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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form. Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A For the 2013 calendar year, or tax year beginning 01-01-2013, and ending 12-31-2013

- B Check if applicable: Address change, Name change, Initial return, Terminated, Amended return, Application pending

C Name of organization: CROWDFUNDING PROFESSIONAL ASSOCIATION INC. Number and street: C/O BRIAN KORN NY TIMES BUILDING. City or town: TH AVE NEW YORK, NY 10018

D Employer identification number: 45-5376027. E Telephone number: (207) 288-0428. F Group Exemption Number

G Accounting Method: Cash [], Accrual [x], Other []

H Check [x] if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: WWW.CFPA.ORG

J Tax-exempt status: 501(c)(3) [x], 501(c)(6) [], 4947(a)(1) [], 527 []

K Form of organization: Corporation [x], Trust [], Association [], Other []

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. Total: \$15,136

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Check if the organization used Schedule O to respond to any question in this Part I [x]

Table with 21 rows for Revenue, Expenses, and Net Assets. Revenue total: 15,136. Expenses total: 7,209. Net Assets total: 17,825.

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	9,898	22 17,825
23 Land and buildings		23
24 Other assets (describe in Schedule O)		24
25 Total assets	9,898	25 17,825
26 Total liabilities (describe in Schedule O)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	9,898	27 17,825

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?

CFPA'S MISSION IS WORKING FOR THE SUCCESS OF EVERY FUNDRAISER AND THEIR SUPPORTERS, BY PROVIDING EDUCATION, RESOURCES AND ASSISTANCE TO ALL STAKEHOLDERS IN THE CROWDFUNDING COMMUNITY

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28 IDENTIFY OPPORTUNITIES WHERE THE APPLICATION OF IDEAS, PEOPLE AND CAPITAL FORMATION WILL BENEFIT THE ORGANIZATION AND SOCIETY IN SIGNIFICANT AND MEASURABLE WAYS

(Grants \$) If this amount includes foreign grants, check here

Expenses
(Required for section 501 (c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

29

(Grants \$) If this amount includes foreign grants, check here

30

(Grants \$) If this amount includes foreign grants, check here

31 Other program services (describe in Schedule O)

(Grants \$) If this amount includes foreign grants, check here

32 Total program service expenses (add lines 28a through 31a)

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV.

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
See Additional Data Table				

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the

instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities
35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year?
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year?
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year?
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations Enter
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
40b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ?
40c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
40d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization
40e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?
41 List the states with which a copy of this return is filed
42a The organization's books are in care of CHARLES SIDMAN Telephone no (207) 288-0428 Located at PO BOX 200 BAR HARBOR, ME ZIP + 4 04609
42b 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)?
42c At any time during the calendar year, did the organization maintain an office outside the U S ?
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041? Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44a Did the organization maintain any donor advised funds during the year?
44b Did the organization operate one or more hospital facilities during the year?
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes," to line 44c, has the organization filed a Form 720 to report these payments?
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?

	Yes	No
46		No

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47		
48		
49a		
49b		

47 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

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000.

52 Did the organization complete Schedule A? **NOTE:** All Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

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 *****
 Signature of officer
 CHARLES SIDMAN PHD PRES/DIRECTOR
 Type or print name and title
 2014-04-29
 Date

Paid Preparer Use Only
 Print/Type preparer's name: Leonard J Bencivenga CPA
 Preparer's signature: _____
 Date: _____
 Check if self-employed
 PTIN: P00116788
 Firm's name: Bencivenga Ward & Company CPAs PC
 Firm's EIN: _____
 Firm's address: 420 Columbus Avenue Suite 304
 Valhalla, NY 105951382
 Phone no: (914) 769-5005

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Additional Data

Software ID: 13000170

Software Version: 2013v3.1

EIN: 45-5376027

Name: CROWDFUNDING PROFESSIONAL ASSOCIATION
INC

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
CHARLES SIDMAN PHD PRES/DIRECTOR	8 00	0		
SCOTT MCINTYRE SEC/DIRECTOR	2 00	0		
THELL WOODS TRES/DIRECTOR	2 00	0		
KEVIN SABA Director	2 00	0		
BRIAN KORN Director	2 00	0		

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 to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

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Name of the organization
CROWDFUNDING PROFESSIONAL ASSOCIATION
INC

Employer identification number

45-5376027

990 Schedule O, Supplemental Information

Return Reference	Explanation
Client Note 1	Client Note 1 - CROWDFUNDING PROFESSIONAL ASSOCIATION INC (CFPA) WAS INCORPORATED IN DELAWARE ON MAY 9, 2012 THE ACTIVITIES AND EXPENSES OF CFPA IN 2013 REPRESENT DEVELOPMENT WORK TO ESTABLISH THE ORGANIZATION TO FUFFILL ITS GOALS AND MISSION
Other Expenses 1	BANK/CREDIT CARD FEES \$352
Other Expenses 2	OTHER \$200
Changes to Organizing or Governing Documents	PRIOR TO LAST YEAR, THE ORGANIZATION HAD DRAFT BYLAWS THAT HAD NEVER BEEN FORMALLY ADOPTED WE HAD AN OPEN COMMITTEE PROCESS (THAT WAS LED BY THE CHAIRMAN), WHICH REVISED THE BYLAWS AND ADOPTED THEM BY OPEN MEMBERSHIP VOTE