003,007.
	18 Total expenses - add lines 13-17 (must equal Part IX, column (A), line 25)	2,752,759.	3,206,559.
	19 Revenue less expenses Subtract line 18 from line 12	177,106.	259,126.
	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21 Total liabilities (Part X, line 26)	2,760,797.	3,882,135.	
22 Net assets or fund balances Subtract line 21 from line 20	0	8,907.	
		2,760,797.	3,873,228.

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		8 NOV 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 
	Firm's name GRANT THORNTON LLP	Date 11/05/2012
	Firm's address 175 W. JACKSON BLVD. STE 2000 CHICAGO, IL 60604	Check <input type="checkbox"/> if self-employed PTIN P00504182
	Firm's EIN 36-6055558	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)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐ Yes ☒ No**1** Briefly describe the organization's mission.

ATTACHMENT 2

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 ☒ 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 ☒ 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 3

4b (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)**4c** (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)**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 Compliance

Check if Schedule O contains a response to any question in this Part V.

☒ X

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a 20		
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 0		
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?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b		
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?	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		
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 796		
b Enter the number of voting members included in line 1a, above, who are independent. 1b 795		
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?	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?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?	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?	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?	X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?		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.		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?		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?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		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.	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		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.		X
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	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.		X
b Other officers or key employees of the organization.		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?		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?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed. **NONE**

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			
(1) MATT ALTMAN VICE PRESIDENT	1.00	X		X				0	0	0
(2) TOM BENTLEY PRESIDENT	1.00	X		X				0	0	0
(3) ERIC KAEHLER PAST PRESIDENT	1.00	X		X				0	0	0
(4) MEGAN SCHMIDT SECRETARY	2.00	X		X				0	0	0
(5) GARY SHOLLY TREASURER	2.00	X		X				0	0	0
(6) MUKESH ARORA DIRECTOR / TREASURER	6.00	X						0	0	0
(7) PATRICK CATTON DIRECTOR	1.00	X						0	0	0
(8) REID EASTBURN DIRECTOR	1.50	X						0	0	0
(9) STACY GENSLER PRESIDENT / PAST PRESIDENT	10.00	X		X				0	0	0
(10) ROXANNE HALVERSON DIRECTOR	1.00	X						0	0	0
(11) TODD MARCINIK VICE PRESIDENT	2.00	X		X				0	0	0
(12) VICKI MAXWELL-BUSTILLOS TREASURER	7.00	X		X				0	0	0
(13) JEFF PALGON DIRECTOR	3.00	X						0	0	0
(14) ERIC PALMER SECRETARY / VP	4.00	X		X				0	0	0

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) BIJU THOMAS VP/ PRESIDENT	5.00	X		X				0	0	0
(16) VICTORIA TUDOR DIRECTOR	3.00	X						0	0	0
(17) DOMENIC VIENTOS DIRECTOR	1.50	X						0	0	0
(18) KIMBERLY BRADLEY PRESIDENT	5.00	X		X				0	0	0
(19) CARLOS CONTRERAS VICE PRESIDENT OF EDUCATION	2.00	X		X				0	0	0
(20) LARRY A. DOUGLAS TREASURER	2.00	X		X				0	0	0
(21) SHANNON LOLLAR SECRETARY	1.00	X		X				0	0	0
(22) CHARLENE SEVERANCE MEMBERSHIP DIRECTOR	1.00	X		X				0	0	0
(23) TOME' FRAZIER VICE PRESIDENT	5.00	X		X				0	0	0
(24) CONNIE FREELAND PUBLICITY COORDINATOR	5.00	X						0	0	0
(25) CHASIN FREW CERTIFICATION COORDINATOR	8.00	X						0	0	0
1b Sub-total								0	0	0
c Total from continuation sheets to Part VII, Section A								0	0	0
d Total (add lines 1b and 1c)								0	0	0

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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 0		

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			
(26) JARED HENDERSON SECRETARY AND TREASURER	5.00	X		X				0	0	0
(27) ROCHANA LAHIRI WEBMASTER	5.00	X						0	0	0
(28) ANGIE ROBINSON MEMBERSHIP COORDINATOR	5.00	X						0	0	0
(29) MICHELLE SEELING PRESIDENT	10.00	X		X				0	0	0
(30) SLAVA SOTNIKOV PROGRAMS COMMITTEE CHAIR	5.00	X						0	0	0
(31) NATALIE WARE SECRETARY AND TREASURER	5.00	X		X				0	0	0
(32) ROBERT JEFFREY BRATTON PRESIDENT	2.00	X		X				0	0	0
(33) DAVID W. HALL TREASURER	1.80	X		X				0	0	0
(34) YAN-YAN NG VICE PRESIDENT	2.50	X		X				0	0	0
(35) TAMARA L. RANDLE MEETING DIRECTOR	2.00	X						0	0	0
(36) AARON J. SINGLETON SECRETARY	1.50	X		X				0	0	0

1b Sub-total**c Total from continuation sheets to Part VII, Section A****d Total (add lines 1b and 1c)**

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 **0**

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

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

	Yes	No
3		X
4		X
5		X

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

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

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			
(37) NANETTE A. TAYLOR MEMBERSHIP DIRECTOR	1.50	X						0	0	0
(38) DR. JAMES L. WORRELL MEMBERSHIP & ACADEMIC CHAIR	1.00	X						0	0	0
(39) BRADLEY N. YOUNG WEBMASTER. PAST PRESIDENT	1.70	X						0	0	0
(40) BRANT BORCHERT TREASURER	1.60	X		X				0	0	0
(41) DANIEL DECLOSS WEBMASTER	.77	X						0	0	0
(42) DAVID JORGENSEN PREVIOUS NEWSLETTER CHAIR	.30	X						0	0	0
(43) STEVE LEDBETTER PREVIOUS CERTIFICATIONS CHAIR	.15	X						0	0	0
(44) CHRISTINE MARIMAN AUDIT & NOM. CHAIR, NEWSLETTER	1.00	X						0	0	0
(45) ANDREW RICHTER PAST PRESIDENT	.50	X						0	0	0
(46) AMY SHAW MEMBERSHIP CHAIR	1.00	X						0	0	0
(47) VINCE SKINNER CERTIFICATIONS CHAIR	.50	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(48) DAWN TEPLY PRESIDENT	1.00	X		X				0	0	0
(49) TROY TORRES SECRETARY	1.25	X		X				0	0	0
(50) PATRICIA WATSON VICE PRES. AND ACADEMIC REL.	1.25	X		X				0	0	0
(51) ROBYN BARTON SECRETARY	1.50	X		X				0	0	0
(52) IVANA COJBASIC BOARD MEMBER	.35	X						0	0	0
(53) BAYLY ELEY BOARD MEMBER	.35	X						0	0	0
(54) STEVEN KELLER BOARD MEMBER	.35	X						0	0	0
(55) PAUL MONTROSE VICE PRESIDENT	.35	X		X				0	0	0
(56) TANYA MONTROSE BOARD MEMBER	.35	X						0	0	0
(57) AMANDA PRINCE TREASURER	1.50	X		X				0	0	0
(58) CHRISTOPHER RANDLE PRESIDENT	3.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

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

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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(59) KATE ALLEN BOARD MEMBER	2.00	X						0	0	0
(60) BILL BRANNEKY BOARD MEMBER	2.00	X						0	0	0
(61) AUDREY GRAYSON SECRETARY	4.00	X		X				0	0	0
(62) STEVE HELWIG WEBMASTER	2.00	X						0	0	0
(63) SHERRY HILLEY TREASURER	4.00	X		X				0	0	0
(64) JACQUI HOLDER BOARD MEMBER	4.00	X						0	0	0
(65) DON KIMMEL BOARD MEMBER	3.00	X						0	0	0
(66) DONALD SPARKS VICE PRESIDENT	2.00	X		X				0	0	0
(67) TONY VALENTINO PAST PRESIDENT	1.00	X						0	0	0
(68) MICHAEL WALSH PRESIDENT	5.00	X		X				0	0	0
(69) NANCY A. BLACKWELL PRESIDENT	4.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(70) HOLLY COX SECRETARY	2.00	X		X				0	0	0
(71) JONNA GRAMA DIRECTOR	1.00	X						0	0	0
(72) GREG HADRICK DIRECTOR	1.00	X						0	0	0
(73) DENNIS HATTABAUGH PAST PRESIDENT	1.00	X		X				0	0	0
(74) SEAN HISE DIRECTOR	1.00	X						0	0	0
(75) ZHEN LIU DIRECTOR	1.00	X						0	0	0
(76) FRANK NEVERS TREASURER	4.00	X		X				0	0	0
(77) ROB STOUDE VICE PRESIDENT	1.00	X		X				0	0	0
(78) DAVE BENNETT PROGRAM CO-CHAIRPERSON	1.00	X						0	0	0
(79) STEFANO CAIOLA MARKETING CO-CHAIRPERSON	2.00	X						0	0	0
(80) PATRICIA HAMILTON ARRANGEMENTS CHAIRPERSON	3.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(81) SCOTT HIGGINS MARKETING CO-CHAIRPERSON	2.00	X						0	0	0
(82) DAVID HORVATH VICE PRESIDENT	1.00	X		X				0	0	0
(83) AIJAZ HUSSAIN MARKETING CO-CHAIR/ACADEMIC	2.00	X						0	0	0
(84) JAMES KALBAC REGISTRATION COMMITTEE	2.00	X						0	0	0
(85) RYAN KROPFF MEMBERSHIP/PROGRAM CO-CHAIR	2.00	X						0	0	0
(86) WESLEY LEWIS PRESIDENT	3.00	X		X				0	0	0
(87) KELLI MCDONALD ACADEMIC OUTREACH CO-CHAIR	2.00	X						0	0	0
(88) JOANIE MILLER EDUCATION CO-CHAIRPERSON	2.00	X						0	0	0
(89) JOE NEWELL CERTIFICATION COORDINATOR	1.00	X						0	0	0
(90) MEAGAN O'HARA ACADEMIC OUTREACH CO-CHAIR	2.00	X						0	0	0
(91) TANVIR REFAI WEBMASTER	1.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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 0		

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			
(92) LISA SCHENK TREASURER	3.00	X		X				0	0	0
(93) RAY SCURR EDUCATION CO-CHAIRPERSON	2.00	X						0	0	0
(94) JOHN SHUEY SECRETARY/MEMBERSHIP ASST.	2.00	X						0	0	0
(95) SHEELA THIRUVADI ACADEMIC OUTREACH CO-CHAIR	2.00	X						0	0	0
(96) DAN ZIMMERMAN ADVERTISING/RESEARCH/STANDARDS	2.00	X						0	0	0
(97) AMY ZIMMERMAN PROGRAM CO-CHAIRPERSON	2.00	X						0	0	0
(98) GLORIA GIBBON VICE PRESIDENT	2.00	X		X				0	0	0
(99) JIM MACLACHALN TREASURER	2.00	X		X				0	0	0
(100) KATHLEEN WOJSLAW CHAPTER SECRETARY	1.00	X		X				0	0	0
(101) JASON WOOD CHAPTER PRESIDENT	2.00	X		X				0	0	0
(102) ZENNIERE BOWRY BOARD OF DIRECTORS	1.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

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

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 **0**

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			
(103) MICHAEL BRADY TREASURER	2.00	X		X				0	0	0
(104) ERIC EBELING BOARD OF DIRECTORS	1.00	X						0	0	0
(105) WENDI FINN BOARD OF DIRECTORS	1.00	X						0	0	0
(106) SCHLAINE HUTCHINS SECRETARY	2.00	X		X				0	0	0
(107) VINCE JACOMINI BOARD OF DIRECTORS	1.00	X						0	0	0
(108) MICHAEL KIRK BOARD OF DIRECTORS - PAST PRES	1.00	X						0	0	0
(109) ANNIE KOWALESKI BOARD OF DIRECTORS	1.00	X						0	0	0
(110) RICHARD RIDWOOD BOARD OF DIRECTORS	1.00	X						0	0	0
(111) MATTHEW SCHONDEL PRESIDENT	2.00	X		X				0	0	0
(112) CHRIS WATSON VICE PRESIDENT	2.00	X		X				0	0	0
(113) ERIC COLLINS PRESIDENT	3.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

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
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 0		

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			
(114) LACEY COOPER PAST PRESIDENT	.25	X						0	0	0
(115) CARL CRITES PAST PRESIDENT	.25	X						0	0	0
(116) CORY NANCE PAST PRESIDENT	.25	X						0	0	0
(117) STEVE PAYNE TREASURER	3.00	X		X				0	0	0
(118) RAVI SHANKAR VICE PRESIDENT	.50	X		X				0	0	0
(119) JAYASEKAR THIRUMALAI SECRETARY	1.00	X		X				0	0	0
(120) KIESHA BATTLES ACADEMIC RELATIONS COORDINATOR	2.00	X						0	0	0
(121) JACKIE CALDWELL TREASURER	2.00	X		X				0	0	0
(122) STEFANIE CLAY MEMBERSHIP DIRECTOR	2.00	X						0	0	0
(123) RODNEY DAVIS CISM COORDINATOR	2.00	X						0	0	0
(124) MARTHA GERRICK COMMUNICATIONS CHAIR	2.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(125) KEVIN GULLY PROGRAM CHAIR	2.00	X						0	0	0
(126) CYNTHIA HARRIS GENERAL DIRECTOR	2.00	X						0	0	0
(127) RICHARD LARSEN CISA COORDINATOR	2.00	X						0	0	0
(128) SHAHAB NAYYER PRESIDENT	2.00	X		X				0	0	0
(129) CALVIN REEVES SECRETARY	2.00	X		X				0	0	0
(130) MARCELA SANCHEZ EVENT MANAGEMENT CHAIR	2.00	X						0	0	0
(131) CHERYL SMITH VICE PRESIDENT	2.00	X		X				0	0	0
(132) ROBERT SNODGRASS WEBMASTER	2.00	X						0	0	0
(133) MIKE WALLER ACADEMIC RELATIONS COORDINATOR	2.00	X						0	0	0
(134) DAVID BAKER CERTIFICATION DIRECTOR	2.00	X						0	0	0
(135) MAMERTO BLANCAFLOR AUDIT DIRECTOR	1.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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 0		

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			
(136) HORST BRUNNER MEDIA DIRECTOR	1.00	X						0	0	0
(137) TIM DEMAS PROGRAM DIRECTOR	3.00	X						0	0	0
(138) JIM ENSTROM VICE PRESIDENT	5.00	X		X				0	0	0
(139) TOM HUMBERT PROGRAM DIRECTOR	3.00	X						0	0	0
(140) BERNIE KIENSTRA SECRETARY	5.00	X		X				0	0	0
(141) MICHAEL KRUTZSCH PROGRAM DIRECTOR	1.00	X						0	0	0
(142) FRANCINE MCKENNA IMMEDIATE PAST PRESIDENT	1.00	X						0	0	0
(143) DOUG OCHAB MEDIA DIRECTOR	3.00	X						0	0	0
(144) BOB PARDON SEMINAR DIRECTOR	1.00	X						0	0	0
(145) AARON PARKS PRESIDENT	5.00	X		X				0	0	0
(146) MICHAEL PODEMSKI MEDIA DIRECTOR	3.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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 0		

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			
(147) MIKE RUSSELL MEETINGS DIRECTOR	1.00	X						0	0	0
(148) MATT RUSSO MEETINGS DIRECTOR	1.00	X						0	0	0
(149) KEN SCHMIDT MEMBERSHIP DIRECTOR	3.00	X						0	0	0
(150) NORM SPIELMAN SEMINAR DIRECTOR	1.00	X						0	0	0
(151) DEBBIE WASEMANN MEETINGS DIRECTOR	1.00	X						0	0	0
(152) VESELA ZLATEVA TREASURER	5.00	X		X				0	0	0
(153) BRENNAN BAYBECK CHAIRMAN OF THE BOARD	2.00	X		X				0	0	0
(154) MARK GENGOZIAN CISA COORDINATOR	3.00	X						0	0	0
(155) KOUSHIK KUMARASWAMY CGEIT COORDINATOR	3.00	X						0	0	0
(156) RICK LUCY VICE PRESIDENT - EDUCATION	5.00	X		X				0	0	0
(157) DON MAPES TREASURER	6.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

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

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

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			
(158) TIM MCCAIN SECRETARY	5.00	X		X				0	0	0
(159) SCOTT PEYTON VICE PRESIDENT - MEMBERSHIP	4.00	X		X				0	0	0
(160) RAM RAMADOSS EXECUTIVE VICE PRESIDENT	6.00	X		X				0	0	0
(161) MATT RANDOLPH PRESIDENT	6.00	X		X				0	0	0
(162) DAVID VOS CISM COORDINATOR	3.00	X						0	0	0
(163) RHONDA WILLERT ACADEMIC RELATIONS COORDINATOR	3.00	X						0	0	0
(164) ED BARSZCZ DIRECTOR (PAST PRESIDENT)	1.00	X						0	0	0
(165) GREG BOEHMER DIRECTOR	1.00	X						0	0	0
(166) DERRICK BUCKINGHAM DIRECTOR	1.00	X						0	0	0
(167) MICHAEL FORREST DIRECTOR	1.00	X						0	0	0
(168) MICHELE HAROON VICE PRESIDENT	2.00	X		X				0	0	0

1b Sub-total**c** Total from continuation sheets to Part VII, Section A**d** Total (add lines 1b and 1c)**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

0

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

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

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			
(169) M. SIOBHAN JORDAN PRESIDENT	3.00	X		X				0	0	0
(170) BRENDA KARL DIRECTOR	1.00	X						0	0	0
(171) RICHARD MORRIS DIRECTOR	1.00	X						0	0	0
(172) ROBERT OKOPNY DIRECTOR	1.00	X						0	0	0
(173) BRADLEY PARTON DIRECTOR	1.00	X						0	0	0
(174) RAJ PATEL DIRECTOR	1.00	X						0	0	0
(175) BRANDY PFEIFFER DIRECTOR	1.00	X						0	0	0
(176) SAJAI RAI DIRECTOR	1.00	X						0	0	0
(177) JAMSHID SADAGHIYANI DIRECTOR (PAST PRESIDENT)	1.00	X						0	0	0
(178) CARRIE SCHRADER DIRECTOR (PAST PRESIDENT)	1.00	X						0	0	0
(179) CHARLES SILVA DIRECTOR	1.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

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

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

	Yes	No
3		X
4		X
5		X

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
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 0		

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			
(180) JASON THOMPSON SECRETARY	2.00	X		X				0	0	0
(181) DOUGLAS WAHR DIRECTOR (PAST PRESIDENT)	1.00	X						0	0	0
(182) JAMES WATSON DIRECTOR	1.00	X						0	0	0
(183) SUSAN YAMIN DIRECTOR (PAST PRESIDENT)	1.00	X						0	0	0
(184) MANISH ZAVERI TREASURER	3.00	X		X				0	0	0
(185) BRANDON CAREY AVP-PROGRAMS COMMITTEE	1.00	X						0	0	0
(186) ROSALYN ELLIS AVP-PROGRAMS COMMITTEE	1.00	X						0	0	0
(187) JESSE HANFORD VP - PROGRAMS	1.00	X		X				0	0	0
(188) TOM HARROW IMMEDIATE PAST PRESIDENT	1.00	X						0	0	0
(189) JUSTIN HEDRIC VP - PROFESSIONAL DEVELOPMENT	1.00	X		X				0	0	0
(190) HOLLY JOHNSON AVP - PROFESSIONAL DEVELOPMENT	1.00	X						0	0	0

1b Sub-total**c Total from continuation sheets to Part VII, Section A****d Total (add lines 1b and 1c)**

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 **0**

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

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

	Yes	No
3		X
4		X
5		X

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

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

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			
(191) RUSSELL KRICK PRESIDENT	2.00	X		X				0	0	0
(192) JOE LAIRSON AVP - PROFESSIONAL DEVELOPMENT	1.00	X						0	0	0
(193) ADAM LEIGH SECRETARY	1.00	X		X				0	0	0
(194) JEFF MERHOUT ACADEMIC ADVOCATE	.50	X						0	0	0
(195) LANCE MURRAY DIRECTOR	.50	X						0	0	0
(196) DARRIN MURRINER DIRECTOR	.50	X						0	0	0
(197) KIM NELSON MARKETING COORDINATOR	1.00	X						0	0	0
(198) TIFFANY RINGENBACH UNIVERSITY LIAISON	.50	X						0	0	0
(199) ANDREW SELIG WEBMASTER	1.00	X						0	0	0
(200) MIKE SMITH VP - MEMBERSHIP	1.00	X		X				0	0	0
(201) BUKY THORPE NEWSLETTER EDITOR	1.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

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

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 **0**

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			
(202) LEI ZHAO TREASURER	3.50	X		X				0	0	0
(203) JAY ADAMS PRESIDENT	10.00	X		X				0	0	0
(204) AMIR AMIRTHALINGAM BOARD MEMBER AT LARGE	2.00	X						0	0	0
(205) RON BIEDRYCKI BOARD MEMBER AT LARGE	2.00	X						0	0	0
(206) JIM BRISLIN BOARD MEMBER AT LARGE	2.00	X						0	0	0
(207) SCOTT ESPOSITO BOARD MEMBER/ TREASURER	5.00	X						0	0	0
(208) JAY FERRON BOARD MEMBER AT LARGE	2.00	X						0	0	0
(209) TODD HAFFNER BOARD MEMBER AT LARGE	2.00	X						0	0	0
(210) DAN HIGHAM VP FOR PROGRAMS	5.00	X		X				0	0	0
(211) MICHELE KAPLAN PAST PRESIDENT	2.00	X		X				0	0	0
(212) TOM MCGRATH BOARD MEMBER AT LARGE	2.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(213) KARL SCHOEN-RENE SECRETARY	5.00	X		X				0	0	0
(214) KAREN STONE TREASURER	5.00	X		X				0	0	0
(215) DIANE WYNNE BOARD MEMBER AT LARGE	2.00	X						0	0	0
(216) NORMAN COMSTOCK VICE PRESIDENT	2.00	X		X				0	0	0
(217) ASHISH GUPTA TREASURER	3.00	X		X				0	0	0
(218) MARY HALL SECRETARY	3.00	X		X				0	0	0
(219) MEL MCQUARY AUDIT COMMITTEE HEAD	3.00	X						0	0	0
(220) HARVEY NUSZ PROGRAM MANAGER	3.00	X						0	0	0
(221) MIKE SIRAJ PRESIDENT	3.00	X		X				0	0	0
(222) KEVAN BREWER DIRECTOR	1.00	X						0	0	0
(223) MOLLY COPLEN SECRETARY	1.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

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

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

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			
(224) WENDY DOBRATZ VICE PRESIDENT	1.00	X		X				0	0	0
(225) JENNIFER HARPER DIRECTOR	1.00	X						0	0	0
(226) ALFIE MAHMOUD DIRECTOR	1.00	X						0	0	0
(227) BJ SMITH PRESIDENT	2.00	X		X				0	0	0
(228) MATT SUOZZO TREASURER	3.00	X		X				0	0	0
(229) DAVID ALEXANDER MARKETING DIRECTOR	1.00	X						0	0	0
(230) LUIS ESTRADA SECRETARY	1.00	X		X				0	0	0
(231) LYDIA LOURBACOS MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(232) JOHN POUEY PRESIDENT	4.00	X		X				0	0	0
(233) JOHN ROME CERTIFICATION COORDINATOR	1.00	X						0	0	0
(234) DAN STOCKER WEBMASTER	1.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(235) TONI VERRET TREASURER	2.00	X		X				0	0	0
(236) JEFFREY WAGAR VICE PRESIDENT	4.00	X		X				0	0	0
(237) LACEY HALLOWELL ARRANGEMENTS DIRECTOR	2.00	X						0	0	0
(238) MEGAN KEYS WEBMASTER	1.00	X						0	0	0
(239) KARL KROHN EDUCATION DIRECTOR	2.00	X						0	0	0
(240) PATTI LOCKE SECRETARY	.50	X		X				0	0	0
(241) SCOTT MOODY MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(242) CHRISTINE RODGERS CHAPTER PRESIDENT	2.00	X		X				0	0	0
(243) STANLEY SEIDERS CERTIFICATIONS DIRECTOR	.50	X						0	0	0
(244) JENNIFER WALKER TREASURER	2.00	X		X				0	0	0
(245) DOUG WISE (1/1/11 - 11/25/11) TREASURER	2.00	X		X				0	0	0

1b Sub-total**c Total from continuation sheets to Part VII, Section A****d Total (add lines 1b and 1c)**

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 **0**

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

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 **0**

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			
(246) VINCENT CHAN PROGRAM DIRECTOR	1.00	X						0	0	0
(247) MARK CURNOW VICE PRESIDENT	1.50	X		X				0	0	0
(248) JOSEF FUKANO PRESIDENT	1.50	X		X				0	0	0
(249) ELDEN HAMADA MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(250) GARY KAHN ACADEMIC RELATIONS CHAIR	1.00	X						0	0	0
(251) ADDIE LUI CISA/CISM COORDINATOR	1.00	X						0	0	0
(252) JENNIFER PRZYGODZINSKI SEMINAR DIRECTOR	1.00	X						0	0	0
(253) SAM SOK WEBMASTER	1.00	X						0	0	0
(254) MATTHEW TSUTSUMI TREASURER	1.50	X		X				0	0	0
(255) HOWARD VAN DE VAARST NEWSLETTER EDITOR	1.00	X						0	0	0
(256) DEBRA VELA HOSPITALITY DIRECTOR	1.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

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

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 **0**

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			
(257) SANG YONG PAE SECRETARY	1.00	X		X				0	0	0
(258) SEAN ATKINSON NEWSLETTER EDITOR	4.00	X						0	0	0
(259) BRENDA CARVER PAST PRESIDENT	4.00	X						0	0	0
(260) JIM DAVIDSON PRESIDENT ELECT	4.00	X		X				0	0	0
(261) KELLY GARDINEER WEBMASTER	4.00	X						0	0	0
(262) REGINALD HARNISH VP EDUCATION	4.00	X		X				0	0	0
(263) LYNN HUMISTON STUDENT LIAISON	4.00	X						0	0	0
(264) RANDY MARSICAANO DIRECTOR OF AWARDS	4.00	X						0	0	0
(265) PAM MATTHEWS VP MEMBERSHIP	4.00	X		X				0	0	0
(266) BERNIE MCHUGH SECRETARY	4.00	X		X				0	0	0
(267) WES MORE VP PUBLICITY	4.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(268) WENDY NELSON TCTC COORDINATOR	4.00	X						0	0	0
(269) TED PHELPS CERTIFICATION COORDINATION	4.00	X						0	0	0
(270) BRENDAN SCHAEFER PRESIDENT	4.00	X		X				0	0	0
(271) BOB SCHWIND VP PROGRAMS	4.00	X		X				0	0	0
(272) RICH THOMAS TREASURER	4.00	X		X				0	0	0
(273) J BRADLEY BOROFF TREASURER	3.00	X		X				0	0	0
(274) ANDREW CRIST VICE PRESIDENT	1.00	X		X				0	0	0
(275) GENE FRUIT PAST PRESIDENT	.50	X						0	0	0
(276) BRAD GRAY BOARD MEMBER	.50	X						0	0	0
(277) DOUGLAS HATHHORN SECRETARY	.50	X		X				0	0	0
(278) JARED ROSS PRESIDENT	2.00	X		X				0	0	0

1b Sub-total ▶**c Total from continuation sheets to Part VII, Section A** ▶**d Total (add lines 1b and 1c)** ▶**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 ▶ 0**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

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 ▶

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			
(279) SEAN SCRANTON BOARD MEMBER	.50	X						0	0	0
(280) MICHAEL ZACHMAN BOARD MEMBER	.50	X						0	0	0
(281) JOSHUA CONNORS TREASURER	2.00	X		X				0	0	0
(282) JULIE HUPP VICE PRESIDENT	2.00	X		X				0	0	0
(283) TERRY WHALEY PRESIDENT	2.00	X		X				0	0	0
(284) PAUL CROSTHWAITE COMMUNICATIONS	.40	X						0	0	0
(285) DAN DENNIS VICE PRESIDENT	.40	X		X				0	0	0
(286) TANYA DESMOND SECRETARY	.40	X		X				0	0	0
(287) JON EICHORN PROGRAMS	.40	X						0	0	0
(288) EVAN FAHEY NOMINATIONS	.40	X						0	0	0
(289) PILAR HILST EDUCATION	.40	X						0	0	0

1b Sub-total ▶**c Total from continuation sheets to Part VII, Section A** ▶**d Total (add lines 1b and 1c)** ▶**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 ▶ 0**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**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

Yes No

3 X

4 X

5 X

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

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 ▶

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			
(290) ALEK ISMAYILOV PRESIDENT	.40	X		X				0	0	0
(291) RYAN KEEHN TREASURER	.40	X		X				0	0	0
(292) SAM KOLLATH AUDITOR	.40	X						0	0	0
(293) SHIRLEY WEUVE MEMBERSHIP	.40	X		X				0	0	0
(294) VICTORIA BISCHOF PRESIDENT	10.00	X		X				0	0	0
(295) WILLIAM CROWE SECRETARY	5.00	X		X				0	0	0
(296) LESLIE DEPPE HOSPITALITY DIRECTOR	5.00	X						0	0	0
(297) SHERRY DOUB TREASURER	1.00	X		X				0	0	0
(298) BOB GARDNER AT LARGE DIRECTOR	.35	X						0	0	0
(299) VICKIE GATEWOOD EDUCATION CHAIR	5.00	X						0	0	0
(300) ALYA GENNARO AT LARGE DIRECTOR	.35	X						0	0	0

1b Sub-total**c Total from continuation sheets to Part VII, Section A****d Total (add lines 1b and 1c)****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 0**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

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

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			
(301) GARY GREENEWALT VICE PRESIDENT	5.00	X		X				0	0	0
(302) HIRAM MARTINEZ MEMBERSHIP DIRECTOR	.35	X						0	0	0
(303) TIMOTHY MCALILEY CERTIFICATION DIRECTOR	.35	X						0	0	0
(304) KENNETH PROUDFOOT IMMEDIATE PAST PRESIDENT	.35	X						0	0	0
(305) MARK ROBINSON AT LARGE DIRECTOR	.35	X						0	0	0
(306) TOMMY ABRAHAM VP CERTIFICATIONS	4.00	X		X				0	0	0
(307) MICHAEL GARR VP COMMUNICATIONS	4.00	X		X				0	0	0
(308) CHRIS GIDA VP MEMBERSHIP	4.00	X		X				0	0	0
(309) MITCH GREENFIELD PRESIDENT	8.00	X		X				0	0	0
(310) LISA HOLDEN VP PROFESSIONAL RELATIONS	4.00	X		X				0	0	0
(311) BRIAN JACKSON VP PROGRAMMING	4.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(312) COREY JOHNSON VP PROGRAMMING	4.00	X		X				0	0	0
(313) CHUCK KIEFER VP PROGRAMMING	4.00	X		X				0	0	0
(314) SCOTT MACARTHUR VP COMMUNICATIONS	4.00	X		X				0	0	0
(315) AMANDA PERRY SECRETARY & TREASURER	4.00	X		X				0	0	0
(316) ANGELA WALLACE VP PROFESSIONAL RELATIONS	4.00	X		X				0	0	0
(317) MEGAN CHRISTMAN SECRETARY	2.00	X		X				0	0	0
(318) DINA DRINKUS MEMBERSHIP DIRECTOR	4.00	X						0	0	0
(319) RICHARD JANEZIC MARKETING DIRECTOR	2.00	X						0	0	0
(320) MATT JOHNSON VICE PRESIDENT	2.00	X		X				0	0	0
(321) LYNN MILNER PRESIDENT	8.00	X		X				0	0	0
(322) JON STERNBERG CERTIFICATION DIRECTOR	.50	X						0	0	0

1b Sub-total**c Total from continuation sheets to Part VII, Section A****d Total (add lines 1b and 1c)****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 **0****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**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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(323) JANET TARA WISDORF TREASURER	3.00	X		X				0	0	0
(324) ROBERT BARNES PRESIDENT	2.00	X		X				0	0	0
(325) TUG GOKAYDIN CISA COORDINATOR	.25	X						0	0	0
(326) CRAIG MCCORMICK VICE PRESIDENT	.50	X		X				0	0	0
(327) DERRICK MCCOY MEMBERSHIP DIRECTOR	.25	X						0	0	0
(328) HANK POVINELLI PAST PRESIDENT	.25	X						0	0	0
(329) JOE SANTILLI CISM COORDINATOR	.25	X						0	0	0
(330) GEORGE SCHNEIDER CONTENT AUTHOR	.50	X						0	0	0
(331) JOHN SOUZA SECRETARY/TREASURER	.25	X		X				0	0	0
(332) TERRY TOBIAS PROGRAM CHAIR	.50	X						0	0	0
(333) CHARLIE BLANCHARD DIRECTOR	3.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(334) LARRY HANSON DIRECTOR	10.00	X						0	0	0
(335) LEON KASPERSKY SECRETARY	7.00	X		X				0	0	0
(336) LISA KINYON DIRECTOR	14.00	X						0	0	0
(337) KAREN NORTON TREASURER	14.00	X		X				0	0	0
(338) THOMAS PHELPS IV DIRECTOR	7.00	X						0	0	0
(339) MARTIN ROJAS DIRECTOR	7.00	X						0	0	0
(340) CHERYL SANTOR DIRECTOR	7.00	X						0	0	0
(341) KENDRICK TSE VICE PRESIDENT	7.00	X		X				0	0	0
(342) MIGUEL VILLEGAS PRESIDENT	7.00	X		X				0	0	0
(343) AMANDA XU DIRECTOR	7.00	X						0	0	0
(344) KAREN FARNHAM VP PROGRAMS	1.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(345) PAULA MCLAIN VICE PRESIDENT	1.50	X		X				0	0	0
(346) ROBERT MOULDER VP COMMUNICATION	3.00	X		X				0	0	0
(347) KEITH RICHARDSON SECRETARY	1.00	X		X				0	0	0
(348) ANGELA ROSS VP PROGRAMS	1.00	X		X				0	0	0
(349) SUSAN ROSS PRESIDENT/ TREASURER	5.00	X		X				0	0	0
(350) JACOB ARTHUR TREASURER	2.00	X		X				0	0	0
(351) MATTHEW EDMAN PRESIDENT	2.00	X		X				0	0	0
(352) KEVIN GROOM VICE PRESIDENT	2.00	X		X				0	0	0
(353) JAMES HLAVATI PAST PRESIDENT	2.00	X						0	0	0
(354) JOSHUA LEWIS WEBMASTER	2.00	X						0	0	0
(355) KRISTI MEYER MARKETING DIRECTOR	2.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(356) JULIE MYERS MEMBERSHIP DIRECTOR	2.00	X						0	0	0
(357) AHMAD SABBARINI CERTIFICATION DIRECTOR	2.00	X						0	0	0
(358) LAURA SHIVER SECRETARY	2.00	X		X				0	0	0
(359) REGGIE ABRAHAM ACADEMIC RELATIONS VP	2.00	X		X				0	0	0
(360) STEPHEN CASPER VICE PRESIDENT	3.00	X		X				0	0	0
(361) LINDA DAWSON SECRETARY	2.00	X		X				0	0	0
(362) MATT HYNES DIRECTOR	1.00	X						0	0	0
(363) JOHN JASINSKI ADMINISTRATION & MEMBERSHIP VP	3.00	X		X				0	0	0
(364) JORDAN SERRE ROUNDTABLES VP	2.00	X		X				0	0	0
(365) RICHARD SPIEKER TREASURER	1.00	X		X				0	0	0
(366) KIM STULL EDUCATION VP	2.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

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

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

	Yes	No
3		X
4		X
5		X

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

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

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			
(367) THOMAS TISTHAMMER DIRECTOR	1.00	X						0	0	0
(368) JEFFREY VERSTEEG PRESIDENT	2.00	X		X				0	0	0
(369) ELIZABETH WAGNER COMMUNICATIONS VP	2.00	X		X				0	0	0
(370) MICHAEL WILM DIRECTOR	1.00	X						0	0	0
(371) RON BURFORD TREASURER/PAST PRESIDENT	2.00	X		X				0	0	0
(372) GORDON CRAIG SECRETARY	1.00	X		X				0	0	0
(373) DC GRANT PRESIDENT	2.00	X		X				0	0	0
(374) KRISHNA MANDAVA VICE PRESIDENT	3.00	X		X				0	0	0
(375) DAN SPEIGLE GOVERNING BODY MEMBER	.50	X						0	0	0
(376) SARAH ABEDIN SECRETARY	2.00	X		X				0	0	0
(377) SAM ARTHUR CO-DIRECTOR CRISC REVIEW	1.00	X						0	0	0

1b Sub-total**c Total from continuation sheets to Part VII, Section A****d Total (add lines 1b and 1c)****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 **0****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 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

	Yes	No
4		X

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

	Yes	No
5		X

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

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 **0**

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			
(378) MELODY BALCET CISM REVIEW COORDINATOR	2.00	X						0	0	0
(379) PHILLIP CROSBY SPONSORSHIP PROG COORDINATOR	1.00	X						0	0	0
(380) STEWART DALEY MARKETING COORDINATOR	3.00	X						0	0	0
(381) ESTHER FISCHER ARCHIVIST COORDINATOR	1.00	X						0	0	0
(382) KYLE FOLEY PRESIDENT	4.00	X		X				0	0	0
(383) MICKEY GANDHI CGEIT REVIEW COORDINATOR	1.00	X						0	0	0
(384) THERESA GRAFENSTINE PAST PRESIDENT	1.00	X						0	0	0
(385) FRANK GREENWELL BUDGET COORDINATOR	2.00	X						0	0	0
(386) ROSEY GREER DOD LIAISON COORDINATOR	1.00	X						0	0	0
(387) DAN HILL CO-DIRECTOR CRISC REVIEW	1.00	X						0	0	0
(388) DANIELLE HOLLOMON TREASURER	8.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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		

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			
(389) MIKE HOWARD WEBMASTER	5.00	X						0	0	0
(390) BEN HSIAO SPECIAL SEMINARS COORDINATOR	3.00	X						0	0	0
(391) BJ JAMES SPECIAL SEMINARS COORDINATOR	2.00	X						0	0	0
(392) REJIVE JOSEPH CO-DIRECTOR LIAISON PROF. ORGS	1.00	X						0	0	0
(393) ALOK KAKKER MONTHLY SEMINARS-BOARD MEMBER	2.00	X						0	0	0
(394) AMANDEEP LAMBA EVENT COORDINATOR	3.00	X						0	0	0
(395) WERNER LIPPUNER CO-DIRECTOR EVENT COORDINATOR	1.00	X						0	0	0
(396) NOEL NAZARIO ACADEMIC RELATIONS COORDINATOR	1.00	X						0	0	0
(397) VANESSA NELSON AUDIT COORDINATOR	.75	X						0	0	0
(398) FERNANDO NIKITIN RESEARCH DIRECTOR	1.00	X						0	0	0
(399) CLIFTON PERSAUD CISA REVIEW COORDINATOR	2.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(400) CHARLEY ROBERTS CO-DIRECTOR MEMBERSHIP	1.00	X						0	0	0
(401) YEHUDA SCHMIDT ANNUAL MEETING COORDINATOR	2.00	X						0	0	0
(402) SUSAN SHARP CO-DIRECTOR LIAISON PROF. ORGS	2.00	X						0	0	0
(403) KEVIN SUDY NEWSLETTER COORDINATOR	.25	X						0	0	0
(404) ANH TRAN VICE PRESIDENT	2.50	X		X				0	0	0
(405) EBERECHI UGWU ACADEMIC RELATIONS COORDINATOR	1.00	X						0	0	0
(406) BRIAN CASTAGNA ACADEMIC RELATIONS	2.00	X		X				0	0	0
(407) MARTIN DOLPHIN IMMEDIATE PAST PRESIDENT	4.00	X		X				0	0	0
(408) MARK DUDAS MARKETING	2.00	X		X				0	0	0
(409) ERICA HAGUE-ANTOS MEMBERSHIP	1.00	X		X				0	0	0
(410) KRYSTAL PEDERSEN PROGRAM DIRECTOR	6.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(411) SATYENDRA THAKUR CERTIFICATION DIRECTOR	2.00	X		X				0	0	0
(412) BEVERLY M. AUSTIN DIRECTOR	5.00	X						0	0	0
(413) YOLANDA BAKER VICE PRESIDENT	5.00	X		X				0	0	0
(414) RUSTOM BHOPTI DIRECTOR	5.00	X						0	0	0
(415) CARY BROWN DIRECTOR	5.00	X						0	0	0
(416) KARL E. DAHLBERG DIRECTOR	5.00	X						0	0	0
(417) BILL D'ALIA DIRECTOR	5.00	X						0	0	0
(418) JOANNE DE PALMA DIRECTOR	5.00	X						0	0	0
(419) DOUGLAS J. DI PERSIO DIRECTOR	5.00	X						0	0	0
(420) ANDREW ELLSWEIG DIRECTOR	5.00	X						0	0	0
(421) BETH FLORES-MANLAPIG DIRECTOR	5.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

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

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 **0**

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			
(422) DOROTHY GUO SECRETARY	5.00	X		X				0	0	0
(423) MARIE IVANOV DIRECTOR	5.00	X						0	0	0
(424) DONALD LIAO TREASURER	5.00	X		X				0	0	0
(425) GEORGE G. MCBRIDE DIRECTOR	5.00	X						0	0	0
(426) TOM MCDERMOTT DIRECTOR	5.00	X						0	0	0
(427) ANANT NAGANATHAN DIRECTOR	5.00	X						0	0	0
(428) CARL H. PHILLIPS DIRECTOR	5.00	X						0	0	0
(429) JEFFREY S. SAFFER DIRECTOR	5.00	X						0	0	0
(430) LILY SHUE DIRECTOR	5.00	X						0	0	0
(431) JENNIFER LYNN SPIEWAK PRESIDENT	5.00	X		X				0	0	0
(432) MIZBA TAWA DIRECTOR	5.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(433) THOMAS ZACHARIAH DIRECTOR	5.00	X						0	0	0
(434) GUS GALVES SECRETARY AND MEMBERSHIP	.50	X		X				0	0	0
(435) DAVID GRISHAM ACADEMIC RELATIONS COORDINATOR	.50	X						0	0	0
(436) ALAN GUTOWSKI PAST PRESIDENT	.50	X						0	0	0
(437) LISA A. KERR CISA/CISM COORDINATOR	.50	X						0	0	0
(438) ALLEN LEATHERWOOD PRESIDENT	1.00	X		X				0	0	0
(439) JAIME RUMBAOA TREASURER	1.00	X		X				0	0	0
(440) LISA WAUNKA WEBMASTER	.50	X						0	0	0
(441) LEW WITZ VICE PRESIDENT	.50	X		X				0	0	0
(442) ALEXANDER ABRAMOV BOARD MEMBER	2.00	X						0	0	0
(443) JAMES AMBROSINI CHAPTER PRESIDENT	16.00	X		X				0	0	0

1b Sub-total

c Total from continuation sheets to Part VII, Section A

d Total (add lines 1b and 1c)

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

0

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

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

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			
(444) EMMA ARAKELYAN BOARD MEMBER	2.00	X						0	0	0
(445) CLIVE BLACKWOOD BOARD MEMBER	2.00	X						0	0	0
(446) ROCHELLE BRENNER BOARD MEMBER	2.00	X						0	0	0
(447) TON CHOOKHARE BOARD MEMBER	2.00	X						0	0	0
(448) ANTHONY D'AMATO BOARD MEMBER	2.00	X						0	0	0
(449) KEVIN FULLER BOARD MEMBER	2.00	X						0	0	0
(450) NIGEL JAMES 2ND VICE PRESIDENT	16.00	X		X				0	0	0
(451) ALEXANDAR JOSEPHITE 1ST VICE PRESIDENT	16.00	X		X				0	0	0
(452) PATRICIA MARTIN BOARD MEMBER	2.00	X						0	0	0
(453) MARGUERITE MCCARTHY BOARD MEMBER	2.00	X						0	0	0
(454) VOULA MUCKALLI BOARD MEMBER	2.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(455) JAMES POWERS BOARD MEMBER	2.00	X						0	0	0
(456) KAREN RAWLS BOARD MEMBER	2.00	X						0	0	0
(457) RAISA SEREBRENIK BOARD MEMBER	2.00	X						0	0	0
(458) KWONGMEI TO BOARD MEMBER	2.00	X						0	0	0
(459) CHRISTOPHER WESTERMAN RECORDING SECRETARY	2.00	X		X				0	0	0
(460) JULIANNE WU CHAPTER TREASURER	4.00	X		X				0	0	0
(461) RICHARD ZIEGLER CORRESPONDING SECRETARY	4.00	X		X				0	0	0
(462) TONY AGUILAR WEBSITE ADMINISTRATOR I	2.00	X						0	0	0
(463) CAROL BARKE RESERVATIONS COORDINATOR	2.00	X						0	0	0
(464) LISA BARTSCH EDUCATION COORDINATOR I	2.00	X						0	0	0
(465) DANNY DANIELS ASST. TREASURER	2.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(466) LAURIE FLANDRAU VP MEMBERSHIP	3.00	X		X				0	0	0
(467) BRITTANY GEORGE HOSPITALITY COORDINATOR	2.00	X						0	0	0
(468) CLIFFORD GOMES VP FACILITIES	3.00	X		X				0	0	0
(469) DOUG GORRIE VP COMMUNICATIONS	3.00	X		X				0	0	0
(470) AHMED JESSA DIRECTOR OF ACADEMIC RELATIONS	2.00	X						0	0	0
(471) ANGEL JONES MARKETING COORDINATOR	2.00	X						0	0	0
(472) CHRIS JORDAN TREASURER	3.00	X		X				0	0	0
(473) JEFF KROMER WEBSITE WEBMASTER	2.00	X						0	0	0
(474) RICK LINK 2ND PAST PRESIDENT	3.00	X						0	0	0
(475) LETTY MAYS WEBSITE ADMINISTRATOR II	2.00	X						0	0	0
(476) CHERYL MCKAY-DORRELL 3RD PAST PRESIDENT	3.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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 0		

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			
(477) JOE MCKEMAN JOBS COORDINATOR	2.00	X						0	0	0
(478) RICK NIETUBICZ VP PROGRAMS	3.00	X		X				0	0	0
(479) SUE PAGEL 1ST PAST PRESIDENT	3.00	X						0	0	0
(480) NEHA PATEL EDUCATION COORDINATOR II	2.00	X						0	0	0
(481) SHAMMY RANA SECRETARY	3.00	X		X				0	0	0
(482) BARRY RAVEN CERTIFICATIONS COORDINATOR I	2.00	X						0	0	0
(483) MARVIN READER PRESIDENT	6.00	X		X				0	0	0
(484) MATTHEW SMITH NEWSLETTER COORDINATOR	2.00	X						0	0	0
(485) GREG STREDE VP EDUCATION	3.00	X		X				0	0	0
(486) VIRGINIA SUMRALL CHAPTER PHOTOGRAPHER	2.00	X						0	0	0
(487) IDDAH WANGONDU VP CERTIFICATION	3.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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 0		

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			
(488) KYLE WESS PROGRAM COORDINATOR	2.00	X						0	0	0
(489) DAISY ZHENG CPE COMPLIANCE COORDINATOR	2.00	X						0	0	0
(490) JIM DEDAD BOARD MEMBER	1.00	X						0	0	0
(491) KAREN DOUBRAVA BOARD MEMBER	1.00	X						0	0	0
(492) DAMON HACKER PROGRAMS COORDINATOR	2.00	X						0	0	0
(493) DAVID HADLEY BOARD MEMBER	1.00	X						0	0	0
(494) DAN LEO BOARD MEMBER	1.00	X						0	0	0
(495) JENNIFER MORGAN PRESIDENT	2.00	X		X				0	0	0
(496) TRAVIS MOSER SECRETARY	1.00	X		X				0	0	0
(497) JEFF PERSHING VICE PRESIDENT	1.00	X		X				0	0	0
(498) LISA PETERSON TREASURER	2.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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

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			
(499) PASCAL BIZARRO TREASURER	2.00	X		X				0	0	0
(500) KRISTINA BUCKMASTER BOARD MEMBER	1.00	X						0	0	0
(501) DOUG CRAIL SECRETARY	2.00	X		X				0	0	0
(502) DAVID CUTRI BOARD MEMBER	1.00	X						0	0	0
(503) MICHAEL GERBER PRESIDENT	2.00	X		X				0	0	0
(504) ANNA HARLESS BOARD MEMBER	1.00	X						0	0	0
(505) MEAGAN HERMES BOARD MEMBER	1.00	X						0	0	0
(506) MATT HOVERMAN BOARD MEMBER	1.00	X						0	0	0
(507) ALAN LORD VICE PRESIDENT	2.00	X		X				0	0	0
(508) STEPHEN MOHR BOARD MEMBER	1.00	X						0	0	0
(509) MATT PRESTON BOARD MEMBER	1.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(510) JULIO RAMIREZ BOARD MEMBER	1.00	X						0	0	0
(511) LAURIE RYAN IMMEDIATE PAST PRESIDENT	1.00	X		X				0	0	0
(512) CATHERINE SCHMIDT BOARD MEMBER	1.00	X						0	0	0
(513) ANTHONY WILSON BOARD MEMBER	1.00	X						0	0	0
(514) JOE GLAB WEBMASTER	2.00	X						0	0	0
(515) DAVID M. MEDEIROS VICE PRESIDENT	5.00	X		X				0	0	0
(516) PATRICK MILLER PROGRAM CHAIR	2.00	X						0	0	0
(517) SCOTT M. SHINNERS PRESIDENT	5.00	X		X				0	0	0
(518) JOHN C. VYHLIDAL SECRETARY/TREASURER	5.00	X		X				0	0	0
(519) TRENT WILLIAMS ACADEMIC ADVISOR	2.00	X						0	0	0
(520) DAVID BARTON PRESIDENT (JULY 11-DEC 11)	1.00	X		X				0	0	0

1b Sub-total**c Total from continuation sheets to Part VII, Section A****d Total (add lines 1b and 1c)**

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 **0**

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

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 **0**

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			
(521) DAVID BARTON VICE PRESIDENT (JAN 11-JUN 11)	1.00	X		X				0	0	0
(522) JOHN BROOKS SECRETARY (JULY 11-DEC 11)	1.00	X		X				0	0	0
(523) JASON JAMES VICE PRESIDENT (JULY 11-DEC 11)	1.00	X		X				0	0	0
(524) KENT KIEFFER PRESIDENT (JAN 11-JUN 11)	10.00	X		X				0	0	0
(525) SAL SARABOSA SECRETARY (JAN 11-JUN 11)	1.00	X		X				0	0	0
(526) DAVID SUH TREASURER (JAN 11-JUN 11)	1.00	X		X				0	0	0
(527) JASON UHLMAN TREASURER (JULY 11-DEC 11)	10.00	X		X				0	0	0
(528) JARED BERNSTEIN DIRECTOR	1.00	X						0	0	0
(529) DEREK DANILSON DIRECTOR	1.00	X						0	0	0
(530) MICHELE DICKINSON ALTERNATE DIRECTOR	1.00	X						0	0	0
(531) PAULA D'ORAZIO COMMUNICATIONS CHAIR	1.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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		

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			
(532) LINDA FONNER DIRECTOR	1.00	X						0	0	0
(533) DEAN FOWLER ALTERNATE DIRECTOR	1.00	X						0	0	0
(534) MICHAEL GRIFFITH DIRECTOR	1.00	X						0	0	0
(535) ALEX HABRE DIRECTOR	1.00	X						0	0	0
(536) DONAVAN HAWSE COLLEGIATE ADVISOR	1.00	X						0	0	0
(537) ANTHONY HERNANDEZ DIRECTOR	1.00	X						0	0	0
(538) DAN HILL 1ST VP	5.00	X		X				0	0	0
(539) ZACHARY LEAHAN DIRECTOR	1.00	X						0	0	0
(540) ATUL MALHOTRA CONTINUING EDUCATION CHAIR	5.00	X						0	0	0
(541) DAVID MENICHELLO DIRECTOR	1.00	X						0	0	0
(542) CRAIG MOREA COLLEGIATE ADVISOR	1.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(543) CHERYL MORRIS DIRECTOR	1.00	X						0	0	0
(544) THU NGUYEN DIRECTOR	1.00	X						0	0	0
(545) KEVIN O'SULLIVAN 2ND VP / SECRETARY	5.00	X		X				0	0	0
(546) AGNES PERAINO PAST PRESIDENT	1.00	X						0	0	0
(547) CHIP RINDGEN MEMBERSHIP CHAIR	1.00	X						0	0	0
(548) ALAN SHEPPARD PRESIDENT	10.00	X		X				0	0	0
(549) GIRARD ROD SMITH PAST PRESIDENT	1.00	X						0	0	0
(550) RAM VIJAYANATHAN DIRECTOR	1.00	X						0	0	0
(551) WILLIAM VINK DIRECTOR	1.00	X						0	0	0
(552) TORPEY WHITE TREASURER	5.00	X		X				0	0	0
(553) JON CHANDLER DIRECTOR	2.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(554) AARON COOK SECRETARY	4.00	X		X				0	0	0
(555) TIM COX SECOND VICE PRESIDENT	2.00	X		X				0	0	0
(556) BRIAN IRISH TREASURER	3.00	X		X				0	0	0
(557) KIM JONES DIRECTOR	2.00	X						0	0	0
(558) DENISE LECLAIRE DIRECTOR	2.00	X						0	0	0
(559) ADAM REMIS PAST PRESIDENT	.50	X						0	0	0
(560) GAIL RICKETTS PRESIDENT	7.00	X		X				0	0	0
(561) JOHN SIMONS DIRECTOR	2.00	X						0	0	0
(562) CLAYTON SMITH DIRECTOR	2.00	X						0	0	0
(563) JEFF TROGAN VICE PRESIDENT	2.00	X		X				0	0	0
(564) CLAIRE DEMARCO VP PROGRAMS	.50	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

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

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

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 **0**

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			
(565) COLLEEN KEREKES VP SEMINARS	1.00	X		X				0	0	0
(566) STEPHANIE MCDONOUGH EDUCATION DIRECTOR	1.00	X						0	0	0
(567) TONY POLITO VP LOGISTICS	1.00	X		X				0	0	0
(568) DAVE RUSSELL DIRECTOR-AT-LARGE	.50	X						0	0	0
(569) STACEY SLAVONIC PRESIDENT	.50	X		X				0	0	0
(570) BRENDA TROUT SECRETARY	.50	X		X				0	0	0
(571) BRETT WILSON TREASURER	2.00	X		X				0	0	0
(572) JASON ZAHN DIRECTOR-RESEARCH	.50	X						0	0	0
(573) JACK CHAMPLIAN ACADEMIC OUTREACH/AUDIT	1.00	X						0	0	0
(574) REBECCA DOLS TREASURER	2.00	X		X				0	0	0
(575) CHITRA GOPALAKRISHNA CISA COORDINATOR	1.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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		

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			
(576) STEVE JUE PROGRAMS DIRECTOR	1.00	X						0	0	0
(577) STEVE MAR CISA COORDINATOR	1.00	X						0	0	0
(578) TOM MCANDREW PRESIDENT	3.00	X		X				0	0	0
(579) DON MCGILLIVRAY WEBMASTER	1.00	X						0	0	0
(580) ROBERTA MCGILLIVRAY MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(581) SCOTT NEWMAN VICE PRESIDENT	1.00	X		X				0	0	0
(582) MIKE SANTOS WEBMASTER	1.00	X						0	0	0
(583) MATTHEW SCHWAB COMMUNICATIONS DIRECTOR	1.00	X						0	0	0
(584) AARON SOUJA SECRETARY	1.00	X		X				0	0	0
(585) MIKE BURCH DIRECTOR	.30	X						0	0	0
(586) SUSAN BURCH FACILITIES COORDINATOR	.25	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(587) KEITH GARRETT DIRECTOR	.30	X						0	0	0
(588) CHRIS GARRISS DIRECTOR	.50	X						0	0	0
(589) KATHY GREEN PAST PRESIDENT	.50	X						0	0	0
(590) RICK HUDON PRESIDENT	2.00	X		X				0	0	0
(591) SRINI KOLATHUR CERTIFICATION COORDINATOR	1.00	X						0	0	0
(592) SATYA MARUVADA SECOND VP (MEMBERSHIP)	.10	X		X				0	0	0
(593) DIANA PETERS TREASURER (FACILITIES)	1.00	X		X				0	0	0
(594) JOANNA ROJAS SECRETARY	.80	X		X				0	0	0
(595) ALAN ROTH CERTIFICATION COORDINATOR	1.00	X						0	0	0
(596) SRINIVAS SARASWATULA FIRST VP (SPEAKER) /WEBMASTER	7.00	X		X				0	0	0
(597) JIM TARANTINO WEBMASTER	.10	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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 0		

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			
(598) SUE BAUMES PROGRAMS EDUCATION COMMITTEE	.30	X						0	0	0
(599) DALIA BUBNYS CONTENT AUTHOR	.30	X						0	0	0
(600) DEEPIKA CHANDARANA MEMBERSHIP DIRECTOR	.30	X						0	0	0
(601) BEN COGAN BOARD MEMBER	.30	X						0	0	0
(602) JOSEPH COLLINS PROGRAMS EDUCATION COMMITTEE	.30	X						0	0	0
(603) TOM LALIBERTE PROGRAMS EDUCATION COMMITTEE	.30	X						0	0	0
(604) PAULINE LAMANTIA IMMEDIATE PAST PRESIDENT	.30	X						0	0	0
(605) JENNIFER MIER BOARD MEMBER	.30	X						0	0	0
(606) BARBARA NORRIS ACADEMIC RELATIONS COORDINATOR	.30	X						0	0	0
(607) WILL NOWIK PROGRAMS EDUCATION COMMITTEE	.30	X						0	0	0
(608) STEVEN PRIMOST CERTIFICATION DIRECTOR	.30	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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 0		

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			
(609) KEVAN RILEY PRESIDENT	1.20	X		X				0	0	0
(610) RON ROY SECRETARY	1.20	X		X				0	0	0
(611) STEVEN SAVARD TREASURER	1.20	X		X				0	0	0
(612) BILL SOARES VICE PRESIDENT	1.20	X		X				0	0	0
(613) COLLEEN SULLIVAN PROGRAMS EDUCATION COMMITTEE	.30	X						0	0	0
(614) DAVID BLACKBURN AT LARGE	1.00	X						0	0	0
(615) FRANCIS BUEB AUDITOR	.50	X						0	0	0
(616) LESLIE DEANDA SECRETARY	1.50	X		X				0	0	0
(617) ROCHELLE GOHERING DIRECTOR/MEMBERSHIP	1.00	X						0	0	0
(618) VELAYUTHAN JAWAHAR ACADEMIC LIAISON	1.00	X						0	0	0
(619) JACK LEIDECKER DIRECTOR/SEMINARS	4.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(620) JOHN MELLAS TREASURER	6.00	X		X				0	0	0
(621) MARK SCHMIDT AT LARGE	.50	X						0	0	0
(622) KAREN TINUCCI VICE PRESIDENT	10.00	X		X				0	0	0
(623) SCOTT WRIGHT PRESIDENT	10.00	X		X				0	0	0
(624) ADAM AREVALOS DIRECTOR AT LARGE	.50	X						0	0	0
(625) KEITH BARBER WEBMASTER	1.00	X						0	0	0
(626) TIM CHASE VICE PRESIDENT	2.00	X		X				0	0	0
(627) TOM DESOT DIRECTOR AT LARGE	.50	X						0	0	0
(628) TOM DOWNEY CISA/CISM DIRECTOR	.50	X						0	0	0
(629) ARIANA FORD SECRETARY	.50	X		X				0	0	0
(630) SAMIR JARJOU ACADEMIC RELATIONS COORDINATOR	.50	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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 0		

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			
(631) BARBARA V. MALDONADO PRESIDENT	2.00	X		X				0	0	0
(632) AMANDA MARTIN SECRETARY	.50	X		X				0	0	0
(633) CHIP MEADOWS EDUCATION CHAIR	.50	X						0	0	0
(634) HAYDEE MEDINA MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(635) ERICA RIVERA CISA/CISM DIRECTOR	.50	X						0	0	0
(636) JUSTIN THOMPSON TREASURER	2.00	X		X				0	0	0
(637) ALEX BRANISTEANU CISM COORDINATOR	.50	X						0	0	0
(638) GARY DIMESKI VICE PRESIDENT	.50	X		X				0	0	0
(639) EVE DIMESKY CISA COORDINATOR AND SECRETARY	1.00	X						0	0	0
(640) STEPHEN GERMAIN DIRECTOR - WEBMASTER	1.00	X						0	0	0
(641) NOEL HASKINS HAFFER CRISC AND CCEIT COORDINATOR	1.50	X						0	0	0

1b Sub-total

c Total from continuation sheets to Part VII, Section A

d Total (add lines 1b and 1c)

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

0

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

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

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			
(642) RON HEMPHILL MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(643) KATHRYN HOLT DIRECTOR OF ED AND SEMINARS	1.00	X						0	0	0
(644) PRETESH MISTRY MARKETING COORDINATOR	.50	X						0	0	0
(645) METIN PASOGLU PRESIDENT	2.00	X		X				0	0	0
(646) SWATI PATEL DIRECTOR - PROGRAMS	2.00	X						0	0	0
(647) MISS CHANASEE PHANGMUANGDEE NEWSLETTER DIRECTOR	1.00	X						0	0	0
(648) TRISA MENDOZA RAMIREZ CISA COORDINATOR	.50	X						0	0	0
(649) ARTURO RUVALCABA II SECRETARY	4.00	X		X				0	0	0
(650) TIM SMITH TREASURER	2.00	X		X				0	0	0
(651) MATT STAMPER VP OF MARKETING	2.00	X						0	0	0
(652) RON STARZINSKI DIRECTOR - PROGRAMS	.50	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

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
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		

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			
(653) MATT TOBEY EDUCATION COORDINATOR	.50	X						0	0	0
(654) TONY YEE IMMEDIATE PAST PRESIDENT	0	X						0	0	0
(655) JENNIFER BURTON CHAPTER TREASURER	4.00	X		X				0	0	0
(656) BILL DAVIDSON DIRECTOR	1.00	X						0	0	0
(657) SANDY LEE DIRECTOR	1.00	X						0	0	0
(658) DEBRA MALLETTE CHAPTER PRESIDENT	4.00	X		X				0	0	0
(659) THEJ MEHTA CHAPTER VICE PRESIDENT	2.00	X		X				0	0	0
(660) DOUG MOHRLAND CHAPTER SECRETARY	2.00	X		X				0	0	0
(661) MIKE NELSON DIRECTOR	4.00	X						0	0	0
(662) HEATHE OUELLETTE CHAPTER 2ND VICE PRESIDENT	2.00	X		X				0	0	0
(663) STEVE OWYOUNG CHAPTER PAST PRESIDENT	1.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(664) STEVE SHOFNER DIRECTOR	4.00	X						0	0	0
(665) TIM STAPLETON DIRECTOR	2.00	X						0	0	0
(666) LANCE TURCATO DIRECTOR	1.00	X						0	0	0
(667) KAREEM BRIGGS WEBMASTER	5.00	X						0	0	0
(668) BRIAN CLYBURN SECRETARY	2.00	X		X				0	0	0
(669) DAVE GORNEY CERTIFICATION DIRECTOR	2.00	X						0	0	0
(670) THOMAS HART VICE PRESIDENT	2.00	X		X				0	0	0
(671) LISA HENRY MEMBERSHIP DIRECTOR	2.00	X						0	0	0
(672) CHRIS ODER NEWSLETTER DIRECTOR	2.00	X						0	0	0
(673) KATHY RILEY ACADEMIC ADVOCATE DIRECTOR	2.00	X						0	0	0
(674) SUSAN RUSHER PRESIDENT	8.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

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

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

	Yes	No
3		X
4		X
5		X

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
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 0		

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			
(675) HARRIET SIMPSON TREASURER	5.00	X		X			0	0	0
(676) LINDA WEEKS MARKETING DIRECTOR	2.00	X					0	0	0
(677) MITHIN CHINTARAM SECRETARY	2.50	X		X			0	0	0
(678) NAVARASU DHANASEKAR MARKETING DIRECTOR	5.00	X					0	0	0
(679) ANA MINEL DIAZ TREASURER	10.00	X		X			0	0	0
(680) GREGORY EDWARDS VICE PRESIDENT	2.50	X		X			0	0	0
(681) LARRY HALME ACADEMIC RELATIONS	5.00	X					0	0	0
(682) ROBERT IKEOKA PROGRAM DIRECTOR	4.00	X					0	0	0
(683) MIKE JORDAN CERTIFICATIONS DIRECTOR	4.50	X					0	0	0
(684) SUMIT KALRA CONFERENCE DIRECTOR	3.00	X					0	0	0
(685) PADMAJA KUMAR MEMBERSHIP DIRECTOR	4.50	X					0	0	0
1b Sub-total									
c Total from continuation sheets to Part VII, Section A									
d Total (add lines 1b and 1c)									

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(686) JAYARAMAN SWAMINATHAN PRESIDENT	12.00	X		X				0	0	0
(687) ROBERT ARLOTTO DIRECTOR OF MARKETING	4.00	X						0	0	0
(688) DESIREE AUCHEY MEMBERSHIP DIRECTOR	5.00	X						0	0	0
(689) PETER CHRISTIAANS PRESIDENT	6.00	X		X				0	0	0
(690) DONALD GLASS DIRECTOR AT LARGE	2.00	X						0	0	0
(691) PHILMORE HUGHES DIRECTOR AT LARGE	2.00	X						0	0	0
(692) ABBIE JULIEN DIRECTOR OF CORP RELATIONS	6.00	X						0	0	0
(693) ROBERT KANTOR DIRECTOR OF IT GOVERNANCE	1.00	X						0	0	0
(694) JOANNE KLIPPER SECRETARY	6.00	X		X				0	0	0
(695) JORDAN LLAN LOMBARD DIRECTOR AT LARGE	4.00	X						0	0	0
(696) MICHAEL MARSHALL DIRECTOR AT LARGE	3.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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		

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			
(697) FERNANDO MARTINEZ CERTIFICATION COORDINATOR	4.00	X						0	0	0
(698) CLAY MOGENBURG DIRECTOR AT LARGE	3.00	X						0	0	0
(699) SANDRA PARRAS DIRECTOR OF PROGRAMMING	6.00	X						0	0	0
(700) LUIS PAULETE DIRECTOR OF ACADEMIC RELATIONS	6.00	X						0	0	0
(701) ALEXIS PERDEREAUX-WEEKES DIRECTOR OF COMMUNICATION	5.00	X						0	0	0
(702) ERIC PHIFER TREASURER	6.00	X		X				0	0	0
(703) ANGELA POLANIA VICE PRESIDENT	6.00	X		X				0	0	0
(704) JULIAN SANDOVAL DIRECTOR OF VOL ACTIVITIES	4.00	X						0	0	0
(705) CHARLA E. BERRY PRESIDENT	1.00	X		X				0	0	0
(706) PHILLIP DIEKHOFF WEBMASTER	1.00	X						0	0	0
(707) DAWN FRANK SECRETARY	1.00	X		X				0	0	0

1b Sub-total**c Total from continuation sheets to Part VII, Section A****d Total (add lines 1b and 1c)**

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 **0**

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

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

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			
(708) STACY HILL ARRANGEMENTS DIRECTOR	1.00	X						0	0	0
(709) PEGGY MCDANNALD TREASURER	1.00	X		X				0	0	0
(710) SHANNON MCMURTREY EDUCATION DIRECTOR	1.00	X						0	0	0
(711) LAURA PATRICK VICE PRESIDENT	1.00	X		X				0	0	0
(712) DAVID SIMMONS CERTIFICATION DIRECTOR	1.00	X						0	0	0
(713) JAMES TAYLOR RESEARCH DIRECTOR	1.00	X						0	0	0
(714) ERIC WARAKOMSKI MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(715) DAVID ALLEN PRESIDENT	2.00	X		X				0	0	0
(716) CRYTAL DEES MEMBERSHIP/DIRECTORY	.25	X						0	0	0
(717) JOHN ETO PROGRAMS/EDUCATION	1.00	X						0	0	0
(718) JASON GOTSCH WEBMASTER	.25	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(719) TIM GRACE EXECUTIVE VICE PRESIDENT	.50	X		X				0	0	0
(720) MICHAEL JEANMOUGIN SECRETARY	.25	X		X				0	0	0
(721) SAI KRISHNA KESANAPALLI TREASURER	1.00	X		X				0	0	0
(722) DOUGLAS MENENDEZ UNIVERSITY LAISON	.25	X						0	0	0
(723) LARRY NEWELL ADMINISTRATIVE VICE PRESIDENT	.50	X		X				0	0	0
(724) KAREN QUAGLIATA PUBLICITY & PUBLICATION	.25	X						0	0	0
(725) JEFFREY STRIEF PAST PRESIDENT	1.00	X						0	0	0
(726) RON THENHAUS PROGRAMS/EDUCATION	2.00	X						0	0	0
(727) ANDREW TITUS ARRANGEMENTS/HOSPITALITY	2.00	X						0	0	0
(728) GEOFFREY ADAMS ACADEMIC RELATIONS COORDINATOR	1.00	X						0	0	0
(729) MIKE BLACKBURN PRESIDENT	1.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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			
(730) BETH BREIER SECRETARY	.50	X		X				0	0	0
(731) KAREN CALHOUN TREASURER	1.00	X		X				0	0	0
(732) SARAH HALL MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(733) DANIEL MIRONES DIRECTOR AT LARGE	.10	X						0	0	0
(734) JEAN MARIE PHILLIPS CERTIFICATION DIRECTOR	.20	X						0	0	0
(735) DAMON RODRIGUEZ VICE PRESIDENT	1.00	X		X				0	0	0
(736) MICHELLE WEAVER WEBMASTER	1.00	X						0	0	0
(737) TIM FAWCETT IMMEDIATE PAST PRESIDENT	1.00	X		X				0	0	0
(738) JAIME SMITH TREASURER	2.00	X		X				0	0	0
(739) PAULA STRUNK VICE PRESIDENT	.50	X		X				0	0	0
(740) MICHELLE STUDIE CHAPTER SECRETARY	1.00	X		X				0	0	0

1b Sub-total ▶**c Total from continuation sheets to Part VII, Section A** ▶**d Total (add lines 1b and 1c)** ▶**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 ▶ 0**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**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

	Yes	No
3		X
4		X
5		X

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

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 ▶

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			
(741) JON WILLIAMS CHAPTER PRESIDENT	1.50	X		X				0	0	0
(742) ANDREA GROVER WEBSITE CHAIR	1.00	X						0	0	0
(743) GAYLENE KENNEY RESEARCH CHAIR	1.00	X						0	0	0
(744) MARK MURDOCK SEMINAR CHAIR	1.00	X						0	0	0
(745) PAUL NEWMAN VICE PRESIDENT	1.00	X		X				0	0	0
(746) JULIE PARK PAST PRESIDENT	1.00	X						0	0	0
(747) BRADY STEVENSON TREASURER	2.00	X		X				0	0	0
(748) JOSH TAYLOR COMMUNICATIONS DIRECTOR	2.00	X						0	0	0
(749) JONATHAN WEST SECRETARY	1.00	X		X				0	0	0
(750) ELIZABETH YUKMAN PRESIDENT	4.00	X		X				0	0	0
(751) PAGE BROTHERS MEMBERSHIP/SEMINAR DIRECTOR	10.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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 0		

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			
(752) CATHIE BROWN VICE PRESIDENT	20.00	X		X				0	0	0
(753) VAUGHN CRAWLEY PAST PRESIDENT	5.00	X						0	0	0
(754) BERNIE HILL SECRETARY	5.00	X		X				0	0	0
(755) GERALD JARVIS TREASURER	20.00	X		X				0	0	0
(756) JOHN KARABAIC CERTIFICATIONS DIRECTOR	10.00	X						0	0	0
(757) TERESA SKEHAN PROGRAMS DIRECTOR	10.00	X						0	0	0
(758) DEIDRE TOMPKINS PRESIDENT	20.00	X		X				0	0	0
(759) CHRIS DAWES VICE PRESIDENT	20.00	X		X				0	0	0
(760) SHAWNA M. FLANDERS CISM COMMITTEE CHAIR	3.00	X						0	0	0
(761) ERIK FRIEBOLIN TREASURER	10.00	X		X				0	0	0
(762) JOHN KADECHKA PRESIDENT	20.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

	Yes	No
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		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		X
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		X

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
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 0		

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			
(763) JOHAN LIDROS CISA COMMITTEE CHAIR	5.00	X						0	0	0
(764) PIET OPPERMAN CGEIT	2.00	X						0	0	0
(765) CHAD PETERSON MEMBER AT LARGE	2.00	X						0	0	0
(766) DAN RUGGLES SECRETARY	5.00	X		X				0	0	0
(767) ED TOBIAS NEWSLETTER COMMITTEE CHAIR	1.00	X						0	0	0
(768) ANA VALDEZ IMMEDIATE PAST PRESIDENT	2.00	X						0	0	0
(769) CASSANDRA CHASNIS WEB MASTER	1.00	X						0	0	0
(770) JOHN JUAREZ SECRETARY	1.00	X		X				0	0	0
(771) ROBERT KERN II PRESIDENT	2.00	X		X				0	0	0
(772) TIM KUBU VICE PRESIDENT	2.00	X		X				0	0	0
(773) BRENT MOEGGENBORG TREASURER	2.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

	Yes	No
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		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		X
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		X

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

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 **0**

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			
(774) DAN MOYER DIRECTOR AT LARGE	1.00	X						0	0	0
(775) DAN TURRI CISA COORDINATOR	1.00	X						0	0	0
(776) SALIM ALANI DIRECTOR	.25	X						0	0	0
(777) TODD COLVIN BOARD MEMBER	.25	X						0	0	0
(778) ALEX DOUDS SECRETARY	1.00	X		X				0	0	0
(779) LIAM DOWNWARD BOARD MEMBER	.25	X						0	0	0
(780) PAUL LASLY DIRECTOR	.25	X						0	0	0
(781) CARLANN LAZARUS BOARD MEMBER	.25	X						0	0	0
(782) JAMES RAUB BOARD MEMBER	.25	X						0	0	0
(783) DON REDMAN CISA COORDINATOR	.25	X						0	0	0
(784) EVAN ROUTENBERG VICE PRESIDENT	1.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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
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 0		

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			
(785) FARAH SAMMOUR DIRECTOR	.25	X						0	0	0
(786) PAUL SCHNEIDER BOARD MEMBER	.25	X						0	0	0
(787) CHANDRA SIMMONS TREASURER	1.00	X		X				0	0	0
(788) PETER SPIER PRESIDENT	1.00	X		X				0	0	0
(789) VIRGIL ALLDRITT TREASURER	1.00	X		X				0	0	0
(790) DAVID DYK ASSISTANT MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(791) SIMON GOLDSTEIN PRESIDENT	1.00	X		X				0	0	0
(792) NISHA NAIR MARKETING COORDINATOR	.25	X						0	0	0
(793) RAYMOND NEVILLE PROGRAMS CHAIR	1.00	X						0	0	0
(794) JOHN O'MALLEY TRAINING COORDINATOR	1.00	X						0	0	0
(795) JANICE RICHARDS VICE PRESIDENT	1.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

	Yes	No
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		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		X
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		X

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
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 0		

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			
(796) VICTORIA SILVER SECRETARY	1.00	X		X				0	0	0
(797) JNANA SIVANANDA ASSISTANT TREASURER	1.00	X						0	0	0
(798) ADAM STARLING MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(799) SCOTT TURNER PAST PRESIDENT	.25	X						0	0	0
(800) BOBBI BAILEY STUDENT LIASON	.50			X				0	0	0
(801) JULIA FINCH MEMBERSHIP DIRECTOR	2.00			X				0	0	0
(802) LEE GEORGE CERTIFICATION DIRECTOR	.50			X				0	0	0
(803) GIRARD JERGENSEN WEBMASTER	1.00			X				0	0	0
(804) JOHN PEIRCE EDUCATION DIRECTOR	1.00			X				0	0	0
(805) MELISSA EWING NEWSLETTER EDITOR	2.00			X				0	0	0
(806) VICKI GRAVES SECRETARY	2.00			X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

- 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
- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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	40,610.				
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f			40,610.			
Program Service Revenue		Business Code					
	2a CONFERENCES & SEMINARS	611600	1,668,443.	1,668,443.			
	b MEMBERSHIP DUES - NONDEDUCTIBLE	611600	1,297,607.	1,297,607.			
	c CHAPTER MEETINGS	611600	429,498.	429,498.			
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		3,395,548.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts).		9,291.			9,291.	
	4 Income from investment of tax-exempt bond proceeds		0				
	5 Royalties		0				
		(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						
	b Less cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)		0				
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a	5,605.				
	b Less direct expenses	b	5,865.				
	c Net income or (loss) from fundraising events		-260			-260.	
	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					
b Less cost of goods sold	b						
c Net income or (loss) from sales of inventory		0					
Miscellaneous Revenue		Business Code					
11a MARKETING REIMBURSEMENT	900099	5,538			5,538		
b SPONSORSHIP REVENUE	900099	4,700			4,700		
c MISCELLANEOUS	900099	10,258			10,258		
d All other revenue							
e Total. Add lines 11a-11d		20,496					
12 Total revenue. See instructions		3,465,685	3,395,548.		29,527		

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.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	177,662.			
2 Grants and other assistance to individuals in the United States. See Part IV, line 22.	16,750.			
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.	0.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.			
7 Other salaries and wages.	0.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	0.			
9 Other employee benefits.	9,140.			
10 Payroll taxes.	0.			
11 Fees for services (non-employees).	0.			
a Management.	0.			
b Legal.	7,743.			
c Accounting.	13,323.			
d Lobbying.	0.			
e Professional fundraising services. See Part IV, line 17.	0.			
f Investment management fees.	0.			
g Other.	44,285.			
12 Advertising and promotion.	42,396.			
13 Office expenses.	89,661.			
14 Information technology.	58,980.			
15 Royalties.	0.			
16 Occupancy.	0.			
17 Travel.	130,345.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0.			
19 Conferences, conventions, and meetings.	2,484,653.			
20 Interest.	0.			
21 Payments to affiliates.	0.			
22 Depreciation, depletion, and amortization.	0.			
23 Insurance.	44,696.			
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 STORAGE.	3,896.			
b TAXES.	677.			
c .				
d .				
e All other expenses.	82,352.			
25 Total functional expenses. Add lines 1 through 24e.	3,206,559.			
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	818,992.	1	1,535,850.
	2 Savings and temporary cash investments	1,941,805.	2	2,333,031.
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	0	4	0
	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	0	8	0
	9 Prepaid expenses and deferred charges	0	9	13,254.
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a			
	b Less accumulated depreciation 10b	0	10c	0
	11 Investments - publicly traded securities	0	11	0
	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	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 34)	2,760,797.	16	3,882,135.	
Liabilities	17 Accounts payable and accrued expenses	0	17	2,107.
	18 Grants payable	0	18	0
	19 Deferred revenue	0	19	0
	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	6,800.
	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	0	25	0
	26 Total liabilities. Add lines 17 through 25	0	26	8,907.
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	2,760,797.	27	3,873,228.
	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	2,760,797.	33	3,873,228.
	34 Total liabilities and net assets/fund balances.	2,760,797.	34	3,882,135.

Form **990** (2011)

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,465,685.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,206,559.
3	Revenue less expenses Subtract line 2 from line 1	3	259,126.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,760,797.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	853,305.
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	3,873,228.

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

	Yes	No
1 Accounting method used to prepare the Form 990 <input checked="" type="checkbox"/> Cash <input 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		
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 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?		X
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)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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.**

OMB No 1545-0047

2011

**Open to Public
Inspection**

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 CHAPTERS**

Employer identification number
94-2919522

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														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		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		
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.			
2a	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.

1 Also, complete this part for any additional information

Part IV Supplemental Information *(continued)*

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 CHAPTERS

INFORMATION SYSTEMS AUDIT AND

Employer identification number
94-2919522

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)	IT GOVERNANCE INSTITUTE 3701 ALCONQUIN RD ROLLING MEADOWS, IL 60008	95-3080691	501 (C) (3)	75,301.				GENERAL SUPPORT
(2)	CAL POLY POMONA FOUNDATION 3801 W TEMPLE AVE POMONA, CA 91768	95-2417645	501 (C) (3)	52,500				GENERAL SUPPORT
(3)	INFORMATION SYSTEMS AUDIT AND CONTROL ASSOC 3701 ALCONQUIN RD ROLLING MEADOWS, IL 60008	23-7067291	501 (C) (6)	25,000.				GENERAL SUPPORT
(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 2
- 3 Enter total number of other organizations listed in the line 1 table 1

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	KELLEY JERRERSON - SCHOLARSHIP - PHILADELPHIA	1	2,500			
2	CHRISTOPHER HUGHES - SCHOLARSHIP - NEW ENGLAND	1.	1,500.			
3	DANIEL MARONE - SCHOLARSHIP - PHILADELPHIA CHAPTER	1.	1,500.			
4	TAYLOR MCELDFOWNEY - SCHOLARSHIP - NEW ENGLAND	1	1,500			
5	DEREK SEDLACK - SCHOLARSHIP - SOUTH FLORDIA	1.	1,000.			
6	KAN SHAO - SCHOLARSHIP - DETROIT CHAPTER	1	1,000			
7	KIMBERLY HALAMICEK - SCHOLARSHIP - PHILADELPHIA	1.	1,000.			

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

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	MARY JANE OLSON - SCHOLARSHIP - DENVER CHAPTER	1	1,000.			
2	MICHELE RIDGE - SCHOLARSHIP - SOUTH FLORIDA	1	1,000.			
3	RYAN DELIEFDE - SCHOLARSHIP - DENVER CHAPTER	1	1,000.			
4	BENJAMIN HENDERSON - SCHOLARSHIP - DENVER CHAPTER	1	750.			
5	ROGER BLAND - SCHOLARSHIP - DENVER CHAPTER	1.	750			
6	ANGELA WILLIAMS - SCHOLARSHIP - DENVER CHAPTER	1.	500.			
7	BRYAN SOVINSKY - SCHOLARSHIP - GREATER HARTFORD	1.	500.			

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

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 SEAN QUICK - SCHOLARSHIP - RHODE ISLAND CHAPTER	1.	500.			
2 CHRISTINA LI - SCHOLARSHIP - SC MIDLANDS CHAPTER	1.	250.			
3 JONATHAN ANTONIO - SCHOLARSHIP - SC MIDLANDS	1	250.			
4 MARY GLENN - SCHOLARSHIP - SC MIDLANDS CHAPTER	1	250.			
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, LINE 2

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

INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) CHAPTERS ARE AFFILIATED WITH IT GOVERNANCE INSTITUTE (ITGI). EACH INDIVIDUAL CHAPTER BOARD REVIEWS AND APPROVES FUNDS TO BE CONTRIBUTED TO SUPPORT THE RESEARCH PROJECTS OF ITGI AND IS FAMILIAR WITH ITGI'S PROGRAMS AND MISSION. ISACA CHAPTERS RECEIVE REGULAR UPDATES TO MAINTAIN AN AWARENESS OF RESEARCH PROJECTS WITH ITGI AND ISACA THROUGH A BIWEEKLY NEWSLETTER.

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

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

OMB No 1545-0047

2011

**Open To Public
Inspection**

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

Employer identification number
94-2919522

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only)
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1) KAREN TINUCCI BUSINESS LOAN	X		6,800.	6,800.		X	X			X
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
Total ▶ \$				6,800.						

Part III Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

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

Schedule L (Form 990 or 990-EZ) 2011

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 CHAPTERS**

Employer identification number
94-2919522

FORM 990, PAGE 1, ITEM L

YEAR OF FORMATION

LISTING OF FORMATION DATES FOR CHAPTERS INCLUDED IN RETURN:

06/27/02	ANCHORAGE CHAPTER
03/05/79	ATLANTA CHAPTER
02/10/77	AUSTIN CHAPTER
09/28/84	BATON ROUGE CHAPTER
03/04/83	BIRMINGHAM CHAPTER
12/20/79	BOISE CHAPTER
12/15/83	CENTRAL ARKANSAS CHAPTER
03/04/83	CENTRAL FLORIDA CHAPTER
10/12/81	CENTRAL INDIANA CHAPTER
08/21/87	CENTRAL IOWA CHAPTER
06/19/78	CENTRAL MARYLAND CHAPTER
06/19/78	CENTRAL NEW YORK CHAPTER
06/19/78	CENTRAL OHIO CHAPTER
06/15/80	CENTRAL OKLAHOMA CHAPTER
10/22/80	CHARLOTTE CHAPTER
05/17/73	CHICAGO CHAPTER
06/23/76	DENVER CHAPTER
09/10/74	DETROIT CHAPTER
06/12/73	GREATER CINCINNATI CHAPTER
01/01/78	GREATER HARTFORD CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

01/14/75	GREATER HOUSTON CHAPTER
09/28/84	GREATER KANSAS CITY CHAPTER
03/05/80	HARRISBURG CHAPTER
05/01/83	HAWAII CHAPTER
01/31/90	HUDSON VALLEY CHAPTER
12/02/83	ILLINI CHAPTER
01/22/01	ILLOWA CHAPTER
12/01/81	JACKSONVILLE CHAPTER
01/23/79	KENTUCKIANA CHAPTER
11/01/81	KETTLE MORaine CHAPTER
07/07/05	LAS VEGAS CHAPTER
08/08/69	LOS ANGELES CHAPTER
03/05/80	MEMPHIS CHAPTER
06/20/86	MIDDLE TENNESSEE CHAPTER
02/11/75	MINNESOTA CHAPTER
08/20/92	MOUNT RAINIER CHAPTER
06/12/74	NATIONAL CAPITAL AREA CHAPTER
06/23/76	NEW ENGLAND CHAPTER
06/19/78	NEW JERSEY CHAPTER
03/31/84	NEW MEXICO CHAPTER
05/18/82	NEW ORLEANS CHAPTER
06/26/75	NEW YORK CITY CHAPTER
12/24/75	NORTH TEXAS CHAPTER
06/19/78	NORTHEAST OHIO CHAPTER
01/09/06	NORTHWEST OHIO CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

06/26/77	OMAHA CHAPTER
12/05/83	ORANGE COUNTY CHAPTER
06/12/74	PHILADELPHIA CHAPTER
03/09/81	PHOENIX CHAPTER
04/13/76	PITTSBURGH CHAPTER
12/02/78	PUGET SOUND CHAPTER
10/01/85	RESEARCH TRIANGLE CHAPTER
07/16/07	RHODE ISLAND CHAPTER
09/24/83	SACRAMENTO CHAPTER
06/25/75	SAINT LOUIS CHAPTER
12/13/83	SAN ANTONIO/SOUTH TEXAS CHAPTER
01/01/77	SAN DIEGO CHAPTER
06/23/76	SAN FRANCISCO CHAPTER
03/01/81	SC MIDLANDS CHAPTER
05/18/82	SILICON VALLEY CHAPTER
12/02/78	SOUTH FLORIDA CHAPTER
04/26/11	SPRINGFIELD MISSOURI CHAPTER
01/25/11	TALLAHASSEE CHAPTER
12/02/78	TULSA CHAPTER
06/12/74	UTAH CHAPTER
05/17/77	VIRGINIA CHAPTER
12/20/79	WEST FLORIDA CHAPTER
03/05/79	WESTERN MICHIGAN CHAPTER
03/05/80	WESTERN NEW YORK CHAPTER
11/22/80	WILLAMETTE VALLEY CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

FORM 990, PAGE 1, ITEM M

STATE OF LEGAL DOMICILE

LISTING OF STATE OF LEGAL DOMICILE FOR CHAPTERS INCLUDED IN RETURN:

AK	ANCHORAGE CHAPTER
GA	ATLANTA CHAPTER
TX	AUSTIN CHAPTER
LA	BATON ROUGE CHAPTER
AL	BIRMINGHAM CHAPTER
ID	BOISE CHAPTER
AR	CENTRAL ARKANSAS CHAPTER
FL	CENTRAL FLORIDA CHAPTER
IN	CENTRAL INDIANA CHAPTER
IA	CENTRAL IOWA CHAPTER
MD	CENTRAL MARYLAND CHAPTER
NY	CENTRAL NEW YORK CHAPTER
OH	CENTRAL OHIO CHAPTER
OK	CENTRAL OKLAHOMA CHAPTER
NC	CHARLOTTE CHAPTER
IL	CHICAGO CHAPTER
CO	DENVER CHAPTER
MI	DETROIT CHAPTER
OH	GREATER CINCINNATI CHAPTER
CT	GREATER HARTFORD CHAPTER
TX	GREATER HOUSTON CHAPTER
MO	GREATER KANSAS CITY CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

PA HARRISBURG CHAPTER
HI HAWAII CHAPTER
NY HUDSON VALLEY CHAPTER
IL ILLINI CHAPTER
IA ILLOWA CHAPTER
FL JACKSONVILLE CHAPTER
KY KENTUCKIANA CHAPTER
WI KETTLE MORaine CHAPTER
NV LAS VEGAS CHAPTER
CA LOS ANGELES CHAPTER
TN MEMPHIS CHAPTER
TN MIDDLE TENNESSEE CHAPTER
MN MINNESOTA CHAPTER
WA MOUNT RAINIER CHAPTER
VA NATIONAL CAPITAL AREA CHAPTER
MA NEW ENGLAND CHAPTER
NJ NEW JERSEY CHAPTER
NM NEW MEXICO CHAPTER
LA NEW ORLEANS CHAPTER
NY NEW YORK CITY CHAPTER
TX NORTH TEXAS CHAPTER
OH NORTHEAST OHIO CHAPTER
OH NORTHWEST OHIO CHAPTER
NE OMAHA CHAPTER
CA ORANGE COUNTY CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

PA PHILADELPHIA CHAPTER
AZ PHOENIX CHAPTER
PA PITTSBURGH CHAPTER
WA PUGET SOUND CHAPTER
NC RESEARCH TRIANGLE CHAPTER
RI RHODE ISLAND CHAPTER
CA SACRAMENTO CHAPTER
MO SAINT LOUIS CHAPTER
TX SAN ANTONIO CHAPTER
CA SAN DIEGO CHAPTER
CA SAN FRANCISCO CHAPTER
SC SC MIDLANDS CHAPTER
CA SILICON VALLEY CHAPTER
FL SOUTH FLORIDA CHAPTER
MO SPRINGFIELD MISSOURI CHAPTER
FL TALLAHASSEE CHAPTER
OK TULSA CHAPTER
UT UTAH CHAPTER
VA VIRGINIA CHAPTER
FL WEST FLORIDA CHAPTER
MI WESTERN MICHIGAN CHAPTER
NY WESTERN NEW YORK CHAPTER
OR WILLAMETTE VALLEY CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

FORM 990, PART IV, LINE 12A

INDEPENDENT AUDITED FINANCIAL STATEMENTS

51 OF THE 70 ISACA CHAPTERS RESPONDED "NO" TO LINE 12A.

THE FOLLOWING ISACA CHAPTERS RESPONDED "YES" TO LINE 12A:

ATLANTA CHAPTER

CENTRAL ARKANSAS CHAPTER

CHARLOTTE CHAPTER

GREATER HOUSTON CHAPTER

HAWAII CHAPTER

MEMPHIS CHAPTER

MINNESOTA CHAPTER

NATIONAL CAPITAL AREA CHAPTER

NEW YORK CITY CHAPTER

ORANGE COUNTY CHAPTER

PITTSBURGH CHAPTER

SACRAMENTO CHAPTER

SAN DIEGO CHAPTER

SAN FRANCISCO CHAPTER

SC MIDLANDS CHAPTER

SILCON VALLEY CHAPTER

SPRINGFIELD CHAPTER

UTAH CHAPTER

WEST FLORIDA CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

BASED ON ESTABLISHED AUDIT THRESHOLDS FOR NON-PROFITS, AN EXTERNAL AUDIT
IS NOT REQUIRED OF ALL ISACA CHAPTERS. THE RESULTS OF THE AUDIT COMPLETED
BY THE CHAPTER SHALL BE REPORTED TO THE MEMBERS OF THE RESPECTIVE
CHAPTER. ALL ISACA CHAPTERS ARE REQUIRED TO OBTAIN AN AUDIT VERIFICATION
LETTER THAT MUST BE TURNED IN TO ISACA INTERNATIONAL.

FORM 990, PART V, LINE 1A

NUMBER REPORTED IN BOX 3 OF FORM 1096

63 OF THE 70 ISACA CHAPTERS RESPONDED "0" TO LINE 1A.

THE FOLLOWING ISACA CHAPTERS RESPONDED AS HAVING THIS NUMBER REPORTED TO
LINE 1A:

ATLANTA CHAPTER	4
DENVER CHAPTER	3
DETROIT CHAPTER	1
LOS ANGELES CHAPTER	6
NEW ENGLAND CHAPTER	2
SACRAMENTO CHAPTER	1
SILICON VALLEY CHAPTER	3

FORM 990, PART VI, SECTION A, LINE 2

FAMILY OR BUSINESS RELATIONSHIP

64 OF THE 70 ISACA CHAPTERS RESPONDED "NO" TO LINE 2.

THE FOLLOWING ISACA CHAPTERS RESPONDED "YES" TO LINE 2 AND INDICATED THE

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

FAMILY OR BUSINESS RELATIONSHIP AS FOLLOWS:

CENTRAL ARKANSAS CHAPTER:

PAUL MONTROSE (VICE PRESIDENT) IS MARRIED TO TANYA MONTROSE (BOARD
MEMBER) WHO ARE BOTH EMPLOYED BY ACXIOM CORPORATION.

ILLINI CHAPTER:

THREE INSTANCES EXIST WHERE TWO BOARD MEMBERS WORK AT THE SAME
ORGANIZATION.

ILLOWA CHAPTER:

JOSHUA CONNORS (TREASURER) IS AN EMPLOYEE OF MARTIN COE (CISA/CISM
COORDINATOR & ACADMIC RELATIONS COORDINATOR).

RHODE ISLAND CHAPTER:

THREE MEMBERS OF THE BOARD WORK FOR THE SAME COMPANY.

SILCON VALLEY CHAPTER:

TWO OFFICERS WORK AT THE SAME CONSULTING FIRM.

SOUTH FLORIDA CHAPTER:

PETER CHRISTIAANS (CURRENT CHAPTER PRESIDENT) IS MARRIED TO SANDRA PARRAS
(A DIRECTOR AT LARGE).

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

FORM 990, PART VI, SECTION A, LINE 4

GOVERNING DOCUMENT CHANGES

THE BIRMINGHAM, ILLINI, NEW ENGLAND, NORTHWEST OHIO, SOUTHWEST OHIO, AND
SACRAMENTO CHAPTERS ALL CHECKED "YES" TO HAVING CHANGES TO THEIR BYLAWS.
THESE CHANGES DID NOT MEET THE REPORTING REQUIREMENTS FOR REPORTING FOR
CHECKING THE BOX "YES" FOR 990 PURPOSES AND SUMMARIZING THE CHANGES IN
SCHEDULE O.

FORM 990, PART VI, SECTION A, LINE 6

MEMBERS OR STOCKHOLDERS

INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) CHAPTERS
MAINTAIN A MEMBERSHIP ROSTER OF INDIVIDUALS; THERE IS NO CORPORATE
MEMBERSHIP CATEGORY. ANYONE INTERESTED IN THE PURPOSES AND OBJECTIVES OF
THE ASSOCIATION IS ELIGIBLE FOR MEMBERSHIP. ANYONE HOLDING MEMBERSHIP IN
A CHAPTER MUST ALSO BE A MEMBER OF THE INTERNATIONAL BODY.

ISACA CHAPTERS' MEMBERSHIP IS CHARACTERIZED BY DIVERSITY. THE MEMBERS
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 CHAPTER MEMBERS EMBRACE THIS DIVERSITY AS PROVIDING A VAST LEARNING
GROUND WHERE THEY MAY DELVE INTO THE CHALLENGES AND OPPORTUNITIES FACED

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

BY COLLEAGUES IN OTHER COUNTRIES, POSITIONS OR INDUSTRIES.

ISACA CHAPTERS RECOGNIZE THAT THEIR MEMBERS CONSTITUTE AN EXTENSIVE AND
VARIED POOL OF EXPERTISE-EXPERTISE THE CHAPTERS COUNT ON TO HELP PROVIDE
SERVICES AND PRODUCTS THAT ENGENDER CREDIBILITY AND CAPABILITY IN THEIR
CONSTITUENTS. THE MORE MEMBERS, THE MORE EXPERTISE; THE MORE EXPERTISE,
THE BETTER THE ABILITY TO MEET CONSTITUENT NEEDS. ISACA CHAPTERS' MEMBERS
ARE THEIR MOST VALUABLE ASSET.

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

PERSONS WHO MAY ELECT GOVERNING BODY MEMBERS

ANCHORAGE CHAPTER:

MEMBERSHIP ELECTS OFFICERS.

ATLANTA CHAPTER:

MEMBERS MAY ELECT THE BOARD OF DIRECTOR POSITIONS FOR PRESIDENT, VICE
PRESIDENT (2), SECRETARY AND TREASURER.

AUSTIN CHAPTER:

ALL MEMBERS ARE VOTING MEMBERS.

BATON ROUGE CHAPTER:

THE BATON ROUGE CHAPTER OF ISACA HAS MEMBERS WHO VOTE ANNUALLY FOR THE
GOVERNING BODY OF THE CHAPTER.

BIRMINGHAM CHAPTER:

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

MEMBERS ELECT THE GOVERNING BODY ANNUALLY.

BOISE CHAPTER:

THE MEMBERS OF THE BOISE CHAPTER VOTE AND ELECT THE GOVERNING BODY
ANNUALLY.

CENTRAL ARKANSAS CHAPTER:

THE MEMBERS VOTE ON THE OFFICERS AND BOARD MEMBERS.

CENTRAL FLORIDA CHAPTER:

MEMBERS ELECT THE GOVERNING BODY EACH YEAR AT THE ANNUAL AGM.

CENTRAL INDIANA CHAPTER:

CHAPTER MEMBERS ELECT ALL OFFICERS AND DIRECTORS.

CENTRAL IOWA CHAPTER:

BOARD MEMBERS ARE ELECTED ANNUALLY THROUGH A GENERAL MEMBER ELECTION.

CENTRAL MARYLAND CHAPTER:

OUR MEMBERSHIP VOTES FOR THE PROPOSED BOARD OF DIRECTORS ANNUALLY.

CENTRAL NEW YORK CHAPTER:

THE LOCAL CHAPTER VOTES OR APPOINTS OFFICERS ON AN ANNUAL BASIS. THE
BOARD AND OFFICERS MAY REMAIN CONSISTENT YEAR AFTER YEAR DEPENDING ON
VOLUNTEERS FROM THE MEMBERSHIP.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

CENTRAL OHIO CHAPTER:

THE MEMBERS ELECT THE OFFICERS AND BOARD OF DIRECTORS ON A YEARLY BASIS.

THE BOARD CAN APPOINT INDIVIDUALS TO A PARTICULAR OFFICER OR BOARD

POSITION IN THE EVENT THAT NO ONE RUNS FOR AN ELECTED POSITION.

CENTRAL OKLAHOMA CHAPTER:

MEMBERS OF THE GOVERNING BODY ARE ELECTED BY MEMBERS OF THE ORGANIZATION

ON AN ANNUAL BASIS.

CHARLOTTE CHAPTER:

ALL ACTIVE MEMBERS OF THE CHAPTER CAN PARTICIPATE IN THE ELECTION OF THE

CHAPTER BOARD OF DIRECTORS.

CHICAGO CHAPTER:

THE ORGANIZATION HAS MEMBERS WHO CAN VOTE FOR THE BOARD.

DENVER CHAPTER:

SIX CHAPTER OFFICERS ARE ELECTED BY THE MEMBERS. THE OTHER FIVE ARE

APPOINTED BY THE PRESIDENT.

DETROIT CHAPTER:

A YEARLY ELECTION WHERE MEMBERS AT LARGE CAN VOTE FOR CANDIDATES FOR THE

BOARD OF DIRECTORS. THE BALLOT IS SELECTED/VETTED BY THE NOMINATING

COMMITTEE.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

GREATER CINCINNATI CHAPTER:

MEMBERS ELECT THE BOARD OF DIRECTORS.

GREATER HARTFORD CHAPTER:

LOCAL CHAPTER OFFICERS ARE ELECTED ONCE A YEAR FOR VARIOUS LENGTH TERMS
PER OUR BYLAWS.

GREATER HOUSTON CHAPTER:

BOARD IS ELECTED BY THE CHAPTER MEMBERS WITH ADDITIONAL "NON-VOTING"
MEMBERS BEING APPOINTED BY THE PRESIDENT.

GREATER KANSAS CITY CHAPTER:

ALL MEMBERS PRESENT AT THE ANNUAL BUSINESS MEETING VOTE ON THE FOUR
MEMBERS OF THE BOARD: PRESIDENT, VICE PRESIDENT, TREASURER, AND
SECRETARY. NOTE: THE REMAINING VOTING MEMBERS OF THE BOARD ARE
APPOINTED.

HARRISBURG CHAPTER:

MEMBERS VOTE IN THE ELECTION OF THE GOVERNING BODY.

HAWAII CHAPTER:

ALL MEMBERS OF THE GOVERNING BODY ARE ELECTED BY A SIMPLE MAJORITY OF
MEMBERS IN GOOD STANDING WHO ARE IN ATTENDANCE AT THE CHAPTER MEETING OR
EVENT WHICH IS DESIGNATED IN ADVANCE AS THE VOTING MEETING. WE HAVE NO

Name of the organization INFORMATION SYSTEMS AUDIT AND
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SHAREHOLDERS.

HUDSON VALLEY CHAPTER:

MEMBERS ELECT THE BOARD.

ILLINI CHAPTER:

MEMBERS VOTE ON THE ELECTION OF BOARD MEMBERS.

ILLOWA CHAPTER:

ALL BOARD MEMBERS ARE ELECTED ANNUALLY.

JACKSONVILLE CHAPTER:

THE MEMBERS VOTE ON THE CHAPTER BOARD.

KENTUCKIANA CHAPTER:

ALL VOLUNTEER BOARD MEMBERS WERE ELECTED BY GENERAL MEMBERS.

KETTLE MORaine CHAPTER:

THE CHAPTER GOVERNING BODY IS ELECTED BY MEMBERS IN GOOD STANDING
ACCORDING TO CHAPTER BYLAWS.

LAS VEGAS CHAPTER:

THE BOARD IS ELECTED BY ALL MEMBERS.

LOS ANGELES CHAPTER:

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

OFFICERS AND BOARD DIRECTORS ARE ELECTED BY MEMBERS ANNUALLY. WE HAVE
FOUR OFFICERS AND SEVEN OTHER DIRECTORS. MEMBERS CAN NOMINATE AND VOTE
FOR THE CANDIDATES DURING THE ANNUAL ELECTION.

MEMPHIS CHAPTER:

ALL MEMBERS VOTE ON CURRENT OFFICERS.

MIDDLE TENNESSEE CHAPTER:

ANNUAL OFFICER ELECTIONS ARE HELD AT THE MAY CHAPTER MEETING. MEMBERS IN
GOOD STANDING MAY VOTE EITHER IN PERSON OR BY PROXY.

MINNESOTA CHAPTER:

MEMBER - ANY PERSON INTERESTED IN THE PURPOSE AND OBJECTIVES OF THE
CHAPTER AS STATED IN ARTICLE II SHALL BE ELIGIBLE FOR MEMBERSHIP IN THE
CHAPTER, AND THE ASSOCIATION, SUBJECT TO RULES ESTABLISHED BY THE
ASSOCIATION BOARD. MEMBERS SHALL BE ENTITLED TO VOTE AND HOLD OFFICE.
THERE ARE NO STOCKHOLDERS.

MT. RAINIER CHAPTER:

MEMBERS HAVE THE POWER TO ELECT BOARD MEMBERS (PRESIDENT, VICE PRESIDENT,
TREASURER, SECRETARY, CISA/CISM COORDINATOR) ONCE EVERY YEAR.

NATIONAL CAPITAL AREA CHAPTER:

EVERY TWO YEARS, CURRENT MEMBERS ARE NOTIFIED WHEN IT IS TIME TO ELECT
NEW OFFICERS. OFFICERS SO ELECTED WILL BE INSTALLED AT THE CHAPTER AGM

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

HELD IN MAY.

NEW ENGLAND CHAPTER:

BOARD OF DIRECTORS ARE ELECTED BY A PLURALITY OF THE VOTES OF MEMBERS
PRESENT AND VOTING AT THE CHAPTER ANNUAL MEETING.

NEW JERSEY CHAPTER:

MEMBERSHIP ELECTS CHAPTER BOARD ANNUALLY. THE CHAPTER CONSISTS OF 1,400
PLUS DUES PAYING MEMBERS.

NEW MEXICO CHAPTER:

MEMBERS OF THIS CHAPTER HAVE VOTING RIGHTS TO ELECT BOARD MEMBERS AND
OFFICERS OF THIS CHAPTER.

NEW ORLEANS CHAPTER:

THE CHAPTER HAS MEMBERS WHO ELECT BOARD MEMBERS AT THE ANNUAL MAY
MEETING.

NEW YORK CITY CHAPTER:

OUR BYLAWS ALLOW THE CHAPTER PRESIDENT TO APPOINT A BOARD MEMBER TO FILL
A VACANT POSITION RESULTING FROM A BOARD MEMBER RESIGNATION. THIS IS
SUBJECT TO THE VOTE FROM THE ENTIRE BOARD.

NORTH TEXAS CHAPTER:

MEMBERSHIP VOTES ANNUALLY ON THE BOARD MEMBERS.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

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NORTHEAST OHIO CHAPTER:

MEMBERS ELECT THE SLATE OF OFFICERS AT YEAR-END FOR THE FOLLOWING YEAR.

NORTHWEST OHIO CHAPTER:

ELECTIONS ARE HELD AT THE ANNUAL GENERAL MEETING IN MAY FOR BOARD MEMBERS
EACH YEAR AND OFFICERS EVERY OTHER YEAR. CHAPTER MEMBERS VOTE ON THE
SLATE OF CANDIDATES FROM THE NOMINATING COMMITTEE WHICH HAS TWO NON-BOARD
MEMBERS PER OUR BYLAWS.

OMAHA CHAPTER:

MEMBERS VOTE FOR ELECTED OFFICERS (I.E. THE GOVERNING BODY).

ORANGE COUNTY CHAPTER:

AS OUTLINED IN OUR BYLAWS AT: [HTTP/1 1062
COLONY1.NET/INDEX.CFM/CHAPTER_BYLAW](http://1062COLONY1.NET/INDEX.CFM/CHAPTER_BYLAW),

ARTICLE IV. CHAPTER MEETINGS, SECTION 5. QUORUM.

SHOULD A MATTER REQUIRE MEMBERSHIP VOTING, A QUORUM SHALL BE REQUIRED AND
SHALL CONSIST OF TEN PERCENT OF CHAPTER VOTING MEMBERS. IN ABSENCE OF
QUORUM, THE VOTING MATTER WILL BE CONTINUED TO ANOTHER MEETING IN WHICH A
QUORUM IS CONFIRMED. THE NEW DATE AND TIME WILL BE COMMUNICATED TO
MEMBERS.

ARTICLE VI. NOMINATIONS AND ELECTIONS, SECTION 2. CHAPTER ELECTIONS.

Name of the organization INFORMATION SYSTEMS AUDIT AND
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Employer identification number

A. ALL CHAPTER OFFICERS SHALL BE ELECTED BY THE MEMBERSHIP OF THE CHAPTER BY BALLOT, OR IN THE EVENT THERE IS ONLY ONE CANDIDATE FOR ANY OFFICE, VOTING ON THAT OFFICE MAY BE BY VOICE.

B. A MEMBER CAN SERVE ONLY IN ONE OFFICE AT A TIME.

C. THE CHAPTER BOARD SHALL DETERMINE BY RESOLUTION ON OTHER PROCEDURES IT DEEMS NECESSARY TO CONDUCT CHAPTER ELECTIONS IN A PROPER, REASONABLE, NON-BIASED AND ACCURATE MANNER.

D. ALL MEMBERS PRESENT IN PERSON SHALL BE ELIGIBLE TO VOTE AT THE ANNUAL GENERAL MEETING.

E. FOR THE OFFICES OF PRESIDENT AND VICE PRESIDENT THE CANDIDATE MUST HAVE SERVED THE CHAPTER IN AN OFFICER OR DIRECTOR ROLE IN A PRIOR YEAR TO BE ELIGIBLE FOR NOMINATION.

PHILADELPHIA CHAPTER:

CHAPTER MEMBERS ELECT MEMBERS OF THE CHAPTER BOARD.

PHOENIX CHAPTER:

MEMBERS VOTE TO ELECT BOARD MEMBERS.

PITTSBURGH CHAPTER:

MEMBERS HAVE RIGHTS TO ELECT THE DIRECTORS OF THE GOVERNING BOARD.

PUGET SOUND CHAPTER:

THE ORGANIZATION HAS MEMBERS THAT ELECT A BOARD OF DIRECTORS ANNUALLY IN MAY FOR THE UPCOMING CHAPTER YEAR.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

RESEARCH TRIANGLE CHAPTER:

OFFICER ELECTIONS BY MEMBERS AT ANNUAL GENERAL MEETING.

RHODE ISLAND CHAPTER:

OUR MEMBERS CAN VOTE ON WHO TO APPOINT INTO A BOARD POSITION.

SACRAMENTO CHAPTER:

OFFICERS SHALL BE ELECTED BY A PLURALITY OF VOTES OF THE MEMBERS VOTING.

SAN ANTONIO/SOUTH TEXAS CHAPTER:

THE ORGANIZATION CURRENTLY HAS 385 ACTIVE MEMBERS (NO STOCKHOLDERS). THE
MEMBERS HAVE A RIGHT TO VOTE TO ELECT THE ORGANIZATIONS BOARD MEMBERS ON
AN ANNUAL BASIS.

SAN FRANCISCO CHAPTER:

MEMBERS OF THE SAN FRANCISCO CHAPTER ELECT OFFICERS AND DIRECTORS
ANNUALLY.

SC MIDLANDS CHAPTER:

THE PRESIDENT MAY APPOINT THE DIRECTORS AS NEEDED.

SILICON VALLEY CHAPTER:

ALL MEMBERS OF THE CHAPTER ELECT THE BOARD.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

SOUTH FLORIDA CHAPTER:

THE ORGANIZATION HAS A GENERAL MEMBERSHIP THAT ELECTS THE CHAPTER OFFICERS AND BOARD (THE GOVERNING BODY). ELECTIONS ARE HELD EVERY YEAR. OFFICERS ARE UP FOR RE-ELECTION EVERY TWO YEARS. BOARD MEMBERS ARE UP FOR RE-ELECTION EVERY YEAR.

SPRINGFIELD CHAPTER:

MEMBERSHIP BASE ELECTS OFFICERS AND BOARD CAN APPOINT PER CHAPTER BYLAWS.

ST. LOUIS CHAPTER:

THE MEMBERSHIP ELECTS THE BOARD ANNUALLY AT THE MAY MEETING OR THROUGH AN ONLINE PROCESS (JUNE) IF "BYLAW" REQUIREMENTS ARE NOT MET DURING THE MAY MEETING.

TALLAHASSEE CHAPTER:

AT THE ANNUAL MEETING, MEMBERS CAN VOTE ON OFFICERS.

TULSA CHAPTER:

WE HOLD ANNUAL BOARD OF DIRECTOR ELECTIONS IN OUR APRIL MEETING WHERE CHAPTER MEMBERS VOTE FOR EACH POSITION, RESPECTIVELY, BASED ON THE CANDIDATES WHO HAVE BEEN NOMINATED FOR THE POSITION.

UTAH CHAPTER:

THE MEMBERS ELECT CHAPTER OFFICERS.

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CONTROL ASSOCIATION CHAPTERS

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VIRGINIA CHAPTER:

MEMBERS ELECT ALL OFFICERS.

WEST FLORIDA CHAPTER:

CHAPTER MEMBERS ELECT THE BOARD ANNUALLY AND APPROVE THE ANNUAL BUDGET.

WESTERN MICHIGAN CHAPTER:

MEMBERSHIP VOTES FOR BOARD MEMBERS AT GENERAL MEMBERSHIP MEETING.

WESTERN NEW YORK CHAPTER:

PROFESSIONAL ASSOCIATION MEMBERS ELECT OFFICERS AND DIRECTORS DURING AN
ANNUAL GENERAL MEETING HELD IN BATAVIA, NEW YORK.

WILLAMETTE VALLEY CHAPTER:

THE PRESIDENT USES THE APPOINTMENT PROCESS TO PRESENT INDIVIDUALS TO THE
BOARD TO FILL VACATED OR EMPTY BOARD POSITIONS, SUBJECT TO RATIFICATION
OF THE BOARD MEMBERS AT THE NEXT BOARD MEETING.

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

GOVERNING BODY DECISIONS SUBJECT TO APPROVAL
27 OF THE 70 ISACA CHAPTERS ANSWERED "NO" TO LINE 7B.

THE FOLLOWING ISACA CHAPTERS RESPONDED "YES" TO LINE 7B:

ATLANTA CHAPTER:

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

THERE ARE FOUR (4) INSTANCES IN WHICH MEMBER VOTES ARE REQUIRED:

(1) FOR THOSE BUSINESS TRANSACTIONS THE BOARD HAS DETERMINED SHOULD
REQUIRE MEMBER VOTES;

(2) MEMBERS MUST VOTE ON CHAPTER OFFICERS FOR THE BOARD OF DIRECTORS AS
TERMS EXPIRE;

(3) TO EFFECT DISSOLUTION OF THE CHAPTER, THE BYLAWS MUST BE RESCINDED BY
A TWO-THIRDS (2/3) VOTE OF THE CHAPTER MEMBERSHIP; AND

(4) PROPOSED AMENDMENTS TO THE BYLAWS MUST BE PRESENTED TO THE MEMBERSHIP
FOR APPROVAL.

AUSTIN CHAPTER:

APPROVE THE BUDGET AND WHEN AND IF EXPENDITURES ARE MORE THAN \$500 OVER
THE BUDGET.

BOISE CHAPTER:

THE ANNUAL MEMBERSHIP MEETING IS HELD FOR MEMBERSHIP VOTE TO APPROVE THE
GOVERNING BOARD OF DIRECTORS FOR THE FISCAL YEAR, AS PER OUR BYLAWS.

CENTRAL IOWA CHAPTER:

BOARD MEMBER GENERAL ELECTIONS ARE RESERVED FOR THE MEMBERS.

CENTRAL OKLAHOMA CHAPTER:

ANY DECISIONS MADE BY THE GOVERNING BODY THAT HAVE A DIRECT AFFECT ON THE
ORGANIZATION, ARE SUBJECT TO MEMBERSHIP APPROVAL.

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CHICAGO CHAPTER:

THE BOARD HAS TO BE APPROVED.

DENVER CHAPTER:

THE ANNUAL BUDGET IS PRESENTED TO THE MEMBERS FOR APPROVAL. DEVIATIONS
OVER \$1,000 PER LINE ITEM ARE SUBJECT TO MEMBERSHIP APPROVAL.

DETROIT CHAPTER:

GENERAL ELECTION OF THE BOARD OF DIRECTORS IS SUBJECT TO MEMBERS
APPROVAL.

GREATER CINCINNATI CHAPTER:

MEMBERS APPROVE ANY CHANGES TO BYLAWS.

GREATER HARTFORD CHAPTER:

BYLAW REVISIONS AND EXPENSES OUTSIDE OF ANNUAL BUDGET.

GREATER HOUSTON CHAPTER:

SIGNIFICANT MONETARY TRANSACTIONS ARE PRESENTED TO THE MEMBERSHIP FOR
THEIR APPROVAL FROM TIME TO TIME.

HARRISBURG CHAPTER:

BYLAW REVISIONS REQUIRE MEMBER APPROVAL.

HUDSON VALLEY CHAPTER:

Name of the organization INFORMATION SYSTEMS AUDIT AND
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BYLAW CHANGES, ELECTION OF THE BOARD.

ILLINI CHAPTER:

MEMBERS VOTE ON THE APPROVAL OF BYLAWS.

LAS VEGAS CHAPTER:

CERTAIN LARGE EXPENDITURES AND CHANGES TO BYLAWS REQUIRE MEMBER
APPROVAL.

LOS ANGELES CHAPTER:

AS STATED IN THE BYLAWS, BOARD OFFICERS AND DIRECTORS ARE ELECTED BY
MEMBERS ANNUALLY.

MEMPHIS CHAPTER:

CHANGES TO BYLAWS ARE APPROVED VIA VOTE OF ALL MEMBERS.

MIDDLE TENNESSEE CHAPTER:

AMENDMENTS TO THE CHAPTER'S BYLAWS MUST BE ADOPTED BY TWO-THIRDS OF THE
BOARD OF DIRECTORS THEN IN OFFICE. THE AMENDED BYLAWS MUST ALSO BE
APPROVED AT ANY REGULAR MEETING OR ANY SPECIAL MEETING CALLED FOR THIS
PURPOSE BY TWO-THIRDS VOTE OF THE MEMBERS PRESENT. NOTICE OF SUCH
AMENDMENTS MUST BE SENT WITH THE NOTICE OF SUCH MEETING AT LEAST TEN (10)
DAYS PRIOR TO THE DATE OF THE MEETING.

MT. RAINIER CHAPTER:

Name of the organization INFORMATION SYSTEMS AUDIT AND
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MEMBERS HAVE THE RIGHT TO VOTE ON ANY BYLAW CHANGES MADE BY THE BOARD.

NATIONAL CAPITAL AREA CHAPTER:

EVERY YEAR, THE BUDGET IS APPROVED BY THE BOARD, AND THE MEMBERS RECEIVE
A BRIEFING DURING THE CHAPTER AGM REGARDING HOW FUNDS WERE SPENT DURING
THE CHAPTER YEAR.

NEW ENGLAND CHAPTER:

ALL BUSINESS COMING BEFORE THE BOARD OF DIRECTORS FOR APPROVAL SHALL BE
APPROVED BY A MAJORITY OF THOSE PRESENT.

NEW JERSEY CHAPTER:

MEMBERSHIP APPROVES THE BUDGET FOR THE UPCOMING FISCAL YEAR, ANNUALLY.
THE VOTING TO APPROVE THE BUDGET OCCURS DURING THE ANNUAL GENERAL MEETING
HELD IN JUNE OF EACH YEAR.

NEW MEXICO CHAPTER:

PROPOSED CHANGES TO THE BY-LAWS MUST BE APPROVED BY CHAPTER MEMBERS.

NEW ORLEANS CHAPTER:

THE CHAPTER MEMBERS ELECT THE BOARD OF DIRECTORS AND APPROVE THE
CHAPTER'S BY-LAWS.

NEW YORK CITY CHAPTER:

OUR CHAPTER BYLAWS ARE SUBJECT TO A VOTE BY OUR MEMBERSHIP, AFTER BEING

Name of the organization INFORMATION SYSTEMS AUDIT AND
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APPROVED BY THE BOARD OF DIRECTORS.

NORTH TEXAS CHAPTER:

MEMBERSHIP VOTES ON THE BUDGET FOR THE FISCAL YEAR.

NORTHEAST OHIO CHAPTER:

PURCHASES OVER \$5,000 ARE SUBJECT TO APPROVAL BY A MEMBERSHIP VOTE.

YEARLY SLATE OF OFFICERS FOR THE NEXT YEAR IS ALSO SUBJECT TO APPROVAL BY
A MEMBERSHIP VOTE.

NORTHWEST OHIO CHAPTER:

THE ANNUAL BUDGET IS VOTED ON BY THE CHAPTER MEMBERS AT THE ANNUAL
GENERAL MEETING IN MAY EACH YEAR. NON-BUDGETED EXPENDITURES OF MORE THAN
\$1,500 MUST BE APPROVED BY A MAJORITY VOTE OF THE MEMBERS PRESENT AT A
REGULAR CHAPTER MEETING PER OUR BYLAWS.

ORANGE COUNTY CHAPTER:

AS OUTLINED IN OUR BYLAWS AT: HTTP/1 1062

COLONY1.NET/INDEX.CFM/CHAPTER_BYLAW.

SECTION 3. AUTHORITY - THE CHAPTER BOARD SHALL HAVE THE AUTHORITY TO:

A. EXPEND FUNDS ALLOTTED IN THE APPROVED BUDGET.

B. AUTHORIZE NON-BUDGETED EXPENDITURES NOT TO EXCEED THE GREATER DOLLAR
AMOUNT OF EITHER 50% OF THE CURRENT CHAPTER FUNDS ON HAND OR \$25,000
DOLLARS WITHOUT PRIOR APPROVAL OF THE MEMBERSHIP.

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C. RECOMMEND TO THE ASSOCIATION BY A UNANIMOUS VOTE OF THE CHAPTER OFFICERS, THE TERMINATION OF MEMBERSHIP FOR ANY CHAPTER MEMBER WHO, IN THE CHAPTER BOARD'S JUDGMENT, HAS VIOLATED THE BYLAWS OR WHO HAS BEEN GUILTY OF CONDUCT DETRIMENTAL TO THE BEST INTERESTS OF THE CHAPTER OR ASSOCIATION. SUCH TERMINATION BY THE ASSOCIATION SHALL BE FINAL AND SHALL CANCEL ALL RIGHTS, INTEREST, OR PRIVILEGES OF SUCH MEMBERS IN THE SERVICES OR RESOURCES OF THE CHAPTER.

D. DISBURSE THE CHAPTER FUNDS. ANY DISBURSEMENT OVER 10% OF THE CHAPTER'S FUNDS REQUIRES APPROVAL FROM AT LEAST TWO OF THE FIVE CHAPTER OFFICERS.

E. CREATE DISBURSEMENTS. NO OFFICER SHALL CREATE DISBURSEMENTS FOR HIM OR HERSELF.

PHILADELPHIA CHAPTER:

ANNUAL ELECTION OF THE BOARD OF DIRECTORS.

PHOENIX CHAPTER:

AMENDMENT OF CHAPTER BYLAWS REQUIRE A TWO-THIRDS (2/3) VOTE BY THE MEMBER ATTENDING A CHAPTER MEETING. RECOMMENDED CHANGES MUST BE SUBMITTED AT LEAST TEN (10) DAYS PRIOR TO THE MEETING OR IN WRITING AT A PREVIOUS CHAPTER MEETING.

PITTSBURGH CHAPTER:

SINGLE EXPENDITURES ABOVE \$10,000.

RHODE ISLAND CHAPTER:

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CONTROL ASSOCIATION CHAPTERS

Employer identification number

YES, FOR EXAMPLE OUR MEMBERS RECENTLY VOTED ON OUR BYLAWS.

SACRAMENTO CHAPTER:

OFFICER ELECTIONS, BYLAW REVISION(S), AND REMOVAL OF OFFICERS.

SAN ANTONIO/SOUTH TEXAS CHAPTER:

THE MEMBERS ARE ELIGIBLE TO VOTE ON BYLAW CHANGES, ANNUAL FINANCIALS AND
BUDGETS.

SAN DIEGO CHAPTER:

CHAPTER GOVERNANCE MATTERS BROUGHT BEFORE THE GENERAL MEMBERSHIP INCLUDE
THE FOLLOWING:

1. ELECTION OF OFFICERS AND DIRECTORS AT THE ANNUAL GENERAL MEETING OF
THE CHAPTER,
2. AMENDMENTS TO THE CHAPTER BYLAWS
3. THE APPROVAL OF ANY ACTION FOR WHICH THE CALIFORNIA NON-PROFIT MUTUAL
BENEFIT CORPORATION LAW ("THE CODE") ALSO REQUIRES APPROVAL OF THE
MEMBERS OR APPROVAL OF A MAJOIRTY OF ALL MEMBERS.

SAN FRANCISCO CHAPTER:

CHANGES TO CHAPTER BY-LAWS ARE SUBJECT TO APPROVAL BY ISACA AND CHAPTER
MEMBERSHIP.

SILICON VALLEY CHAPTER:

ANY BUDGET OVERRUNS EXCEEDING THE DOLLAR AMOUNT DESCRIBED ON THE CURRENT

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BYLAWS, SHOULD BE APPROVED BY THE GENERAL MEMBERSHIP.

SOUTH FLORIDA CHAPTER:

IF DISSOLUTION OF THE CHAPTER BECOMES INEVITABLE, THE CHAPTER BYLAWS MUST
BE RESCINDED BY TWO-THIRDS (2/3) VOTE OF THE CHAPTER MEMBERSHIP.

SIMILARLY, ANY AMENDMENT TO THE BYLAWS MUST BE APPROVED BY 2/3 OF THE
MEMBERSHIP.

TALLAHASSEE CHAPTER:

MEMBERS CAN VOTE ON BY-LAWS AND DISSOLUTION.

UTAH CHAPTER:

CHANGES TO THE BYLAWS REQUIRE MEMBER APPROVAL.

VIRGINIA CHAPTER:

CHAPTER BOARD MEETING MINUTES ARE PRESENTED AT MONTHLY BOARD MEETINGS FOR
BOARD APPROVAL.

WESTERN NEW YORK:

BOARD ELECTIONS, BUDGET, PROGRAM OF EVENTS.

FORM 990, PART VI, SECTION A, LINE 8B

ORGANIZATION DOCUMENT MEETINGS BY EACH COMMITTEE

51 OF THE 70 ISACA CHAPTERS RESPONDED "YES" TO LINE 8B.

THE FOLLOWING ISACA CHAPTERS RESPONDED "NO" TO LINE 8B:

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Employer identification number

GREATER HEARTFORD CHAPTER:

ALL DECISIONS ARE BROUGHT BACK TO THE BOARD FOR RATIFICATION.

HUDSON VALLEY CHAPTER:

ALTHOUGH OUR BYLAWS ALLOW FOR COMMITTEES THE BOARD HAS BEEN ABLE TO
ACCOMMODATE WITHOUT THE FORMATION OF ANY SPECIFIC COMMITTEES.

ILLOWA CHAPTER:

NO COMMITTEES.

KENTUCKIANA CHAPTER:

THE CHAPTER OPERATES AS ONE BOARD WITH NO COMMITTEES. ALL DECISIONS ARE
MADE BY THE BOARD.

KETTLE MORaine CHAPTER:

NO COMMITTEES.

MEMPHIS CHAPTER:

WE HAVE NO COMMITTEES. EVERYONE WORKS TOGETHER TOWARD ONE GOAL.

MIDDLE TENNESSEE CHAPTER:

NO COMMITTEES WITH AUTHORITY TO ACT FOR THE GOVERNING BODY.

MINNESOTA CHAPTER:

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CONTROL ASSOCIATION CHAPTERS

Employer identification number

MN ISACA DID NOT USE COMMITTEES DURING 2011. ALL ACTIONS AND DECISIONS
ARE THE RESPONSIBILITY AND RESULT OF THE BOARD ACTIVITIES WHICH ARE
DOCUMENTED BY THE SECRETARY AS NOTED IN (8A) ABOVE.

MT. RAINIER CHAPTER:

NO COMMITTEES.

NORTH TEXAS CHAPTER:

COMMITTEES HAVE NO AUTHORITY, THEY ARE ADVISORY ONLY.

PITTSBURGH CHAPTER:

THERE ARE NO STANDING COMMITTEES.

RESEARCH TRIANGLE CHAPTER:

UNLESS PREVIOUSLY AUTHORIZED BY A BOARD MOTION, EACH COMMITTEE REPORTS TO
AND ACTS UPON THE APPROVAL OF THE COMMITTEE OF THE WHOLE (THE BOARD).
COMMITTEES REPORT AT OFFICERS MEETINGS.

SAN DIEGO CHAPTER:

ALL BUSINESS CONDUCTED DURING MONTHLY BOARD MEETINGS.

SC MIDLANDS CHAPTER:

NO COMMITTEES EXIST.

SPRINGFIELD CHAPTER:

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NO COMMITTEE MEETINGS.

TULSA CHAPTER:

NO SUCH COMMITTEE EXISTS FOR THE TULSA CHAPTER.

WEST FLORIDA CHAPTER:

NO COMMITTEE HAS THE AUTHORITY TO ACT ON BEHALF OF THE BOARD.

WESTERN NEW YORK CHAPTER:

COMMITTEE DELIVERABLES AND BRIEFINGS ARE PROVIDED.

WILLAMETTE CHAPTER:

ALL MEETINGS AND WRITTEN ACTIONS WERE CAPTURED IN BOARD MEETINGS AND NO
COMMITTEES WERE UTILIZED.

FORM 990, PART VI, SECTION A, LINE 9

ALTERNATE MAILING ADDRESS

ALL DIRECTORS, TRUSTEES, OFFICERS OR KEY EMPLOYEES CAN BE REACHED AT EACH
CHAPTER'S RESPECTIVE ADDRESS. SEE SCHEDULE O, ATTACHMENT 1 FOR EACH
CHAPTER'S RESPECTIVE ADDRESS.

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

SUMMARY OF THE FORM 990 REVIEW PROCESS

THE 2011 FORM 990 FOR INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION
(ISACA) CHAPTERS WAS PREPARED BY GRANT THORNTON LLP (GRANT THORNTON),
BASED UPON INFORMATION PROVIDED BY ISACA AND ISACA CHAPTERS. THIS

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DOCUMENT SUMMARIZES THE REVIEW POINTS AND AVAILABILITY ASSOCIATED WITH
THE RETURNS.

THE DATA FOR THE RETURN WERE COMPILED BASED ON INFORMATION PREPARED FOR
2011, AS PROVIDED TO ISACA INTERNATIONAL HEADQUARTERS BY ISACA CHAPTERS.
THIS INFORMATION WAS SUBMITTED TO GRANT THORNTON FOR PREPARATION OF THE
RETURNS. IN ADDITION TO THE FINANCIAL INFORMATION RECEIVED, THE NARRATIVE
EXPLANATIONS OF PROGRAM ACCOMPLISHMENTS AND POLICIES PROVIDED BY ISACA
CHAPTERS WERE COORDINATED WITH ISACA INFORMATION BY THE APPROPRIATE STAFF
WITHIN THE MEMBERSHIP AREA. GRANT THORNTON HAD AN OPPORTUNITY TO RAISE
QUESTIONS ABOUT GOVERNANCE AND OTHER ISSUES, AND REQUEST ADDITIONAL
INFORMATION AS NEEDED.

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

-INITIAL REVIEW 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 CHIEF MEMBERSHIP OFFICER AND APPLICABLE
MEMBERS OF THE MANAGEMENT TEAM WERE PROVIDED A COPY OF THE RETURN FOR
REVIEW.

AS THE RETURN REPRESENTS A GROUP RETURN FOR ALL OF THE ISACA CHAPTERS

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WITHIN THE UNITED STATES, THE FINAL REVIEW IS NOT REVIEWED BY ALL US
CHAPTER BOARD MEMBERS. IT IS IMPORTANT TO NOTE THAT THE INFORMATION
PROVIDED BY EACH CHAPTER TO COMPLETE THE RETURN IS ATTESTED TO BY THE
PRESIDENT AND TREASURER FOR EACH RESPECTIVE CHAPTER.

FORM 990, PART VI, SECTION B, LINE 12A

WRITTEN CONFLICT OF INTEREST POLICY

48 OF THE 70 ISACA CHAPTERS RESPONDED "NO" TO LINE 12A.

THE FOLLOWING ISACA CHAPTERS RESPONDED "YES" TO LINE 12A:

ATLANTA CHAPTER

AUSTIN CHAPTER

BATON ROUGE CHAPTER

BIRMINGHAM CHAPTER

CENTRAL FLORIDA CHAPTER

CENTRAL MARYLAND CHAPTER

CHICAGO CHAPTER

DENVER CHAPTER

DETROIT CHAPTER

GREATER HARTFORD CHAPTER

JACKSONVILLE CHAPTER

MINNESOTA CHAPTER

NEW JERSEY CHAPTER

NEW ORLEANS CHAPTER

NEW YORK CITY CHAPTER

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NORTHWEST OHIO CHAPTER

PHILADELPHIA CHAPTER

PITTSBURGH CHAPTER

SILICON VALLEY CHAPTER

SOUTH FLORIDA CHAPTER

VIRGINIA CHAPTER

WEST FLORIDA CHAPTER

THOSE CHAPTERS THAT DO NOT HAVE A WRITTEN CONFLICT OF INTEREST POLICY ARE
BEING ENCOURAGED TO DO SO.

FORM 990, PART VI, SECTION B, LINE 12B

REQUIRED TO DISCLOSE CONFLICT OF INTERESTS ANNUALLY

20 OUT OF THE 22 ISACA CHAPTERS THAT RESPONDED "YES" TO LINE 12A ALSO

RESPONDED "YES" TO LINE 12B.

ATLANTA CHAPTER

AUSTIN CHAPTER

BIRMINGHAM CHAPTER

CENTRAL FLORIDA CHAPTER

CENTRAL MARYLAND CHAPTER

CHICAGO CHAPTER

DENVER CHAPTER

DETROIT CHAPTER

GREATER HARTFORD CHAPTER

JACKSONVILLE CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
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MINNESOTA CHAPTER

NEW JERSEY CHAPTER

NEW ORLEANS CHAPTER

NORTHWEST OHIO CHAPTER

PHILADELPHIA CHAPTER

PITTSBURGH CHAPTER

SILICON VALLEY CHAPTER

SOUTH FLORIDA CHAPTER

VIRGINIA CHAPTER

WEST FLORIDA CHAPTER

FORM 990, PART VI, SECTION B, LINE 12C

COMPLIANCE WITH WRITTEN CONFLICT OF INTEREST POLICY

OF THE 22 ISACA CHAPTERS THAT RESPONDED "YES" TO LINE 12A, THE FOLLOWING
RESPONDED "YES" TO LINE 12C.

ATLANTA CHAPTER:

EACH BOARD MEMBER SIGNS A DISCLOSURE FORM UPON INITIAL ACCEPTANCE TO THE
BOARD AS WELL AS ANNUALLY. ANY KNOWN POTENTIAL CONFLICTS OF INTEREST ARE
MONITORED (E.G. IF A BOARD MEMBER IS A CONSULTANT, THEY WOULD NOT BE
GIVEN ACCESS TO MEMBERSHIP DIRECTORIES, ETC.).

AUSTIN CHAPTER:

ALL OFFICERS MUST SIGN A CONFLICT OF INTEREST STATEMENT ANNUALLY.

BIRMINGHAM CHAPTER:

Name of the organization INFORMATION SYSTEMS AUDIT AND
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BOARD REVIEWS AND APPROVES ALL EXPENDITURES.

CENTRAL FLORIDA CHAPTER:

THE BOARD OF DIRECTORS MONITOR CHAPTER ACTIONS AGAINST THE POLICIES AND
PROCEDURES.

CENTRAL MARYLAND CHAPTER:

THE BOARD OF DIRECTORS MEETS 3 TIMES PER YEAR AND MEMBERS DISCLOSE ANY
POTENTIAL CONFLICTS OF INTEREST PRIOR TO DISCUSSION ON ANY AGENDA ITEMS
AND RECUSAL FROM VOTING ON THOSE AGENDA ITEMS; THIS ALSO APPLIES TO ANY
E-VOTE ITEMS THAT ARISE BETWEEN BOARD MEETINGS.

CHICAGO CHAPTER:

POTENTIAL CONFLICTS ARE DISCUSSED WITH OFFICERS AND DIRECTORS IN CHARGE
OF FUNDING AND PAYMENT. VENDOR CHOICES AND LOCATIONS ARE DISCUSSED IN
BOARD MEETINGS AND APPROVED AS APPROPRIATE. BUDGETS ARE APPROVED ON AN
ANNUAL BASIS AND FOR ITEMS OUTSIDE THE BUDGET BOARD APPROVAL IS
REQUESTED. DECISIONS ON LARGE SPEND ARE MADE BASED ON LOGISTICAL REASONS
(NUMBER OF SEATS, ETC.).

DENVER CHAPTER:

OFFICERS MUST DISCLOSE AND SIGN WHEN THEY JOIN THE BOARD. TREASURER IS
AWARE OF THE TRANSACTIONS AND INTERESTS AS DISCLOSED.

DETROIT CHAPTER:

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

BOARD MEMBERS ARE REQUIRED TO SIGN CONFLICT OF INTEREST DOCUMENT EVERY
YEAR. MONTHLY BOARD MEETINGS ARE CONDUCTED TO REVIEW ACTIVITIES AND
IMPLEMENT SEPARATION OF DUTIES.

GREATER HARFORD CHAPTER:

AT EACH BOARD MEETING THE POLICY IS REVIEWED ORALLY AND COMPLIANCE
INDICATED BY EACH MEMBER OF THE BOARD.

JACKSONVILLE CHAPTER:

THE BOARD SIGNS A FORM AT THE BEGINNING OF EACH YEAR AND CHAPTER BOARD
MONITORS.

MINNESOTA CHAPTER:

ALL CHAPTER ACTIVITIES, E.G., TRAINING EVENTS, ETC., ARE REVIEWED AND
APPROVED BY THE BOARD PRIOR TO EVENTS TAKING PLACE. MOST SERVICES SUCH AS
HOTEL HOST SELECTION ARE ARRANGED THROUGH THIRD PARTY SUPPLIER TO THE
CHAPTER (EWALD). MONTHLY FINANCIALS AS PREPARED BY THE TREASURER ARE
REVIEWED BY A DIRECTOR FOR COMPLETENESS, ACCURACY AND APPROPRIATENESS.
FINANCIALS ARE REVIEWED AND APPROVED BY THE BOARD. THIS INCLUDES
SUBMITTED EXPENSES.

NEW JERSEY CHAPTER:

BOARD IS BOUND BY ISACA INTERNATIONAL POLICIES AND PROCEDURES REGARDING
CONFLICT OF INTEREST.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

NEW ORLEANS CHAPTER:

REQUIRED ALL BOARD MEMBERS TO READ AND SIGN A CONFLICT OF INTEREST POLICY
AND DISCLOSE INTERESTS THAT COULD GIVE RISE TO CONFLICTS ANNUALLY.

PHILADELPHIA CHAPTER:

APPROVAL OF VENDORS AND DISBURSEMENTS REQUIRE AT LEAST TWO BOARD MEMBERS
PRIOR TO COMPLETION OF EACH TRANSACTION.

PITTSBURGH CHAPTER:

DIRECTORS ARE NOT HIRED TO PROVIDE SERVICES TO THE CHAPTER.

SILICON VALLEY CHAPTER:

BYLAWS ARE PUBLISHED ON THE CHAPTER WEBSITE ALONG WITH POLICIES,
PROCEDURES. THERE IS NO FORMALLY WRITTEN CONFLICT OF INTEREST POLICY,
HOWEVER THE CONFLICT OF INTEREST DECLARATION, WHICH IS NOT PUBLICLY
AVAILABLE, DESCRIBES THE CHAPTER'S CONFLICT OF INTEREST PRACTICES. THESE
ARE PROVIDED TO MEMBERS WHO ARE CONTESTING THE BOARD POSITIONS.

SOUTH FLORIDA CHAPTER:

MEMBERS HOLDING OFFICE ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST
FORM ANNUALLY.

VIRGINIA CHAPTER:

BOARD MEMBERS ARE ASKED ANNUALLY TO IDENTIFY ANY CONFLICTS. CONFLICTS ARE
DOCUMENTED AND REVIEWED WITH THE BOARD.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

WEST FLORIDA CHAPTER:

THE BOARD CONTINUALLY MONITORS FOR CONFLICTS THROUGH REVIEW AND OVERSIGHT
OF CHAPTER ACTIVITIES.

FORM 990, PART VI, SECTION B, LINE 13

WHISTLEBLOWER POLICY

68 OF THE 70 ISACA CHAPTERS ANSWERED "NO" TO LINE 13.

THE FOLLOWING ISACA CHAPTER RESPONDED "YES" TO LINE 13:

JACKSONVILLE CHAPTER

MINNESOTA CHAPTER

THOSE CHAPTERS THAT DO NOT HAVE A WRITTEN WHISTLEBLOWER POLICY ARE BEING
ENCOURAGED TO DO SO.

FORM 990, PART VI, SECTION B, LINE 14

DOCUMENT RETENTION AND DESTRUCTION POLICY

65 OF THE 70 ISACA CHAPTERS ANSWERED "NO" TO LINE 14.

THE FOLLOWING ISACA CHAPTERS RESPONDED "YES" TO LINE 14:

BIRMINGHAM CHAPTER

DETROIT CHAPTER

JACKSONVILLE CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

MINNESOTA CHAPTER

SILICON VALLEY CHAPTER

THOSE CHAPTERS THAT DO NOT HAVE A WRITTEN DOCUMENT RETENTION AND
DESTRUCTION POLICY ARE BEING ENCOURAGED TO DO SO.

FORM 990, PART VI, SECTION B, LINE 15

PROCESS FOR DETERMINING COMPENSATION

AS THERE ARE NO INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA)
CHAPTERS THAT HAVE OFFICERS OR EMPLOYEES THAT ARE COMPENSATED, THERE ARE
NO SPECIFIC PROCESSES FOR DETERMINING COMPENSATION FOR THE CEO, EXECUTIVE
DIRECTOR(S), TOP MANAGEMENT OFFICIALS, OFFICERS OR KEY EMPLOYEES.

FORM 990, PART VI, SECTION C, LINE 19

INFORMATION MADE AVAILABLE TO THE PUBLIC

32 OF THE 70 ISACA CHAPTERS MAKE THEIR GOVERNING DOCUMENTS, CONFLICT OF
INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC:

ATLANTA CHAPTER:

FINANCIAL STATEMENTS ARE AVAILABLE ON THE CHAPTER WEBSITE.

BIRMINGHAM CHAPTER:

THE CHAPTER BYLAWS AND FINANCIALS ARE PROVIDED TO MEMBERS UPON REQUEST.

BOISE CHAPTER:

THE CHAPTER BYLAWS ARE POSTED ON THE CHAPTER WEBSITE.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

CENTRAL FLORIDA CHAPTER:

POLICIES & MEETING NOTES ARE POSTED ON THE WEBSITE AND ANNUAL FINANCIALS
ARE PROVIDED AT THE ANNUAL AGM MEETING.

CENTRAL MARYLAND CHAPTER:

THE CENTRAL MARYLAND CHAPTER'S BYLAWS ARE POSTED AND AVAILABLE VIA
DOWNLOAD ON THE CHAPTER'S WEBSITE. CONFLICT OF INTEREST POLICY AND
FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC AT THIS TIME.

CENTRAL OHIO CHAPTER:

BYLAWS CAN BE FOUND ON THE CHAPTER WEBSITE.

CENTRAL OKLAHOMA CHAPTER:

THE BYLAWS ARE AVAILABLE ON THE CENTRAL OKLAHOMA ISACA WEBSITE.

CHARLOTTE CHAPTER:

THE CHAPTER PROVIDES THE GOVERNING DOCUMENTS UPON REQUEST AND MAKES
AVAILABLE ON THE CHAPER WEBSITE THE CHAPTER BYLAWS.

CHICAGO CHAPTER:

THE CHAPTER PROVIDES THE CHAPTER BYLAWS ON THE CHAPTER WEBSITE.

DENVER CHAPTER:

AVAILABLE ON CHAPTER WEBSITE.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

GREATER CINCINNATI CHAPTER:

BYLAWS ARE POSTED ON THE WEBSITE.

GREATER HEARTFORD CHAPTER:

BYLAWS ARE AVAILABLE ON CHAPTER WEBSITE.

GREATER KANSAS CHAPTER:

BYLAWS ARE POSTED ON THE CHAPTER WEBSITE. ANY MEETING MINUTES ARE
AVAILABLE UPON REQUEST.

HARRISBURG CHAPTER:

BYLAWS ARE PUBLISHED ON THE CHAPTER WEBSITE.

ILLOWA CHAPTER:

CHAPTER BYLAWS ARE POSTED TO THE CHAPTER WEBSITE.

KENTUCKIANA CHAPTER:

AVAILABLE UPON REQUEST.

LOS ANGELES CHAPTER:

PRIVACY STATEMENT, BYLAWS, AND LEGAL NOTICE ARE AVAILABLE ON THE CHAPTER
WEBSITE AT WWW.ISACALA.ORG.

MIDDLE TENNESSEE CHAPTER:

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

CHAPTER BYLAWS ARE AVAILABLE TO THE PUBLIC AT WWW.ISACANASHVILLE.ORG.

FINANCIAL STATEMENTS ARE NOT PUBLICLY AVAILABLE. THE CHAPTER DOES NOT
HAVE A CONFLICT OF INTEREST POLICY.

MINNESOTA CHAPTER:

DOCUMENTATION IS AVAILABLE TO MEMBERS THROUGH THE MN CHAPTER WEBSITE.
DOCUMENTATION DEEMED LESS SENSITIVE IS AVAILABLE TO THE GENERAL PUBLIC
ALSO VIA THE MN CHAPTER WEBSITE - PUBLIC AREAS. THE DOCUMENTS CONSIST OF
THE CHAPTER BYLAWS AND ARTICLES OF INCORPORATION.

NEW JERSEY CHAPTER:

FINANCIALS PRESENTED DURING ANNUAL AGM MEETING AND ALL GOVERNING
DOCUMENTS ARE AVAILABLE UPON REQUEST TO ANY MEMBER IN GOOD STANDING.

NEW YORK CITY CHAPTER:

THE CHAPTER BYLAWS ARE AVAILABLE ON THE PUBLIC WEBSITE OF THE
ORGANIZATION.

OMAHA CHAPTER:

THE CHAPTER PROVIDES THE BYLAWS AND FINANCIAL STATEMENTS UPON REQUEST.

PHILADELPHIA CHAPTER:

THE CHAPTER BYLAWS ARE PROVIDED ON THE CHAPTER WEBSITE.

PUGET SOUND CHAPTER:

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

BYLAWS ARE AVAILABLE THROUGH THE PUGET SOUND ISACA CHAPTER WEBSITE.

SACRAMENTO CHAPTER:

BYLAWS ARE ON THE CHAPTER WEBSITE; ANNUAL FINANCIAL REPORT AT THE AGM;
AND UPON REQUEST.

SAN ANTONIO/SOUTH TEXAS CHAPTER:

WE DISCLOSE DURING OUR GENERAL ANNUAL MEETING OUR FINANCES AND THEY ARE
AVAILABLE UPON REQUEST BY MEMBERS.

SAN DIEGO CHAPTER:

THE CHAPTER BYLAWS ARE AVAILABLE ON THE CHAPTER WEBSITE AND CAN BE
OBTAINED ON REQUEST.

SAN FRANCISCO CHAPTER:

THE CHAPTER BYLAWS ARE AVAILABLE ON THE CHAPTER WEBSITE AND AVAILABLE TO
SUBSCRIBED MEMBERSHIP IN YAHOOGROUPS.

SILICON VALLEY CHAPTER:

BYLAWS ARE PUBLISHED ON THE CHAPTER WEBSITE ALONG WITH POLICIES,
PROCEDURES, INCLUDING PRIVACY POLICY. THE CONFLICT OF INTEREST
DECLARATION IS NOT PUBLICLY AVAILABLE. THESE ARE PROVIDED TO MEMBERS WHO
ARE CONTESTING THE BOARD POSITIONS. THE FINANCIAL INFORMATION IS
RESTRICTED TO THE BOARD.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

SOUTH FLORIDA CHAPTER:

THE CHAPTER BYLAWS ARE POSTED TO CHAPTER WEBSITE.

ST. LOUIS CHAPTER:

THE CHAPTER BYLAWS ARE POSTED ON THE CHAPTER WEBSITE.

WESTERN MICHIGAN CHAPTER:

THE CHAPTER BYLAWS ARE AVAILABLE ON THE CHAPTER WEBSITE AND THE CHAPTER
WILL E-MAIL NEW BYLAWS TO MEMBERS PRIOR TO VOTE.

FORM 990, PART XI, LINE 5

RECONCILIATION OF NET ASSETS

PRIOR PERIOD ADJUSTMENTS WERE MADE BY THE FOLLOWING CHAPTERS:

RESEARCH TRIANGLE CHAPTER	7,059.
BATON ROUGE CHAPTER	10,278.
KENTUCKIANA CHAPTER	-21,286.
ATLANTA CHAPTER	80.
GREATER HEARTFORD CHAPTER	7,236.
NEW ENGLAND CHAPTER	300.
ADDITIONAL CHAPTERS (BELOW THRESHOLD)	891,111.
ADDITIONAL CHAPTERS (NOT REPORTED IN PRIOR YEAR)	-41,473.
TOTAL	-853,305.

FORM 990, PART XII, LINE 2C

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ORGANIZATION'S FINANCIAL STATEMENTS

IT IS RECOMMENDED THAT INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) CHAPTERS ESTABLISH AN INDEPENDENT AUDIT COMMITTEE, EITHER FOR THE PURPOSE OF CONDUCTING AN ANNUAL AUDIT OR TO OVERSEE THE ENGAGEMENT OF AN EXTERNAL AUDITOR. BASED ON ESTABLISHED AUDIT THRESHOLDS FOR NONPROFITS, AN EXTERNAL AUDIT IS NOT REQUIRED OF ALL ISACA CHAPTERS. THE RESULTS OF THE AUDIT COMPLETED BY THE CHAPTER SHALL BE REPORTED TO THE MEMBERS OF THE RESPECTIVE CHAPTER. ALL ISACA CHAPTERS ARE REQUIRED TO OBTAIN AN AUDIT VERIFICATION LETTER THAT MUST BE TURNED IN TO ISACA INTERNATIONAL HEADQUARTERS.

ATTACHMENT 1

FORM 990, LINE H(B) - AFFILIATED ORGANIZATIONS INCLUDED

ANCHORAGE CHAPTER
P.O. BOX 240353
ANCHORAGE, AK 99524-0353
71-0937387
177

ATLANTA CHAPTER
4780 ASHFORD DUNWOODY RD. STE. A475
ATLANTA, GA 30338-5504
58-1353296
039

AUSTIN CHAPTER
P.O. BOX 13468
AUSTIN, TX 78711-3468
74-1909256
020

BATON ROUGE CHAPTER
14351 BRENTWOOD CT.
GONZALES, LA 70737
72-1056363
085

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ATTACHMENT 1 (CONT'D)

FORM 990, LINE H(B) - AFFILIATED ORGANIZATIONS INCLUDED

BIRMINGHAM CHAPTER

P.O. BOX 59623
BIRMINGHAM, AL 35259-9623
63-0829301
065

BOISE CHAPTER

5125 N. RED HILLS AVE.
MERIDIAN, ID 83646
82-0353193
042

CENTRAL ARKANSAS CHAPTER

14525 WIMBLEDON LOOP
LITTLE ROCK, AR 72210
52-1315583
082

CENTRAL FLORIDA CHAPTER

1681 ARASH CIR.
PORT ORANGE, FL 32128-7323
59-2370745
067

CENTRAL INDIANA CHAPTER

P.O. BOX 441257
INDIANAPOLIS, IN 46244-1257
35-1513580
056

CENTRAL IOWA CHAPTER

801 GRAND AVE., STE. 3000
DES MOINES, IA 50309-2764
42-1296228
110

CENTRAL MARYLAND CHAPTER

P.O. BOX 434
LINTHICUM, MD 21090
94-2511599
024

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ATTACHMENT 1 (CONT'D)

FORM 990, LINE H(B) - AFFILIATED ORGANIZATIONS INCLUDED

CENTRAL NEW YORK CHAPTER
P.O. BOX 15064
SYRACUSE, NY 13215-0064
16-1107127
029

CENTRAL OHIO CHAPTER
P.O. BOX 151152
COLUMBUS, OH 43215
31-0930271
027

CENTRAL OKLAHOMA CHAPTER
17407 BETHEL RD.
SHAWNEE, OK 74801-2952
73-1206933
049

CHARLOTTE CHAPTER
651 E. 8TH ST., APT. 307
CHARLOTTE, NC 28202-2954
56-1283238
051

CHICAGO CHAPTER
P.O. BOX 81627
CHICAGO, IL 60681
23-7288003
002

DENVER CHAPTER
6441 S. POTOMAC ST.
CENTENNIAL, CO 80111
84-0727216
016

DETROIT CHAPTER
16592 HOUGHTON DR.
LIVONIA, MI 48154
23-7410401
008

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ATTACHMENT 1 (CONT'D)

FORM 990, LINE H(B) - AFFILIATED ORGANIZATIONS INCLUDED

GREATER CINCINNATI CHAPTER
2216 DOMINION DR.
FT. MITCHELL, KY 41017-2017
23-7291478
003

GREATER HARTFORD CHAPTER
P.O. BOX 231344
HARTFORD, CT 06123-1344
36-3538336
028

GREATER HOUSTON CHAPTER
P.O. BOX 2424
HOUSTON, TX 77252-2424
23-7419148
009

GREATER KANSAS CITY CHAPTER
P.O. BOX 26066
KANSAS CITY, MO 64196
43-1338861
087

HARRISBURG CHAPTER
P.O. BOX 482
CAMP HILL, PA 17001
23-2116311
045

HAWAII CHAPTER
1132 BISHOP ST., STE. 1200
HONOLULU, HI 96813
99-0219334
071

HUDSON VALLEY CHAPTER
P.O. BOX 1458
ALBANY, NY 12201
22-3001385
120

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ATTACHMENT 1 (CONT'D)

FORM 990, LINE H(B) - AFFILIATED ORGANIZATIONS INCLUDED

ILLINI CHAPTER
P.O. BOX 2322
DECATUR, IL 62525
37-1141574
077

ILLOWA CHAPTER
3025 4TH ST.
MARION, IA 52302
36-4428918
169

JACKSONVILLE CHAPTER
621 PARADISE CT.
ATLANTIC BEACH, FL 32233-6946
59-2155120
058

KENTUCKIANA CHAPTER
9203 FEATHERBELL BLVD.
PROSPECT, KY 40059
61-0942117
037

KETTLE MORaine CHAPTER
W. 281 N4930 THEODORES COVE
PEWAUKEE, WI 53072
39-1400443
057

LAS VEGAS CHAPTER
7408 CHORLEYWOOD WAY
LAS VEGAS, NV 89131
20-3339497
187

LOS ANGELES CHAPTER
P.O. BOX 712726
LOS ANGELES, CA 90071-7726
23-7294468
001

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ATTACHMENT 1 (CONT'D)

FORM 990, LINE H(B) - AFFILIATED ORGANIZATIONS INCLUDED

MEMPHIS CHAPTER
316 N. AVALON ST.
MEMPHIS, TN 38112
62-1083062
048

MIDDLE TENNESSEE CHAPTER
P.O. BOX 330443
NASHVILLE, TN 37203
62-1261485
102

MINNESOTA CHAPTER
1000 WESTGATE DR., STE. 252
ST. PAUL, MN 55114
41-6175157
007

MT. RAINIER CHAPTER
P.O. BOX 6551
OLYMPIA, WA 98504
91-1557795
129

NATIONAL CAPITAL AREA CHAPTER
P.O. BOX 77533
WASHINGTON, DC 20013-7533
23-7360726
005

NEW ENGLAND CHAPTER
P.O. BOX 1181
BOSTON, MA 02117
04-2592391
018

NEW JERSEY CHAPTER
101 E. OAK ST., #1-3
OAKLAND, NJ 07436
22-2203291
030

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ATTACHMENT 1 (CONT'D)FORM 990, LINE H(B) - AFFILIATED ORGANIZATIONS INCLUDED

NEW MEXICO CHAPTER
1007 EL PUEBLO RD. NW
ALBUQUERQUE, NM 87114
85-0333609
083

NEW ORLEANS CHAPTER
P.O. BOX 6075
METAIRIE, LA 70009-6075
72-0946429
061

NEW YORK CITY CHAPTER
954 LEXINGTON AVE., STE. 525
NEW YORK, NY 10021-5013
13-2843396
010

NORTH TEXAS CHAPTER
P.O. BOX 25026
DALLAS, TX 75225-1026
94-2511603
012

NORTHEAST OHIO CHAPTER
9110 TRACY TRL.
PARMA, OH 44130
94-2579763
026

NORTHWEST OHIO CHAPTER
6556 BROWN RD.
OREGON, OH 43616
20-5770701
188

OMAHA CHAPTER
1804 S. 175 AVE.
OMAHA, NE 68130
47-0592567
023

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ATTACHMENT 1 (CONT'D)FORM 990, LINE H(B) - AFFILIATED ORGANIZATIONS INCLUDED

ORANGE COUNTY CHAPTER

19232 SHERBORNE LN.

HUNTINGTON BEACH, CA 92646-2031

33-0024331

079

PHILADELPHIA CHAPTER

P.O. BOX 58155

PHILADELPHIA, PA 19102-8155

23-7357842

006

PHOENIX CHAPTER

P.O. BOX 63211

PHOENIX, AZ 85082

86-0404629

053

PITTSBURGH CHAPTER

P.O. BOX 544

PITTSBURGH, PA 15230

25-1296635

013

PUGET SOUND CHAPTER

14608 NE 65TH CT.

REDMOND, WA 98052-4676

91-1044622

035

RESEARCH TRIANGLE CHAPTER

1695 COBBLESTONE DR.

CREEDMOOR, NC 27522

58-1462671

059

RHODE ISLAND CHAPTER

P.O. BOX 6262

PROVIDENCE, RI 02940

26-0718191

197

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ATTACHMENT 1 (CONT'D)

FORM 990, LINE H(B) - AFFILIATED ORGANIZATIONS INCLUDED

SACRAMENTO CHAPTER
P.O. BOX 2025
RANCHO CORDOVA, CA 95741
94-2910488
076

SAN ANTONIO/SOUTH TEXAS CHAPTER
P.O. BOX 780265
SAN ANTONIO, TX 78278
74-2287352
081

SAN DIEGO CHAPTER
3425 LEBON DR., APT. 521
SAN DIEGO, CA 92122
95-3095287
019

SAN FRANCISCO CHAPTER
P.O. BOX 26675
SAN FRANCISCO, CA 94126
94-2390101
015

SC MIDLANDS CHAPTER
9 OLIVE BRANCH CT.
ELGIN, SC 29045
57-0709139
054

SILICON VALLEY CHAPTER
P.O. BOX 2105
CUPERTINO, CA 95015-2105
94-2819289
062

SOUTH FLORIDA CHAPTER
P.O. BOX 450278
SUNRISE, FL 33345
94-2683400
033

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ATTACHMENT 1 (CONT'D)

FORM 990, LINE H(B) - AFFILIATED ORGANIZATIONS INCLUDED

SPRINGFIELD MISSOURI CHAPTER
HC 63 BOX 33-5
CAULFIELD, MO 65626
45-2250186
214

ST. LOUIS CHAPTER
711 JUDSON MANOR DR.
ST. LOUIS, MO 63141
51-0161367
011

TALLAHASSEE CHAPTER
9516 STARHAWK DR.
TALLAHASSEE, FL 32309
45-3664518
213

TULSA CHAPTER
1825 N. 13TH ST.
BROKEN ARROW, OK 74012-8256
73-1086325
034

UTAH CHAPTER
2877 DELSA DR.
HOLLADAY, UT 84124
87-6162790
004

VIRGINIA CHAPTER
P.O. BOX 11564
RICHMOND, VA 23230-1564
54-1036448
022

WEST FLORIDA CHAPTER
P.O. BOX 1101
TAMPA, FL 33602
59-1933237
041

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

Employer identification number

ATTACHMENT 1 (CONT'D)

FORM 990, LINE H(B) - AFFILIATED ORGANIZATIONS INCLUDED

WESTERN MICHIGAN CHAPTER
206 HI MOUNT CIR.
LANSING, MI 48906
36-3007751
038

WESTERN NEW YORK CHAPTER
P.O. BOX 1321
PITTSFORD, NY 14534
27-1034705
046

WILLAMETTE VALLEY CHAPTER
P.O. BOX 413, 1505 SW 6TH
PORTLAND, OR 97207
36-3538334
050

ATTACHMENT 2

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

INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) CHAPTERS'
MISSION IS TO SERVE BOTH INDIVIDUALS AND ENTERPRISES BY BEING A LOCAL
PROVIDER OF KNOWLEDGE, CERTIFICATION EXAM REVIEW, COMMUNITY, ADVOCACY
AND EDUCATION ON SUBJECTS SUCH AS INFORMATION SYSTEMS ASSURANCE AND
SECURITY, GOVERNANCE OF ENTERPRISE OF IT (INFORMATION TECHNOLOGY),
AND IT-RELATED RISK AND COMPLIANCE.

THE ISACA CHAPTERS SUPPORT AND ENHANCE RELATIONSHIPS AMONG THE
FACULTY AND STUDENT BODIES OF LOCAL COLLEGES AND UNIVERSITIES BY
PROMOTING STUDENT MEMBERSHIP IN ISACA, NETWORKING WITH FACULTY AND
STUDENTS INTERESTED IN LEARNING MORE ABOUT THE INFORMATION SYSTEMS
AUDIT AND SECURITY PROFESSION, AND ENCOURAGING COMPLIANCE WITH
ISACA'S STANDARDS AND CODE OF PROFESSIONAL ETHICS.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ATTACHMENT 3FORM 990, PART III - PROGRAM SERVICE, LINE 4A

INFORMATION TECHNOLOGY IS A RAPIDLY CHANGING INDUSTRY, AND IT DEMANDS A COMMITMENT ON THE PART OF ITS PRACTITIONERS TO LEARN CONTINUOUSLY AND MASTER NEW SKILLS. INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) CHAPTERS' PRIMARY PURPOSE IS TO SERVE THEIR LOCAL MEMBERS BY OFFERING BENEFITS IN THE FOLLOWING CATEGORIES: EDUCATION/PROFESSIONAL DEVELOPMENT, NETWORKING AND RELATIONS, AND ACADEMIC SUPPORT. EDUCATIONAL EVENTS FOR PROFESSIONAL DEVELOPMENT INCLUDE OPPORTUNITIES SUCH AS TRAINING LUNCHEONS, SEMINARS, CONFERENCES AND CERTIFICATION EXAM REVIEW COURSES. THE CHAPTERS ALSO FACILITATE LOCAL NETWORKING BY OFFERING OPPORTUNITIES TO BUILD RELATIONSHIPS WITH OTHER PROFESSIONALS AND ORGANIZATIONS WITH RELATED INTERESTS THROUGH CHAPTER AND COMMITTEE MEETINGS, NETWORKING EVENTS, AND EDUCATIONAL EVENTS. A SENSE OF COMMUNITY IS ALSO PROMOTED THROUGH THE CHAPTER WEB SITE.

AFFILIATED ORGANIZATIONS INC

ANCHORAGE CHAPTER

P.O. BOX 240353

ANCHORAGE, AK 99524-0353

71-0937387

177

ATLANTA CHAPTER

4780 ASHFORD DUNWOODY RD. STE. A475

ATLANTA, GA 30338-5504

58-1353296

039

AUSTIN CHAPTER

P.O. BOX 13468

AUSTIN, TX 78711-3468

74-1909256

020

BATON ROUGE CHAPTER

14351 BRENTWOOD CT.

GONZALES, LA 70737

72-1056363

085

BIRMINGHAM CHAPTER

P.O. BOX 59623

BIRMINGHAM, AL 35259-9623

63-0829301

065

BOISE CHAPTER

5125 N. RED HILLS AVE.

MERIDIAN, ID 83646

82-0353193

042

CENTRAL ARKANSAS CHAPTER

14525 WIMBLEDON LOOP

LITTLE ROCK, AR 72210

52-1315583

082

AFFILIATED ORGANIZATIONS INC

CENTRAL FLORIDA CHAPTER
1681 ARASH CIR.
PORT ORANGE, FL 32128-7323
59-2370745
067

CENTRAL INDIANA CHAPTER
P.O. BOX 441257
INDIANAPOLIS, IN 46244-1257
35-1513580
056

CENTRAL IOWA CHAPTER
801 GRAND AVE., STE. 3000
DES MOINES, IA 50309-2764
42-1296228
110

CENTRAL MARYLAND CHAPTER
P.O. BOX 434
LINTHICUM, MD 21090
94-2511599
024

CENTRAL NEW YORK CHAPTER
P.O. BOX 15064
SYRACUSE, NY 13215-0064
16-1107127
029

CENTRAL OHIO CHAPTER
P.O. BOX 151152
COLUMBUS, OH 43215
31-0930271
027

CENTRAL OKLAHOMA CHAPTER
17407 BETHEL RD.
SHAWNEE, OK 74801-2952
73-1206933
049

AFFILIATED ORGANIZATIONS INC

CHARLOTTE CHAPTER
651 E. 8TH ST., APT. 307
CHARLOTTE, NC 28202-2954
56-1283238
051

CHICAGO CHAPTER
P.O. BOX 81627
CHICAGO, IL 60681
23-7288003
002

DENVER CHAPTER
6441 S. POTOMAC ST.
CENTENNIAL, CO 80111
84-0727216
016

DETROIT CHAPTER
16592 HOUGHTON DR.
LIVONIA, MI 48154
23-7410401
008

GREATER CINCINNATI CHAPTER
2216 DOMINION DR.
FT. MITCHELL, KY 41017-2017
23-7291478
003

GREATER HARTFORD CHAPTER
P.O. BOX 231344
HARTFORD, CT 06123-1344
36-3538336
028

GREATER HOUSTON CHAPTER
P.O. BOX 2424
HOUSTON, TX 77252-2424
23-7419148
009

AFFILIATED ORGANIZATIONS INC

GREATER KANSAS CITY CHAPTER
P.O. BOX 26066
KANSAS CITY, MO 64196
43-1338861
087

HARRISBURG CHAPTER
P.O. BOX 482
CAMP HILL, PA 17001
23-2116311
045

HAWAII CHAPTER
1132 BISHOP ST., STE. 1200
HONOLULU, HI 96813
99-0219334
071

HUDSON VALLEY CHAPTER
P.O. BOX 1458
ALBANY, NY 12201
22-3001385
120

ILLINI CHAPTER
P.O. BOX 2322
DECATUR, IL 62525
37-1141574
077

ILLOWA CHAPTER
3025 4TH ST.
MARION, IA 52302
36-4428918
169

JACKSONVILLE CHAPTER
621 PARADISE CT.
ATLANTIC BEACH, FL 32233-6946
59-2155120
058

AFFILIATED ORGANIZATIONS INC

KENTUCKIANA CHAPTER
9203 FEATHERBELL BLVD.
PROSPECT, KY 40059
61-0942117
037

KETTLE MORAINÉ CHAPTER
W. 281 N4930 THEODORES COVE
PEWAUKEE, WI 53072
39-1400443
057

LAS VEGAS CHAPTER
7408 CHORLEYWOOD WAY
LAS VEGAS, NV 89131
20-3339497
187

LOS ANGELES CHAPTER
P.O. BOX 712726
LOS ANGELES, CA 90071-7726
23-7294468
001

MEMPHIS CHAPTER
316 N. AVALON ST.
MEMPHIS, TN 38112
62-1083062
048

MIDDLE TENNESSEE CHAPTER
P.O. BOX 330443
NASHVILLE, TN 37203
62-1261485
102

MINNESOTA CHAPTER
1000 WESTGATE DR., STE. 252
ST. PAUL, MN 55114
41-6175157
007

AFFILIATED ORGANIZATIONS INC

MT. RAINIER CHAPTER
P.O. BOX 6551
OLYMPIA, WA 98504
91-1557795
129

NATIONAL CAPITAL AREA CHAPTER
P.O. BOX 77533
WASHINGTON, DC 20013-7533
23-7360726
005

NEW ENGLAND CHAPTER
P.O. BOX 1181
BOSTON, MA 02117
04-2592391
018

NEW JERSEY CHAPTER
101 E. OAK ST., #1-3
OAKLAND, NJ 07436
22-2203291
030

NEW MEXICO CHAPTER
1007 EL PUEBLO RD. NW
ALBUQUERQUE, NM 87114
85-0333609
083

NEW ORLEANS CHAPTER
P.O. BOX 6075
METAIRIE, LA 70009-6075
72-0946429
061

NEW YORK CITY CHAPTER
954 LEXINGTON AVE., STE. 525
NEW YORK, NY 10021-5013
13-2843396
010

AFFILIATED ORGANIZATIONS INC

NORTH TEXAS CHAPTER
P.O. BOX 25026
DALLAS, TX 75225-1026
94-2511603
012

NORTHEAST OHIO CHAPTER
9110 TRACY TRL.
PARMA, OH 44130
94-2579763
026

NORTHWEST OHIO CHAPTER
6556 BROWN RD.
OREGON, OH 43616
20-5770701
188

OMAHA CHAPTER
1804 S. 175 AVE.
OMAHA, NE 68130
47-0592567
023

ORANGE COUNTY CHAPTER
19232 SHERBORNE LN.
HUNTINGTON BEACH, CA 92646-2031
33-0024331
079

PHILADELPHIA CHAPTER
P.O. BOX 58155
PHILADELPHIA, PA 19102-8155
23-7357842
006

PHOENIX CHAPTER
P.O. BOX 63211
PHOENIX, AZ 85082
86-0404629
053

AFFILIATED ORGANIZATIONS INC

PITTSBURGH CHAPTER
P.O. BOX 544
PITTSBURGH, PA 15230
25-1296635
013

PUGET SOUND CHAPTER
14608 NE 65TH CT.
REDMOND, WA 98052-4676
91-1044622
035

RESEARCH TRIANGLE CHAPTER
1695 COBBLESTONE DR.
CREEDMOOR, NC 27522
58-1462671
059

RHODE ISLAND CHAPTER
P.O. BOX 6262
PROVIDENCE, RI 02940
26-0718191
197

SACRAMENTO CHAPTER
P.O. BOX 2025
RANCHO CORDOVA, CA 95741
94-2910488
076

SAN ANTONIO/SOUTH TEXAS CHAPTER
P.O. BOX 780265
SAN ANTONIO, TX 78278
74-2287352
081

SAN DIEGO CHAPTER
3425 LEBON DR., APT. 521
SAN DIEGO, CA 92122
95-3095287
019

AFFILIATED ORGANIZATIONS INC

SAN FRANCISCO CHAPTER
P.O. BOX 26675
SAN FRANCISCO, CA 94126
94-2390101
015

SC MIDLANDS CHAPTER
9 OLIVE BRANCH CT.
ELGIN, SC 29045
57-0709139
054

SILICON VALLEY CHAPTER
P.O. BOX 2105
CUPERTINO, CA 95015-2105
94-2819289
062

SOUTH FLORIDA CHAPTER
P.O. BOX 450278
SUNRISE, FL 33345
94-2683400
033

SPRINGFIELD MISSOURI CHAPTER
HC 63 BOX 33-5
CAULFIELD, MO 65626
45-2250186
214

ST. LOUIS CHAPTER
711 JUDSON MANOR DR.
ST. LOUIS, MO 63141
51-0161367
011

TALLAHASSEE CHAPTER
9516 STARHAWK DR.
TALLAHASSEE, FL 32309
45-3664518
213

AFFILIATED ORGANIZATIONS INC

TULSA CHAPTER
1825 N. 13TH ST.
BROKEN ARROW, OK 74012-8256
73-1086325
034

UTAH CHAPTER
2877 DELSA DR.
HOLLADAY, UT 84124
87-6162790
004

VIRGINIA CHAPTER
P.O. BOX 11564
RICHMOND, VA 23230-1564
54-1036448
022

WEST FLORIDA CHAPTER
P.O. BOX 1101
TAMPA, FL 33602
59-1933237
041

WESTERN MICHIGAN CHAPTER
206 HI MOUNT CIR.
LANSING, MI 48906
36-3007751
038

WESTERN NEW YORK CHAPTER
P.O. BOX 1321
PITTSFORD, NY 14534
16-1138823
046

WILLAMETTE VALLEY CHAPTER
P.O. BOX 413, 1505 SW 6TH
PORTLAND, OR 97207
36-3538334
050

Application for Extension of Time To File an
Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ X
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION CHAPTERS		Employer identification number (EIN) or	
			<input checked="" type="checkbox"/>	94-2919522
	Number, street, and room or suite no. If a P.O. box, see instructions 3701 ALGONQUIN ROAD		<input type="checkbox"/>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions ROLLING MEADOWS, IL 60008			

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► NEVILLE RADEMEYER

Telephone No ► 847 253-1545

FAX No ► 847 253-1443

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 2504. If this is for the whole group, check this box ☒ X. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for ATTACHMENT 1

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 2012, to file the exempt organization return for the organization named above. The extension is for the organization's return for ☒ X calendar year 2011 or ☐ tax year beginning _____, 20____, and ending _____, 20____.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b \$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c \$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2012)

AFFILIATED ORGANIZATIONS INC

ANCHORAGE CHAPTER
P.O. BOX 240353
ANCHORAGE, AK 99524-0353
71-0937387
177

ATLANTA CHAPTER
4780 ASHFORD DUNWOODY RD. STE. A475
ATLANTA, GA 30338-5504
58-1353296
039

AUSTIN CHAPTER
P.O. BOX 13468
AUSTIN, TX 78711-3468
74-1909256
020

BATON ROUGE CHAPTER
14351 BRENTWOOD CT.
GONZALES, LA 70737
72-1056363
085

BIRMINGHAM CHAPTER
P.O. BOX 59623
BIRMINGHAM, AL 35259-9623
63-0829301
065

BOISE CHAPTER
5125 N. RED HILLS AVE.
MERIDIAN, ID 83646
82-0353193
042

CENTRAL ARKANSAS CHAPTER
14525 WIMBLEDON LOOP
LITTLE ROCK, AR 72210
52-1315583
082

AFFILIATED ORGANIZATIONS INC

CENTRAL FLORIDA CHAPTER
1681 ARASH CIR.
PORT ORANGE, FL 32128-7323
59-2370745
067

CENTRAL INDIANA CHAPTER
P.O. BOX 441257
INDIANAPOLIS, IN 46244-1257
35-1513580
056

CENTRAL IOWA CHAPTER
801 GRAND AVE., STE. 3000
DES MOINES, IA 50309-2764
42-1296228
110

CENTRAL MARYLAND CHAPTER
P.O. BOX 434
LINTHICUM, MD 21090
94-2511599
024

CENTRAL NEW YORK CHAPTER
P.O. BOX 15064
SYRACUSE, NY 13215-0064
16-1107127
029

CENTRAL OHIO CHAPTER
P.O. BOX 151152
COLUMBUS, OH 43215
31-0930271
027

CENTRAL OKLAHOMA CHAPTER
17407 BETHEL RD.
SHAWNEE, OK 74801-2952
73-1206933
049

AFFILIATED ORGANIZATIONS INC

CHARLOTTE CHAPTER
651 E. 8TH ST., APT. 307
CHARLOTTE, NC 28202-2954
56-1283238
051

CHICAGO CHAPTER
P.O. BOX 81627
CHICAGO, IL 60681
23-7288003
002

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6441 S. POTOMAC ST.
CENTENNIAL, CO 80111
84-0727216
016

DETROIT CHAPTER
16592 HOUGHTON DR.
LIVONIA, MI 48154
23-7410401
008

GREATER CINCINNATI CHAPTER
2216 DOMINION DR.
FT. MITCHELL, KY 41017-2017
23-7291478
003

GREATER HARTFORD CHAPTER
P.O. BOX 231344
HARTFORD, CT 06123-1344
36-3538336
028

GREATER HOUSTON CHAPTER
P.O. BOX 2424
HOUSTON, TX 77252-2424
23-7419148
009

AFFILIATED ORGANIZATIONS INC

GREATER KANSAS CITY CHAPTER
P.O. BOX 26066
KANSAS CITY, MO 64196
43-1338861
087

HARRISBURG CHAPTER
P.O. BOX 482
CAMP HILL, PA 17001
23-2116311
045

HAWAII CHAPTER
1132 BISHOP ST., STE. 1200
HONOLULU, HI 96813
99-0219334
071

HUDSON VALLEY CHAPTER
P.O. BOX 1458
ALBANY, NY 12201
22-3001385
120

ILLINI CHAPTER
P.O. BOX 2322
DECATUR, IL 62525
37-1141574
077

ILLOWA CHAPTER
3025 4TH ST.
MARION, IA 52302
36-4428918
169

JACKSONVILLE CHAPTER
621 PARADISE CT.
ATLANTIC BEACH, FL 32233-6946
59-2155120
058

AFFILIATED ORGANIZATIONS INC

KENTUCKIANA CHAPTER
9203 FEATHERBELL BLVD.
PROSPECT, KY 40059
61-0942117
037

KETTLE MORaine CHAPTER
W. 281 N4930 THEODORES COVE
PEWAUKEE, WI 53072
39-1400443
057

LAS VEGAS CHAPTER
7408 CHORLEYWOOD WAY
LAS VEGAS, NV 89131
20-3339497
187

LOS ANGELES CHAPTER
P.O. BOX 712726
LOS ANGELES, CA 90071-7726
23-7294468
001

MEMPHIS CHAPTER
316 N. AVALON ST.
MEMPHIS, TN 38112
62-1083062
048

MIDDLE TENNESSEE CHAPTER
P.O. BOX 330443
NASHVILLE, TN 37203
62-1261485
102

MINNESOTA CHAPTER
1000 WESTGATE DR., STE. 252
ST. PAUL, MN 55114
41-6175157
007

AFFILIATED ORGANIZATIONS INC

MT. RAINIER CHAPTER
P.O. BOX 6551
OLYMPIA, WA 98504
91-1557795
129

NATIONAL CAPITAL AREA CHAPTER
P.O. BOX 77533
WASHINGTON, DC 20013-7533
23-7360726
005

NEW ENGLAND CHAPTER
P.O. BOX 1181
BOSTON, MA 02117
04-2592391
018

NEW JERSEY CHAPTER
101 E. OAK ST., #1-3
OAKLAND, NJ 07436
22-2203291
030

NEW MEXICO CHAPTER
1007 EL PUEBLO RD. NW
ALBUQUERQUE, NM 87114
85-0333609
083

NEW ORLEANS CHAPTER
P.O. BOX 6075
METAIRIE, LA 70009-6075
72-0946429
061

NEW YORK CITY CHAPTER
954 LEXINGTON AVE., STE. 525
NEW YORK, NY 10021-5013
13-2843396
010

AFFILIATED ORGANIZATIONS INC

NORTH TEXAS CHAPTER
P.O. BOX 25026
DALLAS, TX 75225-1026
94-2511603
012

NORTHEAST OHIO CHAPTER
9110 TRACY TRL.
PARMA, OH 44130
94-2579763
026

NORTHWEST OHIO CHAPTER
6556 BROWN RD.
OREGON, OH 43616
20-5770701
188

OMAHA CHAPTER
1804 S. 175 AVE.
OMAHA, NE 68130
47-0592567
023

ORANGE COUNTY CHAPTER
19232 SHERBORNE LN.
HUNTINGTON BEACH, CA 92646-2031
33-0024331
079

PHILADELPHIA CHAPTER
P.O. BOX 58155
PHILADELPHIA, PA 19102-8155
23-7357842
006

PHOENIX CHAPTER
P.O. BOX 63211
PHOENIX, AZ 85082
86-0404629
053

AFFILIATED ORGANIZATIONS INC

PITTSBURGH CHAPTER
P.O. BOX 544
PITTSBURGH, PA 15230
25-1296635
013

PUGET SOUND CHAPTER
14608 NE 65TH CT.
REDMOND, WA 98052-4676
91-1044622
035

RESEARCH TRIANGLE CHAPTER
1695 COBBLESTONE DR.
CREEDMOOR, NC 27522
58-1462671
059

RHODE ISLAND CHAPTER
P.O. BOX 6262
PROVIDENCE, RI 02940
26-0718191
197

SACRAMENTO CHAPTER
P.O. BOX 2025
RANCHO CORDOVA, CA 95741
94-2910488
076

SAN ANTONIO/SOUTH TEXAS CHAPTER
P.O. BOX 780265
SAN ANTONIO, TX 78278
74-2287352
081

SAN DIEGO CHAPTER
3425 LEBON DR., APT. 521
SAN DIEGO, CA 92122
95-3095287
019

AFFILIATED ORGANIZATIONS INC

SAN FRANCISCO CHAPTER
P.O. BOX 26675
SAN FRANCISCO, CA 94126
94-2390101
015

SC MIDLANDS CHAPTER
9 OLIVE BRANCH CT.
ELGIN, SC 29045
57-0709139
054

SILICON VALLEY CHAPTER
P.O. BOX 2105
CUPERTINO, CA 95015-2105
94-2819289
062

SOUTH FLORIDA CHAPTER
P.O. BOX 450278
SUNRISE, FL 33345
94-2683400
033

SPRINGFIELD MISSOURI CHAPTER
HC 63 BOX 33-5
CAULFIELD, MO 65626
45-2250186
214

ST. LOUIS CHAPTER
711 JUDSON MANOR DR.
ST. LOUIS, MO 63141
51-0161367
011

TALLAHASSEE CHAPTER
9516 STARHAWK DR.
TALLAHASSEE, FL 32309
45-3664518
213

AFFILIATED ORGANIZATIONS INC

TULSA CHAPTER
1825 N. 13TH ST.
BROKEN ARROW, OK 74012-8256
73-1086325
034

UTAH CHAPTER
2877 DELSA DR.
HOLLADAY, UT 84124
87-6162790
004

VIRGINIA CHAPTER
P.O. BOX 11564
RICHMOND, VA 23230-1564
54-1036448
022

WEST FLORIDA CHAPTER
P.O. BOX 1101
TAMPA, FL 33602
59-1933237
041

WESTERN MICHIGAN CHAPTER
206 HI MOUNT CIR.
LANSING, MI 48906
36-3007751
038

WESTERN NEW YORK CHAPTER
P.O. BOX 1321
PITTSFORD, NY 14534
16-1138823
046

WILLAMETTE VALLEY CHAPTER
P.O. BOX 413, 1505 SW 6TH
PORTLAND, OR 97207
36-3538334
050

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions		Enter filer's identifying number, see instructions	
	INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION CHAPTERS		Employer identification number (EIN) or	
	Number, street, and room or suite no. If a P.O. box, see instructions		Social security number (SSN)	
	3701 ALGONQUIN ROAD			
		City, town or post office, state, and ZIP code. For a foreign address, see instructions		
		ROLLING MEADOWS, IL 60008		

Enter the Return code for the return that this application is for (file a separate application for each return) ☐ 0 ☒ 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **NEVILLE RADEMEYER**
Telephone No **847 253-1545** FAX No **847 253-1443**
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) **2504**. If this is for the whole group, check this box ☒ **X**. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for **ATTACHMENT 1**

- I request an additional 3-month extension of time until **11/15**, 20 **12**.
- For calendar year **2011**, or other tax year beginning _____, 20____, and ending _____, 20____.
- If the tax year entered in line 5 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period
- State in detail why you need the extension **ADDITIONAL TIME IS REQUESTED TO GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFIPS (Electronic Federal Tax Payment System). See instructions	8c \$

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete, and that I am authorized to prepare this form

Signature  Title **CPA** Date **07/25/2012**

Form 8868 (Rev 1-2012)