



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



Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2013

Open to Public Inspection

Form 990

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990

A For the 2013 calendar year, or tax year beginning 2013, 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 province, country, and ZIP or foreign postal code ROLLING MEADOWS, IL 60008		G Gross receipts \$ 3,917,259.
	F Name and address of principal officer RONALD HALE SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No H(b) Are all subordinates included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) ATCH 3
I Tax-exempt status	501(c)(3) <input checked="" type="checkbox"/> 501(c)(6) <input type="checkbox"/> (insert no)	4947(a)(1) or 527	H(c) Group exemption number 2504
J Website WWW.ISACA.ORG			
K Form of organization	<input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	L Year of formation	M State of legal domicile

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities	PROVIDE PROFESSIONAL EDUCATION, FACILITATE NETWORKING & COMMUNITY THROUGH CHAPTER MEETINGS, & ELEVATE THE VISIBILITY OF IT GOVERNANCE, SECURITY & 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)	806.	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	806.	
	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	0	
	6	Total number of volunteers (estimate if necessary)	1,354.	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	1,200.	
	7b	Net unrelated business taxable income from Form 990-T, line 34	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	5,023.	4,753.
	9	Program service revenue (Part VIII, line 2g)	3,601,094.	3,822,547.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,125.	5,577.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	86,098.	84,382.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,699,340.	3,917,259.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	143,003.	141,521.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	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)	0	0
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-11g)	3,241,219.	3,517,362.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	3,384,222.	3,658,883.
	19	Revenue less expenses Subtract line 18 from line 12	315,118.	258,376.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	4,191,649.	4,449,441.
	21	Total liabilities (Part X, line 26)	0	0
	22	Net assets or fund balances Subtract line 21 from line 20	4,191,649.	4,449,441.

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	Signature of officer	Date	8-22-2014
	RONALD HALE Type or print name and title	CKO/ACTING SEC & CEO	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	BRIDGET T ROCHE	Bridget T Roche	8/21/2014
	Firm's name GRANT THORNTON LLP	Firm's EIN 36-6055558	PTIN P00666837
	Firm's address 175 W JACKSON BLVD STE 2000 CHICAGO, IL 60604	Phone no 312-856-0200	

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2013)

SCANNED SEP 15 2014

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

ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ 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 are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

ATTACHMENT 2

4b (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)**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		X
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		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		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		
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	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		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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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		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		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		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		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		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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		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		X
12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		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 and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14 a Did the organization maintain an office, employees, or agents outside of the United States?		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		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		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)		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		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		X
20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22	Did the organization report more than \$5,000 of grants or 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>	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>		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 25a.</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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>		
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>		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II.		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>		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>		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>		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>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>		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>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		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>		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>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, 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>		
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>		
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>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Form 990 (2013)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☒ X

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a 13		
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? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b		
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" to line 3b, provide an explanation in Schedule O.	3b	X	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d If "Yes," indicate the number of Forms 8282 filed during the year.	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12.	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b		
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders.	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b		
c Enter the amount of reserves on hand.	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line 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	806	
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		
1b Enter the number of voting members included in line 1a, above, who are independent	806	
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 ☐ Other (explain in Schedule O)

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 ☒ ROBERT MICEK 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 or note to any line 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 (list any hours for related organizations below dotted line)	(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) MATTHEW ALTMAN PAST PRESIDENT	1.00	X		X				0	0	0
(2) MACK AVERY PRESIDENT	1.00	X		X				0	0	0
(3) DANA GONDERZIK SECRETARY	1.00	X		X				0	0	0
(4) JACY PETERSEN VICE PRESIDENT	2.00	X		X				0	0	0
(5) GARY SHOLLY TREASURER	2.00	X		X				0	0	0
(6) MUKESH ARORA PRESIDENT	10.00	X		X				0	0	0
(7) JAMES BAIRD DIRECTOR	.50	X						0	0	0
(8) PATRICK CATTON DIRECTOR	.50	X						0	0	0
(9) REID EASTBURN DIRECTOR	1.00	X						0	0	0
(10) NIHAT GUVEN TREASURER	5.00	X		X				0	0	0
(11) ANGELA JACKSON DIRECTOR	2.00	X						0	0	0
(12) TODD MARCINIK DIRECTOR	2.00	X						0	0	0
(13) VICKI MAXWELL-BUSTILLOS VICE PRESIDENT OF GOVERNANCE	5.00	X		X				0	0	0
(14) RAJEEV MENON SECRETARY	5.00	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 (list any hours for related organizations below dotted line)	(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) JEFFREY PALGON DIRECTOR	.50	X						0	0	0
(16) KIMBERLY BRADLEY PAST PRESIDENT	.10	X						0	0	0
(17) CARLOS CONTRERAS IMMEDIATE PAST PRESIDENT	.10	X						0	0	0
(18) RICARDO DAVILA TREASURER	2.00	X		X				0	0	0
(19) GARY LEACH PRESIDENT	2.00	X		X				0	0	0
(20) NANCY WALDEN SECRETARY	.50	X		X				0	0	0
(21) DAVE WOOD VICE PRESIDENT	2.00	X		X				0	0	0
(22) RACHELLE WOOD MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(23) TOME FRAZIER PRESIDENT	10.00	X		X				0	0	0
(24) RICHARD HARRIS PUBLICITY DIRECTOR & WEBMASTER	5.00	X						0	0	0
(25) NARGIZ IBAHIM CERTIFICATION DIRECTOR	5.00	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 (list any hours for related organizations below dotted line)	(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) TERRI KOLB VICE PRESIDENT	5.00	X		X				0	0	0
(27) ROCHANA LAHIRI SECRETARY	5.00	X		X				0	0	0
(28) STACY MANNING ACADEMIC DIRECTOR	5.00	X						0	0	0
(29) DENEEN RICHARD MARKETING DIRECTOR	5.00	X						0	0	0
(30) MARY SAPORITO CERTIFICATION DIRECTOR	5.00	X						0	0	0
(31) MICHELLE SEELING MEMBERSHIP COORDINATOR	5.00	X						0	0	0
(32) NATALIE WARE TREASURER	5.00	X		X				0	0	0
(33) ROBERT JEFFREY BRATTON PAST PRESIDENT & AUDIT & NOM.	2.00	X						0	0	0
(34) RUSTY COLLINS MEMBERSHIP DIRECTOR	2.00	X						0	0	0
(35) DAVID HALL PROGRAM & MEETINGS DIRECTOR	2.00	X						0	0	0
(36) AMANDA MARTIN ACADEMIC & RESEARCH 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 (list any hours for related organizations below dotted line)	(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) YAN-YAN NG PRESIDENT	2.00	X		X				0	0	0
(38) TAMMY RANDLE PROGRAM & MEETINGS DIRECTOR	1.00	X						0	0	0
(39) AARON SINGLETON TREASURER	2.00	X		X				0	0	0
(40) NANETTE TAYLOR SECRETARY & CERT. DIRECTOR	2.00	X		X				0	0	0
(41) DR. JAMES WORRELL VICE PRESIDENT	2.00	X		X				0	0	0
(42) BRADLEY NEIL YOUNG WEBMASTER & COMMUNICATIONS	2.00	X						0	0	0
(43) BRANT BORCHERT TREASURER	2.00	X		X				0	0	0
(44) DANIEL DECLOSS VICE PRESIDENT	.50	X		X				0	0	0
(45) ANDERS ERICKSON PROGRAM CHAIR	.50	X						0	0	0
(46) CHRISTINE MARIMAN AUDIT AND NOMINATIONS CHAIR	.50	X						0	0	0
(47) JO MCCARTHY 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		

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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			
(48) DENNIS MCLAUGHLIN SECRETARY	2.00	X		X			0	0	0
(49) ANDREW RICHTER RESEARCH CHAIR	1.00	X					0	0	0
(50) THOR ROSTOCK WEBMASTER	.50	X					0	0	0
(51) AMY SHAW MEMBERSHIP CHAIR	.50	X					0	0	0
(52) VINCE SKINNER ACADEMIC CHAIR	.50	X					0	0	0
(53) DAWN TEPLY PAST PRESIDENT	.75	X					0	0	0
(54) TROY TORRES NEWSLETTER CHAIR	.50	X					0	0	0
(55) PATRICIA WATSON PRESIDENT	.75	X		X			0	0	0
(56) SHON AUSTIN BOARD MEMBER	.75	X					0	0	0
(57) HOLLI BRANNON VICE PRESIDENT	1.50	X		X			0	0	0
(58) IVANA COJBASIC BOARD MEMBER	.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 (list any hours for related organizations below dotted line)	(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) CLAUDE HARVISON PRESIDENT	3.50	X		X				0	0	0
(60) KISH IVEY BOARD MEMBER	.25	X						0	0	0
(61) STEVEN KELLER BOARD MEMBER	.50	X						0	0	0
(62) TANYA MONTROSE SECRETARY	1.00	X		X				0	0	0
(63) AMANDA PRINCE TREASURER	2.50	X		X				0	0	0
(64) TERRI WILLIAMS SECRETARY	.50	X		X				0	0	0
(65) SHARON ACTON BOARD MEMBER	2.00	X						0	0	0
(66) KATHERINE ALLEN PRESIDENT	4.00	X		X				0	0	0
(67) GEORGE GRACHIS BOARD MEMBER	2.00	X						0	0	0
(68) SHERRY HILLEY TREASURER	2.00	X		X				0	0	0
(69) JACQUELINE HOLDER SECRETARY	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 (list any hours for related organizations below dotted line)	(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) ROSEMARIE MCPARLAND BOARD MEMBER	2.00	X						0	0	0
(71) ANTHONY VALENTINO PAST PRESIDENT	2.00	X						0	0	0
(72) MICHAEL WALSH PAST PRESIDENT	2.00	X						0	0	0
(73) NANCY BLACKWELL PAST PRESIDENT	1.00	X						0	0	0
(74) HOLLY COX SECRETARY	2.00	X		X				0	0	0
(75) EDWARD ETTORRE PRESIDENT	4.00	X		X				0	0	0
(76) NITHIN KOTLA DIRECTOR	1.00	X						0	0	0
(77) FRANK NEVERS TREASURER	4.00	X		X				0	0	0
(78) CAROL RILEY VICE PRESIDENT	1.00	X		X				0	0	0
(79) SHARON RILEY DIRECTOR	1.00	X						0	0	0
(80) KELLI ARBAUGH CO-ACADEMIC OUTREACH	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

	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 (list any hours for related organizations below dotted line)	(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) DAVID BENNETT CO-PROGRAM	2.00	X						0	0	0
(82) STEFANO CAIOLA TRI-MARKETING	2.00	X						0	0	0
(83) PATRICIA HAMILTON ARRANGEMENTS	4.00	X						0	0	0
(84) SCOTT HIGGINS TRI-MARKETING	.50	X						0	0	0
(85) DAVID HORVATH VICE PRESIDENT	2.00	X		X				0	0	0
(86) AIJAZ HUSSAIN WEBMASTER	2.00	X						0	0	0
(87) JIM KALBAC REGISTRATION	1.00	X						0	0	0
(88) MAHAMED KONFROU ASSISTANT TREASURER	1.00	X		X				0	0	0
(89) RYAN KROPFF MEMBERSHIP	1.00	X						0	0	0
(90) WESLEY LEWIS PRESIDENT	3.00	X		X				0	0	0
(91) JOAN MILLER CO-EDUCATION CHAIR	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

	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 (list any hours for related organizations below dotted line)	(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) JOSEPH NEWELL CERTIFICATION COORDINATOR	2.00	X						0	0	0
(93) LISA SCHENK PAST TREASURER	.50	X						0	0	0
(94) RAY SCURR CO-EDUCATION CHAIR	3.00	X						0	0	0
(95) JOHN SHUEY SECRETARY	2.00	X		X				0	0	0
(96) SHEELA THIRUVADI CO-ACADEMIC OUTREACH	.50	X						0	0	0
(97) JAMILLA WILLIAMS TRI-MARKETING	2.00	X						0	0	0
(98) EJAZ YOUNAS TREASURER	3.00	X		X				0	0	0
(99) DAN ZIMMERMAN ADVERTISING & RESEARCH	3.00	X						0	0	0
(100) AMY ZIMMERMAN CO-PROGRAM	2.00	X						0	0	0
(101) GLORIA GIBBON BOARD MEMBER	2.00	X						0	0	0
(102) PATRICK LYNCH 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) JAMES MACLACHLAN TREASURER	2.00	X		X				0	0	0
(104) CAROL MORGAN BOARD MEMBER	1.00	X						0	0	0
(105) SHAWN O'REILLY SECRETARY	2.00	X		X				0	0	0
(106) RICHARD SHUTTS PRESIDENT	2.00	X		X				0	0	0
(107) GREGORY WAITE VICE PRESIDENT	1.00	X		X				0	0	0
(108) JASON WOOD BOARD MEMBER	1.00	X						0	0	0
(109) ALYSSA AHMANN BOARD MEMBER	1.00	X						0	0	0
(110) MICHAEL BRADY BOARD MEMBER	1.00	X						0	0	0
(111) RUBY BROWN BOARD MEMBER	1.00	X						0	0	0
(112) KHOZEMA DOCTOR TREASURER	1.50	X		X				0	0	0
(113) VINCENT JACOMINI VICE PRESIDENT	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 (list any hours for related organizations below dotted line)	(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) MICHAEL KIRK BOARD MEMBER	1.00	X						0	0	0
(115) ANNIE KOWALSKI BOARD MEMBER	1.00	X						0	0	0
(116) MATTHEW SCHONDEL BOARD MEMBER	1.00	X						0	0	0
(117) JOHN SNEDEKER BOARD MEMBER	1.00	X						0	0	0
(118) CHRISTOPHER WATSON PRESIDENT	1.50	X		X				0	0	0
(119) DANA YEE SECRETARY	1.50	X		X				0	0	0
(120) ERIC COLLINS IMMEDIATE PAST PRESIDENT	1.00	X						0	0	0
(121) CODY EIDSON MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(122) ARBEN LAMI TREASURER	2.00	X		X				0	0	0
(123) LISA MOORER SECRETARY	1.00	X		X				0	0	0
(124) JOHN PEIRCE 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

	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 (list any hours for related organizations below dotted line)	(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) JOHN STANFIELD SPAID, JR. CERTIFICATION DIRECTOR	1.00	X						0	0	0
(126) JAYASEKAR THIRUMALAI PRESIDENT	2.00	X		X				0	0	0
(127) JAY BADAR WEBMASTER	5.00	X						0	0	0
(128) JACKIE CALDWELL SECRETARY	5.00	X		X				0	0	0
(129) STEFANIE CLAY ACADEMIC RELATIONS DIRECTOR	5.00	X						0	0	0
(130) JOHN CONNELL CISM COORDINATOR	5.00	X						0	0	0
(131) CHAD COURIER ACADEMIC RELATIONS COMMITTEE	5.00	X						0	0	0
(132) RODNEY DAVIS CRISC COORDINATOR	5.00	X						0	0	0
(133) PAM ERINAKIS CISA COORDINATOR	5.00	X						0	0	0
(134) CHAD GAMBRELL PROGRAMS COMMITTEE	5.00	X						0	0	0
(135) MARTHA GERRICK VICE PRESIDENT	5.00	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 (list any hours for related organizations below dotted line)	(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) VAUGHN HERLONG MEMBERSHIP COMMITTEE	5.00	X						0	0	0
(137) TRAVIS JENKINS MEMBERSHIP DIRECTOR	5.00	X						0	0	0
(138) JAMES KIDWELL PROGRAMS DIRECTOR	5.00	X						0	0	0
(139) RICHARD LARSEN TREASURER	5.00	X		X				0	0	0
(140) JACKIE LIMMER MARKETING DIRECTOR	5.00	X						0	0	0
(141) JOSH MCDERMOTT AUDIT DIRECTOR	5.00	X						0	0	0
(142) SHAHAB NAYYER GENERAL DIRECTOR	5.00	X						0	0	0
(143) VICTOR ROBINSON EVENTS MANAGER	5.00	X						0	0	0
(144) MARK SAGE COMMUNICATIONS DIRECTOR	5.00	X						0	0	0
(145) CHERYL SMITH PRESIDENT	5.00	X		X				0	0	0
(146) SUSAN YOUNG ACADEMIC RELATIONS COMMITTEE	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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) NATHAN ANDERSON PROGRAM DIRECTOR	5.00	X						0	0	0
(148) DAVID BAKER CERTIFICATION DIRECTOR	3.00	X						0	0	0
(149) MADHAV GOGAWALE MEETINGS DIRECTOR	1.00	X						0	0	0
(150) MATT GOLDBERG MEETINGS DIRECTOR	1.00	X						0	0	0
(151) BILL HARDIN PROGRAM DIRECTOR	2.00	X						0	0	0
(152) HOWARD HARVEY MEDIA DIRECTOR	3.00	X						0	0	0
(153) BERNARD KIENSTRA TREASURER	3.00	X		X				0	0	0
(154) FRANCINE MCKENNA IMMEDIATE PAST PRESIDENT	1.00	X						0	0	0
(155) DOUG OCHAB MEDIA DIRECTOR	3.00	X						0	0	0
(156) ROBERT PARDON SEMINAR DIRECTOR	2.00	X						0	0	0
(157) AARON PARKS 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) TRAK PATEL MEDIA DIRECTOR	3.00	X						0	0	0
(159) MICHAEL PODEMSKI PROGRAM DIRECTOR	8.00	X						0	0	0
(160) NIKITA REVA VICE PRESIDENT	8.00	X		X				0	0	0
(161) KENNETH SCHMIDT MEMBERSHIP DIRECTOR	3.00	X						0	0	0
(162) NORMAN SPIELMAN SEMINAR DIRECTOR	2.00	X						0	0	0
(163) LISA VILLANUEVA AUDIT DIRECTOR	2.00	X						0	0	0
(164) DEBBIE WASEMANN MEETINGS DIRECTOR	1.00	X						0	0	0
(165) VESELA ZLATEVA SECRETARY	1.00	X		X				0	0	0
(166) BRENNAN BAYBECK PAST PRESIDENT	2.00	X						0	0	0
(167) MARK GENGOZIAN VICE PRESIDENT OF MEMBERSHIP	4.00	X		X				0	0	0
(168) RICHARD LUCY VICE PRESIDENT OF EDUCATION	5.00	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 (list any hours for related organizations below dotted line)	(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) DONALD MAPES EXECUTIVE VICE PRESIDENT	6.00	X		X				0	0	0
(170) KEITH MARCHAND RESEARCH DIRECTOR	3.00	X						0	0	0
(171) MATTHEW RANDOLPH PRESIDENT	6.00	X		X				0	0	0
(172) DOUGLAS SMITH TREASURER	8.00	X		X				0	0	0
(173) DAVID VOS CERTIFICATIONS DIRECTOR	3.00	X						0	0	0
(174) RHONDA WILLERT ACADEMIC RELATIONS DIRECTOR	3.00	X						0	0	0
(175) BRIAN WILLIAMS SECRETARY	5.00	X		X				0	0	0
(176) BRAD BARTON VICE PRESIDENT	2.00	X		X				0	0	0
(177) GREGORY BOEHMER DIRECTOR	2.00	X						0	0	0
(178) DERRICK BUCKINGHAM DIRECTOR	2.00	X						0	0	0
(179) JUMAN DOLEH-ALOMARY 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) MICHAEL FORREST DIRECTOR	2.00	X						0	0	0
(181) MICHELE HAROON DIRECTOR & PAST PRESIDENT	2.00	X						0	0	0
(182) RYAN HODGES DIRECTOR	2.00	X						0	0	0
(183) M. SIOBHAN JORDAN DIRECTOR & PAST PRESIDENT	2.00	X						0	0	0
(184) BRENDA KARL DIRECTOR	2.00	X						0	0	0
(185) LINDA KEARNEY TREASURER	3.00	X		X				0	0	0
(186) ROBERT OKOPNY DIRECTOR	2.00	X						0	0	0
(187) RAJESH PATEL DIRECTOR	2.00	X						0	0	0
(188) BRANDY PFEIFFER DIRECTOR	2.00	X						0	0	0
(189) SAJAY RAI PRESIDENT	3.00	X		X				0	0	0
(190) CARRIE SCHRADER DIRECTOR & PAST PRESIDENT	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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) JASON SIST SECRETARY	2.00	X		X				0	0	0
(192) DOUGLAS WAHR DIRECTOR & PAST PRESIDENT	2.00	X						0	0	0
(193) SUSAN YAMIN DIRECTOR & PAST PRESIDENT	2.00	X						0	0	0
(194) MANISH ZAVERI DIRECTOR	2.00	X						0	0	0
(195) SANDY BURDEN VICE PRESIDENT OF PROGRAMS	5.00	X		X				0	0	0
(196) JESSE HANFORD PRESIDENT	10.00	X		X				0	0	0
(197) THOMAS HARROW DIRECTOR	2.00	X						0	0	0
(198) RUSSELL KRICK IMMEDIATE PAST PRESIDENT	2.00	X						0	0	0
(199) JOSEPH LAIRSON VP OF PROFESSIONAL DEVELOPMENT	5.00	X		X				0	0	0
(200) ADAM LEIGH SECRETARY	5.00	X		X				0	0	0
(201) LANCE MURRAY 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		

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) MICHAEL SMITH VICE PRESIDENT OF MEMBERSHIP	5.00	X		X				0	0	0
(203) OLUBUKOLA THORPE VP OF COMMUNICATIONS	5.00	X		X				0	0	0
(204) JONATHAN TUDOR TREASURER	5.00	X		X				0	0	0
(205) JOHN ADAMS PAST PRESIDENT, GOVERNANCE	5.00	X						0	0	0
(206) SOKCHAN CHOUN BOARD MEMBER	.50	X						0	0	0
(207) MATTHEW CONBOY BOARD MEMBER, MARKETING	1.00	X						0	0	0
(208) DEBRA DUNNE BOARD MEMBER, MBRSH, WEB	1.00	X						0	0	0
(209) JAYSON FERRON PRESIDENT	5.00	X		X				0	0	0
(210) UMANG KHAMHOLJA VICE PRESIDENT FOR PROGRAMS	5.00	X		X				0	0	0
(211) DR. CONSTANCE LEHMANN BOARD MEMBER AT LARGE	4.00	X						0	0	0
(212) THOMAS MCGRATH 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) PETER ROSARIO BOARD MEMBER	1.00	X						0	0	0
(214) KARL SCHOEN-RENE TREASURER, CERTIFICATION CHAIR	5.00	X		X				0	0	0
(215) PENETTE VAN MENXEL SECRETARY	5.00	X		X				0	0	0
(216) SARAH WILLIAMS BOARD MEMBER	1.00	X						0	0	0
(217) NORMAN COMSTOCK PRESIDENT	6.00	X		X				0	0	0
(218) ASHISH GUPTA BOARD MEMBER AT LARGE	4.00	X						0	0	0
(219) MARY HALL SECRETARY	6.00	X		X				0	0	0
(220) GLENN MCQUEARY TREASURER	6.00	X		X				0	0	0
(221) CHARLES MERRIFIELD BOARD MEMBER AT LARGE	4.00	X						0	0	0
(222) HARVEY NUSZ VICE PRESIDENT	6.00	X		X				0	0	0
(223) MUHAMMAD SIRAJ PAST PRESIDENT	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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) TARONDA WILLIAMS BOARD MEMBER AT LARGE	4.00	X						0	0	0
(225) ANTHONY CANNING TREASURER	3.00	X		X				0	0	0
(226) MOLLY COPLEN DIRECTOR	1.00	X						0	0	0
(227) STEVE KERNS VICE PRESIDENT	1.00	X		X				0	0	0
(228) BENJAMIN SMITH DIRECTOR	1.00	X						0	0	0
(229) DANIEL STERBA PRESIDENT	2.00	X		X				0	0	0
(230) KIMBERLY STULL SECRETARY	1.00	X		X				0	0	0
(231) DAVID ALEXANDER VICE PRESIDENT	4.00	X		X				0	0	0
(232) AMY BENIOT RESEARCH DIRECTOR	1.00	X						0	0	0
(233) LUIS ESTRADA SOCIAL MEDIA	1.00	X						0	0	0
(234) LAURA KENNEDY 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 (list any hours for related organizations below dotted line)	(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) LYDIA LOURBACOS CERTIFICATION COORDINATOR	1.00	X						0	0	0
(236) VINCENT MAGGIORE MARKETING COORDINATOR	1.00	X						0	0	0
(237) ERIC PALMER EDUCATION CHAIR	1.00	X						0	0	0
(238) JOHN POUEY MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(239) DANIEL STOCKER WEBMASTER	1.00	X						0	0	0
(240) TONI VERRET TREASURER	2.00	X		X				0	0	0
(241) JEFFREY WAGAR PRESIDENT	4.00	X		X				0	0	0
(242) LACEY HALLOWELL (1/13 - 6/13) ARRANGEMENTS DIRECTOR	2.00	X						0	0	0
(243) JAMES KAYLOR (7/13 - 12/13) ACADEMIC RELATIONS	1.00	X						0	0	0
(244) MEGAN KEYS (1/13 - 6/13) WEBMASTER	1.00	X						0	0	0
(245) ASHLEY KIDO 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 (list any hours for related organizations below dotted line)	(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) KARL KROHN EDUCATION DIRECTOR	2.00	X						0	0	0
(247) PATTI LOCKE SECRETARY	.50	X		X				0	0	0
(248) AUDREY MAGENNIS MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(249) SCOTT MOODY CHAPTER PRESIDENT	2.00	X		X				0	0	0
(250) JON MYERS (7/13 - 12/13) WEBMASTER	1.00	X						0	0	0
(251) CHRISTINE RODGERS CERTIFICATIONS DIRECTOR	.50	X						0	0	0
(252) VINCE CHAN SECRETARY	.50	X		X				0	0	0
(253) SHINO FONG MEMBERSHIP DIRECTOR	.25	X						0	0	0
(254) JOSEF FUKANO VICE PRESIDENT	.25	X		X				0	0	0
(255) GARY KAHN ACADEMIC RELATIONS CHAIR	.25	X						0	0	0
(256) ZHOU LU PROGRAM DIRECTOR	.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		

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) ADDIE LUI PRESIDENT	1.00	X		X				0	0	0
(258) MICHAEL MARCUM GOVERNMENT/REGULATORY ADVOCACY	.25	X						0	0	0
(259) SANG YONG PAE PROGRAM DIRECTOR	.25	X						0	0	0
(260) ROBIN PRESSLY CISA/CISM COORDINATOR	.50	X						0	0	0
(261) SAM SOK WEBMASTER	.25	X						0	0	0
(262) MATTHEW TSUTSUMI TREASURER	.50	X		X				0	0	0
(263) HOWARD VANDEVAARST NEWSLETTER EDITOR	.50	X						0	0	0
(264) DEBRA VELA HOSPITALITY DIRECTOR	1.00	X						0	0	0
(265) JAMES DAVIDSON PAST PRESIDENT	4.00	X						0	0	0
(266) ADAM DODGE VICE PRESIDENT OF PROGRAMS	4.00	X		X				0	0	0
(267) KELLY GARDINEER WEBMASTER	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 (list any hours for related organizations below dotted line)	(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) REGINALD HARNISH PRESIDENT	4.00	X		X				0	0	0
(269) LEWIS MARSICANO DIRECTOR OF AWARDS	4.00	X						0	0	0
(270) BERNARD MCHUGH CERTIFICATION COORDINATION	4.00	X						0	0	0
(271) KATIE MCINTOSH NEWSLETTER EDITOR	4.00	X						0	0	0
(272) WENDY NELSON TCTC COORDINATOR	4.00	X						0	0	0
(273) WILLIAM PETERSON VICE PRESIDENT OF PUBLICITY	4.00	X		X				0	0	0
(274) THEODORE PHELPS PRESIDENT ELECT	4.00	X		X				0	0	0
(275) NANCY QUAY STUDENT LIAISON	4.00	X						0	0	0
(276) BRENDAN SCHAEFER VICE PRESIDENT OF MEMBERSHIP	4.00	X		X				0	0	0
(277) ROBERT SCHWIND TREASURER	4.00	X		X				0	0	0
(278) DEBORAH SNYDER VICE PRESIDENT OF EDUCATION	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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) JULIANN WILSON SECRETARY	4.00	X		X				0	0	0
(280) DON CHIRI VICE PRESIDENT	.50	X		X				0	0	0
(281) JEFFREY KRAMER TREASURER & DIRECTOR AT LARGE	.50	X		X				0	0	0
(282) JEFF LUKINS DIRECTOR AT LARGE	.50	X						0	0	0
(283) CHRISTOPHER PIZZANO PRESIDENT	5.00	X		X				0	0	0
(284) ANDREW ROSWAL SECRETARY	.50	X		X				0	0	0
(285) BRADLEY BENSON VICE PRESIDENT	3.00	X		X				0	0	0
(286) ANDREW CRIST BOARD MEMBER	1.00	X						0	0	0
(287) MARY FAULKNER PRESIDENT	3.00	X		X				0	0	0
(288) DOUGLAS HATHHORN BOARD MEMBER	1.00	X						0	0	0
(289) MATTHEW LEE TREASURER	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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) JARED ROSS PAST PRESIDENT	3.00	X						0	0	0
(291) ROD SIMPSON SECRETARY	3.00	X		X				0	0	0
(292) DOUGLAS TINCH BOARD MEMBER	1.00	X						0	0	0
(293) DANIEL CRANNY TREASURER	2.00	X		X				0	0	0
(294) JULIE HUPP PRESIDENT	2.00	X		X				0	0	0
(295) KELLE KUCHARSKI VICE PRESIDENT	2.00	X		X				0	0	0
(296) AMY NEMMERS COMMUNICATIONS CHAIR	2.00	X						0	0	0
(297) WENDY BATCHELDER ACADEMIC RELATIONS	1.00	X						0	0	0
(298) TANYA ANN DESMOND SECRETARY	1.00	X		X				0	0	0
(299) KIRK DORMAN MEMBERSHIP	1.00	X						0	0	0
(300) EVAN KERN FAHEY 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 (list any hours for related organizations below dotted line)	(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) BREANNE FISHER TREASURER	1.00	X		X				0	0	0
(302) EMILY FISHER COMMUNICATIONS	1.00	X						0	0	0
(303) GEORGE GAGOV NOMINATIONS	1.00	X						0	0	0
(304) ALEK ISMAYILOV EDUCATION	1.00	X						0	0	0
(305) MATTHEW KLEIN VICE PRESIDENT	1.00	X		X				0	0	0
(306) SAM KOLLATH PROGRAMS	1.00	X						0	0	0
(307) SHIRLEY WEUVE AUDITOR	1.00	X						0	0	0
(308) MONICA BECKWORTH SECRETARY	.50	X		X				0	0	0
(309) JAMES CALVERT MARKETING CO-DIRECTOR	.25	X						0	0	0
(310) RUSSELL COOLEY NEWSLETTER DIRECTOR	.25	X						0	0	0
(311) WILLIAM CROWE 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
- 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 (list any hours for related organizations below dotted line)	(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) MATTHEW DAVIS WEBMASTER	.25	X						0	0	0
(313) LESLIE DEPPE HOSPITALITY DIRECTOR	2.00	X						0	0	0
(314) SHERRY DOUB VICE PRESIDENT	1.00	X		X				0	0	0
(315) VICKI GATEWOOD PROGRAM/EDUCATION DIRECTOR	1.00	X						0	0	0
(316) ANDREW HOUT CERTIFICATION DIRECTOR	.25	X						0	0	0
(317) HIRAM MARTINEZ JR. MEMBERSHIP DIRECTOR	.40	X						0	0	0
(318) KENNETH PROUDFOOT IT GOVERNANCE INSTITUTE REP.	.25	X						0	0	0
(319) MARTHA SMYK TREASURER	1.00	X		X				0	0	0
(320) CARL TERRY COMMUNICATIONS DIRECTOR	.25	X						0	0	0
(321) LUNCINDA VAN ZANDT MARKETING CO-DIRECTOR	.25	X						0	0	0
(322) MICHELLE BLANDFORD TREASURER	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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) NANCY BURNS SECRETARY	4.00	X		X				0	0	0
(324) ROBERT DARWIN VP OF MEMBERSHIP & MARKETING	4.00	X		X				0	0	0
(325) OMAR EDWARDS VP - EDUCATION & CERTIFICATION	4.00	X		X				0	0	0
(326) MIKE GARR VP OF COMMUNICATIONS	4.00	X		X				0	0	0
(327) CHRISTOPHER GIDA VP - PROF & ACADEMIC RELATIONS	4.00	X		X				0	0	0
(328) ALLYSON GRANT VP OF PROGRAMMING	4.00	X		X				0	0	0
(329) MITCHELL GREENFIELD VP OF PROGRAMMING	4.00	X		X				0	0	0
(330) LISA HOLDEN VP OF MEMBERSHIP & MARKETING	4.00	X		X				0	0	0
(331) SCOTT MACARTHUR PRESIDENT	8.00	X		X				0	0	0
(332) RACHEL RICHARDS VP - EDUCATION & CERTIFICATION	4.00	X		X				0	0	0
(333) CHARLIE SNYDER VP - PROF & ACADEMIC RELATIONS	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 (list any hours for related organizations below dotted line)	(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) TIM STRAUB VP OF COMMUNICATIONS	4.00	X		X				0	0	0
(335) GEORGE BELMONTES MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(336) RICHARD CHANG V. PRESIDENT	3.00	X		X				0	0	0
(337) ADAM DINY LOGISTICS COORDINATOR	1.00	X						0	0	0
(338) MATT JOHNSON IMMEDIATE PAST PRESIDENT	1.00	X						0	0	0
(339) JOHN MAZUREK EDUCATION DIRECTOR	1.00	X						0	0	0
(340) ASIF RIAZ SECRETARY	2.00	X		X				0	0	0
(341) ZUZANA ROBERTSON MARKETING DIRECTOR	1.00	X						0	0	0
(342) KAREN SCHLIDT CERTIFICATION DIRECTOR	2.00	X						0	0	0
(343) JONATHAN STERNBERG RESEARCH DIRECTOR	1.00	X						0	0	0
(344) TARA WISDORF 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 (list any hours for related organizations below dotted line)	(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) CAMERON YAZDANI PRESIDENT	3.00	X		X				0	0	0
(346) REGINA CONCEPCION SECRETARY	3.00	X		X				0	0	0
(347) TUG GROVDKIN EDUCATIONAL DIRECTOR	3.00	X						0	0	0
(348) CRAIG MCCORMICK PRESIDENT	3.00	X		X				0	0	0
(349) GEORGE SCHNEIDER MEDIA DIRECTOR	5.00	X						0	0	0
(350) AMBER SCHROCK MEMBERSHIP DIRECTOR	3.00	X						0	0	0
(351) ASPEN SHIMAMOTO TREASURER	3.00	X		X				0	0	0
(352) JOHN SOUZA VICE PRESIDENT / PRESIDENT	3.00	X		X				0	0	0
(353) DAVID ALEXANDER VICE PRESIDENT	7.00	X		X				0	0	0
(354) ANNA CARLIN DIRECTOR	7.00	X						0	0	0
(355) JONATHAN CHAN DIRECTOR	7.00	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 (list any hours for related organizations below dotted line)	(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) PRASAD KODUKULLA DIRECTOR	7.00	X						0	0	0
(357) GENEMAR LAZO DIRECTOR	7.00	X						0	0	0
(358) KAREN NORTON SECRETARY	7.00	X		X				0	0	0
(359) THOMAS PHELPS IV DIRECTOR	7.00	X						0	0	0
(360) KENDRICK TSE PRESIDENT	7.00	X		X				0	0	0
(361) MIGUEL VILLEGAS DIRECTOR	7.00	X						0	0	0
(362) AMANDA XU DIRECTOR	7.00	X						0	0	0
(363) KELLY LIN TREASURER	7.00	X		X				0	0	0
(364) JIMMY ALBAREZ PROGRAMS	3.00	X						0	0	0
(365) JEFFREY BASKIN FACILITIES	.25	X						0	0	0
(366) MATETA BROOKS MEMBERSHIP	.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 (list any hours for related organizations below dotted line)	(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) BEN MOULDER VICE PRESIDENT	2.50	X		X				0	0	0
(368) KEITH RICHARDSON SECRETARY	1.00	X		X				0	0	0
(369) SUSAN ROSS PRESIDENT & TREASURER	5.00	X		X				0	0	0
(370) TIMOTHY AGEE VICE PRESIDENT	2.00	X		X				0	0	0
(371) SCOTT CREWS CERTIFICATION DIRECTOR	2.00	X						0	0	0
(372) KENNETH DESOUZA TREASURER	2.00	X		X				0	0	0
(373) MATTHEW EDMAN PAST PRESIDENT	2.00	X						0	0	0
(374) PAUL GREENE WEBMASTER	2.00	X						0	0	0
(375) KEVIN GROOM PRESIDENT	2.00	X		X				0	0	0
(376) JOSHUA LEWIS PROGRAMS DIRECTOR	2.00	X						0	0	0
(377) FRANK PLATT MEMBERSHIP 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) LAURA SHIVER RESEARCH DIRECTOR	2.00	X						0	0	0
(379) ASHLEY SPANGLER MARKETING DIRECTOR	2.00	X						0	0	0
(380) CATHERINE WILSON SECRETARY	2.00	X		X				0	0	0
(381) REGINALD ABRAHAM PRESIDENT	5.00	X		X				0	0	0
(382) KIMBERLY ANDERSON VP OF CLIENT RELATIONS	2.00	X		X				0	0	0
(383) STEPHEN CASPER IMMEDIATE PAST PRESIDENT	5.00	X						0	0	0
(384) JAY CHINTARAM VP OF COMMUNICATIONS	2.00	X		X				0	0	0
(385) JODY COLLIS PRESIDENT ELECT	5.00	X		X				0	0	0
(386) TERRENCE DELAHUNT VP OF MEMBERSHIP	3.00	X		X				0	0	0
(387) THOMAS DOLAN VP OF CERTIFICATION	1.00	X		X				0	0	0
(388) STEEN FJALSTAD CHIEF ADMINISTRATIVE OFFICER	5.00	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 (list any hours for related organizations below dotted line)	(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) JOHN JASINSKI VP OF AFFILIATES	4.00	X		X				0	0	0
(390) BILL KANE VP OF INFORMATION TECHNOLOGY	5.00	X		X				0	0	0
(391) JORDAN SERRE DIRECTOR/UMSA BOARD MEMBER	1.00	X						0	0	0
(392) RICHARD SPIEKER TREASURER	2.00	X		X				0	0	0
(393) THOMAS TISTHAMMER SECRETARY	1.00	X		X				0	0	0
(394) JEFFREY VERSTEEG VP OF EDUCATION	3.00	X		X				0	0	0
(395) WILLIAM WEBB AUDIT CHAIR	1.00	X						0	0	0
(396) MICHAEL WILM DIRECTOR/UMSA BOARD MEMBER	1.00	X						0	0	0
(397) TODD BISHOPP BOARD	1.00	X		X				0	0	0
(398) RON BURFORD TREASURER	2.00	X		X				0	0	0
(399) MARK DUPUIS 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 (list any hours for related organizations below dotted line)	(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) DC GRANT PRESIDENT	2.00	X		X				0	0	0
(401) SARAH ABEDIN PRESIDENT	10.00	X		X				0	0	0
(402) ANTHONY AVENS AUDIT DIRECTOR	1.00	X						0	0	0
(403) MELODY BALCET SECRETARY	4.00	X		X				0	0	0
(404) PHILIP CROSBY MARKETING DIRECTOR	3.00	X						0	0	0
(405) KYLE FOLEY PAST PRESIDENT	2.00	X		X				0	0	0
(406) UJWAL GANDHI CGEIT REVIEW DIRECTOR	1.00	X						0	0	0
(407) ROSEY GREER DOD LIAISON	.50	X						0	0	0
(408) DANIEL HILL CRISC REVIEW DIRECTOR	1.00	X						0	0	0
(409) MIKE HOWARD INTERNET DIRECTOR	5.00	X						0	0	0
(410) BENJAMIN HSIAO SPECIAL SEMINARS 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) DEBBIE HUNTER TREASURER	10.00	X		X				0	0	0
(412) ALOK KAKKER REGISTRATION DIRECTOR	2.00	X						0	0	0
(413) AMANDEEP LAMBA CO-DIRECTOR CONFERENCES	.50	X						0	0	0
(414) MARK LAVERY CISM REVIEW DIRECTOR	1.00	X						0	0	0
(415) GLADYS LEONARD VOLUNTEER COORDINATOR	3.00	X						0	0	0
(416) FERNANDO NIKITIN EDUCATION & RESEARCH	.50	X						0	0	0
(417) CLIFTON PERSAUD CISA REVIEW DIRECTOR	6.00	X						0	0	0
(418) CHARLES ROBERTS MEMBERSHIP DIRECTOR	3.00	X						0	0	0
(419) YEHUDA SCHMIDT ANNUAL MEETING DIRECTOR	1.00	X						0	0	0
(420) SUSAN SHARP LIAISON TO PROFESSIONAL ORG.	2.00	X						0	0	0
(421) TERESA SKEHAN CO-DIRECTOR CONFERENCES	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 (list any hours for related organizations below dotted line)	(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) BRIAN CASTAGNA PRESIDENT	8.00	X		X				0	0	0
(423) MARK DUDAS ADMINISTRATIVE VICE PRESIDENT	4.00	X		X				0	0	0
(424) VICTORIA GRAVES EXECUTIVE VICE PRESIDENT	4.00	X		X				0	0	0
(425) KATHARINE HAYES IMMEDIATE PAST PRESIDENT	4.00	X						0	0	0
(426) RACHEL HU SEC, AUDIT COM DIRC, & WEBMSTR	8.00	X		X				0	0	0
(427) MIKE MACCINI PROGRAM DIRECTOR	4.00	X						0	0	0
(428) LAURIE MCDONALD MARKETING DIRECTOR	2.00	X						0	0	0
(429) KELLY MCVEY MEMBERSHIP DIRECTOR	2.00	X						0	0	0
(430) KRYSTAL PEDERSEN WEBMASTER	4.00	X						0	0	0
(431) ROBERT SNYDER RESEARCH DIRECTOR	2.00	X						0	0	0
(432) JULIANNE TESSIER ACADEMIC LIAISON 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) JUSTIN THERIAULT TREASURER	4.00	X		X				0	0	0
(434) LARRY WILSON CERTIFICATION DIRECTOR	2.00	X						0	0	0
(435) BEVERLY AUSTIN DIRECTOR	5.00	X						0	0	0
(436) YOLANDA BAKER PRESIDENT	5.00	X		X				0	0	0
(437) DUSTIN BRADLEY DIRECTOR	5.00	X						0	0	0
(438) CARY BROWN VICE PRESIDENT	5.00	X		X				0	0	0
(439) NICHOLAS BUSSANICH DIRECTOR	5.00	X						0	0	0
(440) WILLIAM D'ALIA DIRECTOR	5.00	X						0	0	0
(441) KARL E. DAHLBERG TREASURER	5.00	X		X				0	0	0
(442) ANDREW ELLSWEIG DIRECTOR	5.00	X						0	0	0
(443) RUSS FAIRCHILD 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) BETH FLORES-MANLAPIG DIRECTOR	5.00	X						0	0	0
(445) DANIEL GALLIGAN DIRECTOR	5.00	X						0	0	0
(446) DOROTHY GUO DIRECTOR	5.00	X						0	0	0
(447) DONALD LIAO SECRETARY	5.00	X		X				0	0	0
(448) THOMAS MCDERMOTT DIRECTOR	5.00	X						0	0	0
(449) ANUP MODY DIRECTOR	5.00	X						0	0	0
(450) PRIYA PERUMAL DIRECTOR	5.00	X						0	0	0
(451) ALBERTO QUEZADA DIRECTOR	5.00	X						0	0	0
(452) NAVED REHMAN DIRECTOR	5.00	X						0	0	0
(453) JEFFREY S. SAFFER DIRECTOR	5.00	X						0	0	0
(454) JENNIFER LYNN SPIEWAK 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) MIZBA TAWA DIRECTOR	5.00	X						0	0	0
(456) THOMAS ZACHARIAH DIRECTOR	5.00	X						0	0	0
(457) GUS GALVES SECRETARY & MEMBER DIRECTOR	.50	X		X				0	0	0
(458) DAVID GRISHAM ACADEMIC RELATIONS COORDINATOR	.50	X						0	0	0
(459) ALAN GUTOWSKI MEMBER AT LARGE	.50	X						0	0	0
(460) MICHAEL HANSEN RESEARCH DIRECTOR	.50	X						0	0	0
(461) CARMEN KAVELMAN MEMBER AT LARGE	.50	X						0	0	0
(462) LIZA KERR MEMBER AT LARGE	.50	X						0	0	0
(463) ALLEN LEATHERWOOD IMMEDIATE PAST PRESIDENT	1.00	X						0	0	0
(464) CHRISTINA MACGREGOR VICE PRESIDENT	.50	X		X				0	0	0
(465) JAIME RUMBOA TREASURER	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 (list any hours for related organizations below dotted line)	(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) RAJA SAMBANDAM GOVERNMENT AUDIT LIASON	.50	X						0	0	0
(467) LEW WITZ PRESIDENT	1.00	X		X				0	0	0
(468) ALEX ABRAMOV 2ND VICE PRESIDENT	5.00	X		X				0	0	0
(469) JAMES AMBROSINI PAST PRESIDENT	2.00	X						0	0	0
(470) EMMA ARAKELYAN BOARD MEMBER	5.00	X						0	0	0
(471) ROCHELLE BRENNER BOARD MEMBER	5.00	X						0	0	0
(472) SAMMI CAI BOARD MEMBER	5.00	X						0	0	0
(473) JULIA CHING BOARD MEMBER	5.00	X						0	0	0
(474) ANTHONY D'AMATO BOARD MEMBER	5.00	X						0	0	0
(475) KEVIN FULLER BOARD MEMBER	5.00	X						0	0	0
(476) NIGEL JAMES BOARD MEMBER	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**

	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		

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) ALEXANDER JOSEPHITE CHAPTER PRESIDENT	20.00	X		X				0	0	0
(478) PHIL LERNER BOARD MEMBER	5.00	X						0	0	0
(479) MARGUERITE MCCARTHY 1ST VICE PRESIDENT	20.00	X		X				0	0	0
(480) JAMES POWERS BOARD MEMBER	5.00	X						0	0	0
(481) KAREN RAWLS CORRESPONDING SECRETARY	10.00	X		X				0	0	0
(482) BARRY ALLEN SEARS RECORDING SECRETARY	5.00	X		X				0	0	0
(483) RAISA SEREBRENİK BOARD MEMBER	5.00	X						0	0	0
(484) DR. MARIA SETTE BOARD MEMBER	5.00	X						0	0	0
(485) KWONGMEI TO BOARD MEMBER	5.00	X						0	0	0
(486) WEI TSCHANG BOARD MEMBER	5.00	X						0	0	0
(487) JULIANNE WU CHAPTER TREASURER	5.00	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 (list any hours for related organizations below dotted line)	(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) FELIX RAMIREZ PAST PRESIDENT	2.00	X						0	0	0
(489) MICHELLE CREER BOARD MEMBER	1.00	X						0	0	0
(490) JAMES DEDAD BOARD MEMBER	1.00	X						0	0	0
(491) KAREN DOUBRAVA SECRETARY	1.00	X		X				0	0	0
(492) DAMON HACKER BOARD MEMBER	1.00	X						0	0	0
(493) IMAN JOSHUA BOARD MEMBER AND PROGRAMS	2.00	X						0	0	0
(494) JENNIFER MORGAN BOARD MEMBER	1.00	X						0	0	0
(495) TRAVIS MOSER VICE PRESIDENT	1.00	X		X				0	0	0
(496) JEFFERY PERSHING PRESIDENT	2.50	X		X				0	0	0
(497) LISA PETERSON TREASURER	2.00	X		X				0	0	0
(498) ANTHONY AGUILAR WEBSITE ADMINISTRATOR I	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 (list any hours for related organizations below dotted line)	(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) CAROL BARKE SECRETARY	3.00	X		X				0	0	0
(500) LISA BARTSCH CPE COMPLIANCE COORDINATOR	2.00	X						0	0	0
(501) PHILIP CHUKWUMA PROGRAM COORDINATOR I	1.00	X						0	0	0
(502) IAN CONNORS NEWSLETTER COORDINATOR	1.00	X						0	0	0
(503) BRIAN EVANS ASST. TREASURER	2.00	X						0	0	0
(504) LAURIE FLANDRAU VP COMMUNICATIONS	3.00	X		X				0	0	0
(505) DOUGLAS GORRIE TREASURER	3.00	X		X				0	0	0
(506) LESLIE NORWOOD HOPKINS RESERVATIONS COORDINATOR	2.00	X						0	0	0
(507) AUSTIN HUTTON PROGRAM COORDINATOR III	2.00	X						0	0	0
(508) ANGEL JONES MARKETING COORDINATOR	1.00	X						0	0	0
(509) CHRISTOPHER JORDAN VP MEMBERSHIP	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



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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) JEFFREY KROMER WEBSITE WEBMASTER	1.00	X						0	0	0
(511) JOSE LINEROS DIR. OF ACADEMIC RELATIONS	2.00	X						0	0	0
(512) RICKY LINK 3RD PAST PRESIDENT	3.00	X						0	0	0
(513) SEAN MCALOON NEWSLETTER COORDINATOR	1.00	X						0	0	0
(514) JOE MCKERNAN, JR. JOBS COORDINATOR	1.00	X						0	0	0
(515) ANDREW NEAL VP PROGRAMS	3.00	X		X				0	0	0
(516) ROBERT NEBEL CERTIFICATIONS COORDINATOR II	3.00	X						0	0	0
(517) SUSAN PAGEL 2ND PAST PRESIDENT	3.00	X						0	0	0
(518) BARRY RAVEN VP CERTIFICATIONS	3.00	X		X				0	0	0
(519) MARVIN READER 1ST PAST PRESIDENT	3.00	X						0	0	0
(520) JD SMITH EDUCATION COORDINATOR II	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 (list any hours for related organizations below dotted line)	(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) MATTHEW SMITH VP EDUCATION	3.00	X		X				0	0	0
(522) GREGORY STREDER PRESIDENT	6.00	X		X				0	0	0
(523) BRITTANY TEARE VP FACILITIES	3.00	X		X				0	0	0
(524) SHIRLEY WALKER WEBSITE ADMINISTRATOR II	1.00	X						0	0	0
(525) IDDAH WANGONDU EDUCATION COORDINATOR I	1.00	X						0	0	0
(526) KYLE WESS CERTIFICATIONS COORDINATOR I	3.00	X						0	0	0
(527) PASCAL BIZARRO TREASURER	2.00	X		X				0	0	0
(528) GLEN BRASS BOARD MEMBER	1.00	X						0	0	0
(529) DAVID CUTRI BOARD MEMBER	1.00	X						0	0	0
(530) MIKE GALLAGHER BOARD MEMBER	1.00	X						0	0	0
(531) MICHAEL GERBER 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
- 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 (list any hours for related organizations below dotted line)	(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) GREG HUSSEY BOARD MEMBER	1.00	X						0	0	0
(533) KEVIN MICHAEL KELLEY BOARD MEMBER	1.00	X						0	0	0
(534) ZACHERY KRAMP BOARD MEMBER	1.00	X						0	0	0
(535) JIM KRIEGER VICE PRESIDENT	2.00	X		X				0	0	0
(536) PAUL NELSON BOARD MEMBER	1.00	X						0	0	0
(537) LAURIE RYAN IMMEDIATE PAST PRESIDENT	1.00	X		X				0	0	0
(538) KATHERINE VAN JURA SECRETARY	2.00	X		X				0	0	0
(539) JOSEPH THOMAS GLAB COMM. CHAIR & WEBMASTER	10.00	X						0	0	0
(540) JENNIFER HUNT VICE PRESIDENT	5.00	X		X				0	0	0
(541) MCKENZIE KICHLER SECRETARY	7.00	X		X				0	0	0
(542) DAVID FRANCIS MEDEIROS, JR. PROGRAM CHAIR & PAST PRESIDENT	12.00	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 (list any hours for related organizations below dotted line)	(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) STEVEN PEET TREASURER	10.00	X		X				0	0	0
(544) JOHN VYHLIDAL PRESIDENT	7.00	X		X				0	0	0
(545) DAVID BARTON PRESIDENT (1/13-6/13)	2.00	X		X				0	0	0
(546) DAVID BARTON PAST PRESIDENT (6/13-12/13)	1.00	X		X				0	0	0
(547) JOHN BROOKS SECRETARY (1/13-6/13)	1.00	X		X				0	0	0
(548) PATRICK DEMSKI TREASURER	1.00	X		X				0	0	0
(549) JASON JAMES VICE PRESIDENT (6/13-12/13)	2.00	X		X				0	0	0
(550) JASON UHLMAN VICE PRESIDENT (1/13-6/13)	10.00	X		X				0	0	0
(551) JASON UHLMAN PRESIDENT (6/13-12/13)	10.00	X		X				0	0	0
(552) LAUREN WHITE SECRETARY (6/13-12/13)	1.00	X		X				0	0	0
(553) GIRARD SMITH IMMEDIATE PAST PRESIDENT	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 (list any hours for related organizations below dotted line)	(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) WILLIAM BAILEY DIRECTOR	1.00	X						0	0	0
(555) MARK BRENNAN DIRECTOR	1.00	X						0	0	0
(556) RICHARD CASTRO DIRECTOR	1.00	X						0	0	0
(557) DEREK DANILSON COMMUNICATIONS CHAIR	7.00	X						0	0	0
(558) PAULA D'ORAZIO SECRETARY	5.00	X		X				0	0	0
(559) MICHAEL GRIFFITH DIRECTOR	1.00	X						0	0	0
(560) ALEX HABRE DIRECTOR	1.00	X						0	0	0
(561) ANTHONY HERNANDEZ DIRECTOR	1.00	X						0	0	0
(562) LAURA HITCHCOCK DIRECTOR	1.00	X						0	0	0
(563) MARK KEPPLER DIRECTOR	.50	X						0	0	0
(564) ZACHARY LEAHAN DIRECTOR & ARC COMMITTEE 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

	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 (list any hours for related organizations below dotted line)	(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			
(565) ATUL MALHOTRA 1ST VP & EDUCATION CHAIR	5.00	X		X			0	0	0
(566) THU NGUYEN DIRECTOR	1.00	X					0	0	0
(567) AGNES PERAINO PAST PRESIDENT & DIRECTOR	1.00	X					0	0	0
(568) CLARENCE RINDGEN 2ND VP & PROGRAM CHAIR	7.00	X		X			0	0	0
(569) GAVIN ROBINSON DIRECTOR	1.00	X					0	0	0
(570) ALAN SHEPPARD PRESIDENT	10.00	X		X			0	0	0
(571) WARREN ROBERT SIMMONS DIRECTOR & CVENT COORDINATOR	3.00	X					0	0	0
(572) AMIT VARIA DIRECTOR & MEMBERSHIP DIRECTOR	1.00	X					0	0	0
(573) TORPEY WHITE TREASURER	7.00	X		X			0	0	0
(574) AARON CARPENTER DIRECTOR	2.00	X					0	0	0
(575) 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 (list any hours for related organizations below dotted line)	(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) TIM CHASE DIRECTOR	2.00	X						0	0	0
(577) AARON COOK PRESIDENT	10.00	X		X				0	0	0
(578) TIMOTHY COX DIRECTOR	2.00	X						0	0	0
(579) ANDY DEAS DIRECTOR	2.00	X						0	0	0
(580) NIC HARRISON TREASURER	5.00	X		X				0	0	0
(581) BRIAN IRISH FORMER TREASURER	.25	X						0	0	0
(582) KIM JONES DIRECTOR	.25	X						0	0	0
(583) DENISE LECLAIRE DIRECTOR	.25	X						0	0	0
(584) ADAM REMIS PAST PRESIDENT	.25	X						0	0	0
(585) GAIL RICKETTS IMMEDIATE PAST PRESIDENT	.25	X						0	0	0
(586) JOHN SIMONS VICE PRESIDENT	5.00	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 (list any hours for related organizations below dotted line)	(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) ERICA SMITH 2ND VICE PRESIDENT	5.00	X		X				0	0	0
(588) RON THOMPSON SECRETARY	5.00	X		X				0	0	0
(589) JEFFREY TROGAN VICE PRESIDENT	.25	X		X				0	0	0
(590) MICHAEL CONLON DIRECTOR OF ONLINE PRESENCE	1.00	X						0	0	0
(591) DANIEL DESKO DIRECTOR OF OUTREACH	1.00	X						0	0	0
(592) ANGELA HALL TREASURER	1.00	X		X				0	0	0
(593) STEPHANIE MCDONOUGH SECRETARY	1.00	X		X				0	0	0
(594) JEFFREY MEEHAN VICE PRESIDENT OF LOGISTICS	1.00	X		X				0	0	0
(595) STACEY SLAVONIC VICE PRESIDENT OF PROGRAMS	1.00	X		X				0	0	0
(596) KRISTEN SPILLEN VICE PRESIDENT OF SEMINARS	1.00	X		X				0	0	0
(597) BRETT WILSON DIRECTOR & GRA 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 (list any hours for related organizations below dotted line)	(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			
(598) JASON ZAHN PRESIDENT	2.00	X		X			0	0	0
(599) JACK CHAMPLAIN ACADEMIC OUTREACH & AUDIT	1.00	X					0	0	0
(600) REBECCA DOLS SECRETARY	1.00	X		X			0	0	0
(601) CHITRA GOPALAKRISHNAN CISA COORDINATOR	1.00	X					0	0	0
(602) STEPHEN JUE PROGRAMS DIRECTOR	1.00	X					0	0	0
(603) STEVE MAR CISA COORDINATOR	1.00	X					0	0	0
(604) THOMAS MCANDREW IMMEDIATE PAST PRESIDENT	1.00	X					0	0	0
(605) DON MCGILLIVRAY VICE PRESIDENT	1.00	X		X			0	0	0
(606) ROBERTA MCGILLIVRAY MEMBERSHIP DIRECTOR	1.00	X					0	0	0
(607) SCOTT NEWMAN EDUCATION DIRECTOR	1.00	X					0	0	0
(608) TIMOTHY SANDAGE 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) JOSE MICHAEL SANTOS WEBMASTER	1.00	X						0	0	0
(610) WILLIAM STONE EDUCATION DIRECTOR	1.00	X						0	0	0
(611) AARON SUOJA TREASURER	2.00	X		X				0	0	0
(612) BILL WILDPRETT COMMUNICATIONS DIRECTOR	1.00	X						0	0	0
(613) CHRIS GARRISS VICE PRESIDENT	1.00	X		X				0	0	0
(614) RICHARD HUDON DIRECTOR	1.00	X						0	0	0
(615) SRINI KOLATHUR SOCIAL MEDIA COORDINATOR	1.00	X						0	0	0
(616) LAURA O'GRADY SECRETARY	1.00	X		X				0	0	0
(617) JOANNA ROJAS DIRECTOR	1.00	X						0	0	0
(618) ALAN ROTH DIRECTOR	1.00	X						0	0	0
(619) SRINIVAS SARASWATULA 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) DAN SCHMIDT TREASURER	.25	X		X				0	0	0
(621) TIA SHOEMAKER RESEARCH DIRECTOR	1.00	X						0	0	0
(622) CANDACE SMITH RESEARCH DIRECTOR	1.00	X						0	0	0
(623) MICHELLE WICKER VICE PRESIDENT	2.00	X		X				0	0	0
(624) BENJAMIN COGAN SECRETARY	1.20	X		X				0	0	0
(625) KEVAN RILEY PAST PRESIDENT	1.20	X						0	0	0
(626) RONALD ROY VICE PRESIDENT	1.20	X		X				0	0	0
(627) STEVEN SAVARD TREASURER	1.20	X		X				0	0	0
(628) WILLIAM SOARES PRESIDENT	1.20	X		X				0	0	0
(629) BEOMIN CHOI ACADEMIC LIASON	.10	X						0	0	0
(630) BRYAN CURNUTT INSTRUCTOR: CISA REVIEW	.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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) LUISA DOI SECRETARY	1.00	X		X				0	0	0
(632) HOWARD DUCK PRESIDENT & INSTRUCTOR	1.50	X		X				0	0	0
(633) STEPHEN FINEBERG DIRECTOR OF MEMBERSHIP	.50	X						0	0	0
(634) ROGER FORNOLES PRESIDENT	1.00	X		X				0	0	0
(635) ESWARA GHORIAKAVI TREASURER	2.00	X		X				0	0	0
(636) MARIA GREGORIO MARKETING & COMM. DIRECTOR	1.00	X						0	0	0
(637) KATHRYN MAHAFFEY MARKETING & COMM. CHAIRPERSON	.50	X						0	0	0
(638) BEN MALISOW CO-RESEARCH DIRECTOR	.10	X						0	0	0
(639) RANDY MCCLENDON INSTRUCTOR: CISA REVIEW	.50	X						0	0	0
(640) JOHN MELLAS TREASURER	2.00	X		X				0	0	0
(641) MARK MYERS INSTRUCTOR: CISA REVIEW	.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 (list any hours for related organizations below dotted line)	(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) JANIECE PIERCE VOLUNTEERS DIRECTOR	.50	X						0	0	0
(643) LILY RANKINS NEWSLETTER VOLUNTEER	.50	X						0	0	0
(644) CHUCK RICHIE INSTRUCTOR: CISM REVIEW	.50	X						0	0	0
(645) CAROL STEICHEN NEWSLETTER EDITOR	.50	X						0	0	0
(646) KAREN TINUCCI PRESIDENT	1.00	X		X				0	0	0
(647) RAMI ZREIKAT DIRECTOR OF PROGRAMS	1.00	X						0	0	0
(648) JUDY FELDMEIER ACADEMIC RELATIONS COORDINATOR	8.00	X						0	0	0
(649) ARIANA FORD MEMBERSHIP DIRECTOR	15.00	X		X				0	0	0
(650) DANIEL GONZALES WEBMASTER	3.00	X						0	0	0
(651) ROBERT GONZALES DIRECTOR AT LARGE	20.00	X						0	0	0
(652) SAMIR JARJOU 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**

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 (list any hours for related organizations below dotted line)	(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) BARBARA MALDONADO EDUCATION CHAIR	20.00	X						0	0	0
(654) GEORGE MEADOWS IMMEDIATE PAST PRESIDENT	5.00	X						0	0	0
(655) HAYDEE MEDINA TREASURER	20.00	X		X				0	0	0
(656) LUPE NEAVES VICE PRESIDENT	20.00	X		X				0	0	0
(657) DAVID O'CONNOR DIRECTOR OF AWARDS	10.00	X						0	0	0
(658) JOSH SHELTON SECRETARY (MID TERM)	8.00	X		X				0	0	0
(659) THERESA DOAN CISA COORDINATOR	18.00	X		X				0	0	0
(660) JUSTIN THOMPSON SECRETARY (MID TERM)	8.00	X		X				0	0	0
(661) GABRIEL TREVINO DIRECTOR AT LARGE (CVENT)	16.00	X						0	0	0
(662) DON BEGG MARKETING COORDINATOR	.20	X						0	0	0
(663) ALEXANDRA BRANISTEANU CISM 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 (list any hours for related organizations below dotted line)	(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) M. STEPHANE JACQUES GERMAIN RESEARCH DIRECTOR	3.00	X						0	0	0
(665) NOEL HASKINS-HAFER CGEIT AND CRISC COORDINATOR	3.00	X						0	0	0
(666) SIRIKALAYA KHUNA-TARASAK EDUCATION CHAIR	.50	X						0	0	0
(667) KIM LAMOUREUX COMMUNICATIONS	1.00	X						0	0	0
(668) LUCILA MAXWELL MEMBERSHIP DIRECTOR	2.00	X						0	0	0
(669) CHAD NEALE VICE PRESIDENT	4.00	X		X				0	0	0
(670) XUAN-KHANG NGUYEN SECRETARY	2.00	X		X				0	0	0
(671) METIN PASAOGU IMMEDIATE PAST PRESIDENT	.20	X						0	0	0
(672) SWATI PATEL PROG DIR & ED COORDINATOR	4.30	X						0	0	0
(673) CHANASEE PHANGMUANGDEE WEBMASTER	5.00	X						0	0	0
(674) TRISA MENDOZA RAMIREZ CISA 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 (list any hours for related organizations below dotted line)	(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			
(675) ARTURO RUVACALBA MEMBERSHIP DIRECTOR	2.00	X						0	0	0
(676) ANDREW SERWIN CO-CHAIR / RESEARCH DIRECTOR	.20	X						0	0	0
(677) TIMOTHY SMITH TREASURER	10.00	X		X				0	0	0
(678) MATT STAMPER PRESIDENT	10.00	X		X				0	0	0
(679) JARED THORNE CO-WEBMASTER	5.00	X						0	0	0
(680) BLAKE ZIMMERMAN PROGRAM CO-CHAIR	3.00	X						0	0	0
(681) DOMINIQUE BORDON DIRECTOR	1.00	X						0	0	0
(682) THOMAS BORTON DIRECTOR	2.00	X						0	0	0
(683) ELIZA CORPUZ DIRECTOR	1.00	X						0	0	0
(684) ADNAN DAKHWE SECRETARY	2.00	X		X				0	0	0
(685) WILLIAM DAVIDSON 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 (list any hours for related organizations below dotted line)	(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) CASSIUS DOWNS DIRECTOR	2.00	X						0	0	0
(687) DEBRA MALLETTE TREASURER	4.00	X		X				0	0	0
(688) THEJ MEHTA PAST PRESIDENT	1.00	X						0	0	0
(689) DOUGLAS MOHRLAND 2ND VICE PRESIDENT	2.00	X		X				0	0	0
(690) HEATHER OUELLETTE PRESIDENT	4.00	X		X				0	0	0
(691) STEPHEN SHOFNER 1ST VICE PRESIDENT	2.00	X		X				0	0	0
(692) NELLY SPIELER DIRECTOR	2.00	X						0	0	0
(693) JOHN STEENSEN DIRECTOR	2.00	X						0	0	0
(694) GWYNNE BENSON NEWSLETTER DIRECTOR	.50	X						0	0	0
(695) RYAN BOGGS GRC - GOVT AND REGULATORY	.50	X						0	0	0
(696) KAREEM BRIGGS 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		

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) MICHAEL CARDENAS EDUCATION DIRECTOR	1.00	X						0	0	0
(698) BRIAN CLYBURN SECRETARY	1.00	X		X				0	0	0
(699) THOMAS HART PRESIDENT	3.00	X		X				0	0	0
(700) LISA HENRY MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(701) PETER MORRILL RESEARCH DIRECTOR	.50	X						0	0	0
(702) SUSAN RUSHER PAST PRES, ED DIR & ACAD ADVOC	4.50	X						0	0	0
(703) HARRIET SIMPSON MARKETING DIRECTOR	1.00	X						0	0	0
(704) JENNIFER WALKER TREASURER	3.00	X		X				0	0	0
(705) BETTIE WILSON CERTIFICATION DIRECTOR	.50	X						0	0	0
(706) NAIMISH ANARKAT PROGRAM DIRECTOR	4.00	X						0	0	0
(707) ROCCO CAPPALLA CONFERENCE 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) MURALI CHANDRASEKHARAN MARKETING DIRECTOR	5.00	X						0	0	0
(709) RUCHI VERMA GUPTA ACADEMIC RELATIONS	5.00	X						0	0	0
(710) LAWRENCE HALME VICE PRESIDENT	1.50	X		X				0	0	0
(711) MICHAEL JORDAN PRESIDENT	2.00	X		X				0	0	0
(712) BRIJEN JOSHI MEMBERSHIP DIRECTOR	4.50	X						0	0	0
(713) SUMIT KALRA PAST PRESIDENT	.50	X						0	0	0
(714) PRASAD SANJEEVAIAH SECRETARY	1.00	X		X				0	0	0
(715) DHARSHAN SHANTHAMURTHY CERTIFICATIONS DIRECTOR	2.00	X						0	0	0
(716) ROBERT YEWELL TREASURER	5.00	X		X				0	0	0
(717) CHIBUEZE ALUTU DIRECTOR OF VOLUNTEERS	4.00	X						0	0	0
(718) ROBERT DANIEL ARLOTTO DIR OF CORPORATE RELATIONS	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 (list any hours for related organizations below dotted line)	(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) DESIREE AUCHEY TREASURER	6.00	X		X				0	0	0
(720) MICHAEL BAYERE DIRECTOR OF MEMBERSHIP	4.00	X						0	0	0
(721) GERARD BOUCAUD DIRECTOR OF MARKETING	2.00	X						0	0	0
(722) PETER CHRISTIAANS PRESIDENT	6.00	X		X				0	0	0
(723) SCOTT JUDD DIRECTOR OF CERTIFICATIONS	4.00	X						0	0	0
(724) ABBIE JULLIEN DIRECTOR OF IT GOVERNANCE	4.00	X						0	0	0
(725) JOANNE KLIPPER SECRETARY	6.00	X		X				0	0	0
(726) JORDAN ILAN LOMBARD DIRECTOR AT LARGE	2.00	X						0	0	0
(727) MICHAEL MARSHALL DIRECTOR AT LARGE	2.00	X						0	0	0
(728) CLAY MOEGENBURG DIRECTOR AT LARGE	2.00	X						0	0	0
(729) SANDRA PARRAS DIRECTOR OF PROGRAMMING	6.00	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 (list any hours for related organizations below dotted line)	(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) LUIS PAULETE DIRECTOR OF ACADEMIC RELATIONS	6.00	X						0	0	0
(731) ALEXIS PERDEREAUX-WEEKES DIRECTOR OF COMMUNICATION	4.00	X						0	0	0
(732) ERIC PHIFER DIRECTOR AT LARGE	2.00	X						0	0	0
(733) JULIAN SANDOVAL VICE PRESIDENT	6.00	X		X				0	0	0
(734) CHARLA BERRY PRESIDENT	1.00	X		X				0	0	0
(735) DAWN FRANK SECRETARY	1.00	X		X				0	0	0
(736) STACY HILL CERTIFICATION DIRECTOR	1.00	X						0	0	0
(737) AVERY HUDSON TREASURER	1.00	X		X				0	0	0
(738) LOUIS SHAWN LATIMER WEBSITE DIRECTOR	1.00	X						0	0	0
(739) PEGGY MCDANNALD VICE PRESIDENT	1.00	X		X				0	0	0
(740) SHANNON MCMURTREY EDUCATION 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 (list any hours for related organizations below dotted line)	(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) JUNE MIDDLETON ARRANGEMENTS DIRECTOR	1.00	X						0	0	0
(742) JAMES TAYLOR RESEARCH DIRECTOR	1.00	X						0	0	0
(743) ERIC WARAKOMSKI MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(744) DAVE ALLEN PAST PRESIDENT	.50	X						0	0	0
(745) JAMES BUCHANAN WEBMASTER	1.00	X						0	0	0
(746) VIOLETA CALMUS MEMBERSHIP DIRECTOR	.50	X						0	0	0
(747) CRYSTAL DEES ADMINISTRATIVE VICE PRESIDENT	1.00	X		X				0	0	0
(748) TIMOTHY GRACE PRESIDENT	2.00	X		X				0	0	0
(749) OSEREME LARA IMEOKPARIA CERTIFICATIONS	.50	X						0	0	0
(750) MICHAEL JEANMOUGIN SECRETARY	.50	X		X				0	0	0
(751) TIMOTHY MCLAUGHLIN EDUCATION 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 **0**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) DOUG MENENDEZ UNIVERSITY LIASON	.50	X						0	0	0
(753) LAWRENCE NEWELL EXECUTIVE VICE PRESIDENT	1.00	X		X				0	0	0
(754) DENNIS RISINGER VOLUNTEER COMMITTEE CHAIR	.50	X						0	0	0
(755) JEFFREY STREIF TREASURER	2.00	X		X				0	0	0
(756) ANDREW TITUS ARRANGEMENTS & HOSPITALITY	2.00	X						0	0	0
(757) GEOFFREY ADAMS TREASURER	1.00	X		X				0	0	0
(758) RAFAELA BOEHM COMMUNICATIONS & MARKETING	.50	X						0	0	0
(759) KAREN CALHOUN MEMBERSHIP DIRECTOR	.50	X						0	0	0
(760) KATIFANI CRUM VICE PRESIDENT	1.00	X		X				0	0	0
(761) JANICE FOLEY ACADEMIC AFFAIRS	.10	X						0	0	0
(762) BRITTANY GILLIARD 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 (list any hours for related organizations below dotted line)	(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) SARAH BETH HALL PRESIDENT	2.00	X		X				0	0	0
(764) R. DALE JACKSON CONTENT AUTHOR	.10	X						0	0	0
(765) CHARLES EDWARD WILSON CO-VICE PRESIDENT	1.00	X		X				0	0	0
(766) LISA L. WINTERS WEB MASTER	.10	X						0	0	0
(767) SHUYUAN MARY HO RESEARCH & PRIVACY COORDINATOR	.10	X						0	0	0
(768) WILLIS RABON DIRECTOR AT LARGE	.10	X						0	0	0
(769) DAMON RODRIGUEZ PAST PRESIDENT	.10	X						0	0	0
(770) TIMOTHY FAWCETT IMMEDIATE PAST PRESIDENT	.50	X						0	0	0
(771) ALEX ISLAMOV SECRETARY	.50	X		X				0	0	0
(772) JAIME SMITH TREASURER	2.00	X		X				0	0	0
(773) MICHELLE STUDIE VICE PRESIDENT	.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 **0**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) JONATHAN WILLIAMS PRESIDENT	1.50	X		X				0	0	0
(775) DAN ANDERSON PRESIDENT	8.00	X		X				0	0	0
(776) JEFFERSON DAVIS ACADEMIC RELATIONS COORDINATOR	2.00	X						0	0	0
(777) RYAN EDWARDS WEBMASTER	4.00	X						0	0	0
(778) STEVEN FINK CERTIFICATION COORDINATOR	2.00	X						0	0	0
(779) MILAS HOWE PROGRAM & SEMINAR COORDINATOR	8.00	X						0	0	0
(780) ROBERT JORGENSEN RESEARCH DIRECTOR	2.00	X						0	0	0
(781) BRANDIE LLEWELYN MEMBERSHIP DIRECTOR	2.00	X						0	0	0
(782) BRAD NELSON SECRETARY	8.00	X		X				0	0	0
(783) PAUL NEWMAN IMMEDIATE PAST PRESIDENT	2.00	X						0	0	0
(784) EDWARD RASMUSSEN EDUCATION 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) BRIAN SHARP VP & PCM CHAIR	13.00	X		X				0	0	0
(786) JERRY SMITH COMMUNICATIONS DIRECTOR	5.00	X						0	0	0
(787) RACHAEL SMITH TREASURER	8.00	X		X				0	0	0
(788) CATHERINE BROWN PAST PRESIDENT	5.00	X						0	0	0
(789) SCOTT HAMMER PRESIDENT	20.00	X		X				0	0	0
(790) BERNARD HILL SECRETARY	5.00	X		X				0	0	0
(791) GERALD JARVIS TREASURER	20.00	X		X				0	0	0
(792) AARON KIRBY CERTIFICATIONS DIRECTOR	10.00	X						0	0	0
(793) MATT RITTER PROGRAMS DIRECTOR	10.00	X						0	0	0
(794) MARY SAVAGE VICE PRESIDENT	20.00	X		X				0	0	0
(795) DEIDRE TOMPKINS MEMBERSHIP 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 (list any hours for related organizations below dotted line)	(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) JONATHAN CAMPBELL VICE PRESIDENT	10.00	X		X				0	0	0
(797) SOPHIA CZAUS SOCIAL MEDIA	2.00	X						0	0	0
(798) CHRISTOPHER DAWES PRESIDENT	10.00	X		X				0	0	0
(799) ANITA DHARSI EDUCATION COORDINATOR	2.00	X						0	0	0
(800) SHAWNA FLANDERS CERTIFICATION COORDINATOR	2.00	X						0	0	0
(801) PAUL JEROME MEMBERSHIP DIRECTOR	2.00	X						0	0	0
(802) JOHN KADACHKA IMMEDIATE PAST PRESIDENT	2.00	X						0	0	0
(803) JOHAN LIDROS CERTIFICATION COORDINATOR	2.00	X						0	0	0
(804) KAMI MURPHY WEBMASTER	2.00	X						0	0	0
(805) MARTIN NASH TREASURER	2.00	X		X				0	0	0
(806) CHAD PETERSON 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 (list any hours for related organizations below dotted line)	(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			
(807) DANIEL RUGGLES SECRETARY	5.00	X		X				0	0	0
(808) ANA VALDEZ RODGERS MARKETING	2.00	X						0	0	0
(809) JOHN BENNETT MARKETING DIRECTOR	.50	X						0	0	0
(810) TIM BEVER DIRECTOR AT LARGE	.50	X						0	0	0
(811) CASSANDRA CHASNIS VICE PRESIDENT	2.00	X		X				0	0	0
(812) JOHN JUAREZ DIRECTOR AT LARGE	.50	X						0	0	0
(813) CHARLES ROBERT KERN IMMEDIATE PAST PRESIDENT	.50	X						0	0	0
(814) DERRICK KOOISTRA MEMBERSHIP DIRECTOR	.50	X						0	0	0
(815) KATHY KRAUSE WEBSITE DIRECTOR	.50	X						0	0	0
(816) TIMOTHY KUBU PRESIDENT	2.00	X		X				0	0	0
(817) BRENT MOEGGENBORG TREASURER	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 (list any hours for related organizations below dotted line)	(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			
(818) SHELLEY PELFREY COMMUNICATIONS DIRECTOR	1.00	X						0	0	0
(819) SALIM ALANI BOARD MEMBER	.25	X						0	0	0
(820) TODD COLVIN VICE PRESIDENT	4.00	X		X				0	0	0
(821) JOHN GAGNE TREASURER	4.00	X		X				0	0	0
(822) PAUL LASLY BOARD MEMBER	.25	X						0	0	0
(823) CAROLANN LAZARUS BOARD MEMBER	2.00	X						0	0	0
(824) MICHAEL MARTELL BOARD MEMBER	.10	X						0	0	0
(825) DEREK MOSHER BOARD MEMBER	1.00	X						0	0	0
(826) DAN PAOLINI BOARD MEMBER	1.00	X						0	0	0
(827) JIM RAUB SECRETARY	4.00	X		X				0	0	0
(828) DONALD REDMAN 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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			
(829) EVAN ROUTENBERG FORMER PRESIDENT	4.00	X						0	0	0
(830) FARAH SAMMOUR BOARD MEMBER	2.00	X						0	0	0
(831) PAUL SCHNEIDER BOARD MEMBER	.25	X						0	0	0
(832) CHANDRA SIMMONS FORMER TREASURER	1.00	X						0	0	0
(833) PETER SPIER FORMER PRESIDENT	.50	X						0	0	0
(834) MICHAEL VETRANO BOARD MEMBER	1.00	X						0	0	0
(835) VIRGIL ALLDRITT TREASURER	1.00	X		X				0	0	0
(836) DAVID DYK PROGRAMS DIRECTOR	1.00	X						0	0	0
(837) SIMON GOLDSTEIN PAST PRESIDENT	.50	X						0	0	0
(838) GEORGE MACAULAY ASSISTANT MEMBERSHIP DIRECTOR	1.00	X						0	0	0
(839) ADAM NASSET MARKETING 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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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			
(840) RAYMOND NEVILLE VICE PRESIDENT	1.00	X		X				0	0	0
(841) JOHN O'MALLEY EDUCATION DIRECTOR	1.00	X						0	0	0
(842) MAHNAZ MONA RABII ASSISTANT EDUCATION DIRECTOR	1.00	X						0	0	0
(843) JANICE RICHARDS PRESIDENT	1.00	X		X				0	0	0
(844) JEN SELLS SECRETARY	1.00	X		X				0	0	0
(845) VICTORIA SILVER ASSISTANT PROGRAMS DIRECTOR	1.00	X						0	0	0
(846) JNANA SIVANANDA ASSISTANT TREASURER	1.00	X						0	0	0
(847) ADAM STARLING MEMBERSHIP 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

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
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	4,753			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		4,753			
Program Service Revenue				Business Code			
	2a	CONFERENCES & SEMINARS	611600	1,826,680	1,826,680		
	b	MEMBERSHIP DUES - NONDEDUCTIBLE	611600	1,433,432	1,433,432		
	c	CHAPTER MEETINGS	611600	561,186	561,186		
	d	EXHIBITOR	611600	1,249	1,249		
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		3,822,547			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts).		5,577			5,577
	4	Income from investment of tax-exempt bond proceeds		0			
	5	Royalties		1,211			1,211
			(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				
	b	Less direct expenses	b				
	c	Net income or (loss) from fundraising events		0			
	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities		0			
	10a	Gross sales of inventory, less returns and allowances	a				
b	Less cost of goods sold	b					
c	Net income or (loss) from sales of inventory		0				
Miscellaneous Revenue			Business Code				
11a	SPONSORSHIP REVENUE	900099	26,416			26,416	
b	CHAPTER SOCIAL EVENTS	900099	19,764			19,764	
c	ADVERTISING	900099	3,375		1,200	2,175	
d	All other revenue	900099	33,616			33,616	
e	Total. Add lines 11a-11d		83,171				
12	Total revenue. See instructions		3,917,259	3,822,547	1,200	88,759	

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)

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	117,521.			
2 Grants and other assistance to individuals in the United States See Part IV, line 22	24,000.			
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	0			
10 Payroll taxes	0			
11 Fees for services (non-employees)				
a Management	26,587.			
b Legal	907.			
c Accounting	23,444.			
d Lobbying	0			
e Professional fundraising services See Part IV, line 17.	0			
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	12,618.			
12 Advertising and promotion	24,450.			
13 Office expenses	91,658.			
14 Information technology	97,705.			
15 Royalties	0			
16 Occupancy	571.			
17 Travel	127,571.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	2,946,483.			
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	0			
23 Insurance	46,718.			
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	5,879.			
b TAXES	175.			
c				
d				
e All other expenses	112,596.			
25 Total functional expenses Add lines 1 through 24e	3,658,883.			
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

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,805,343.	1	1,717,224.
	2 Savings and temporary cash investments	2,342,207.	2	2,726,074.
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	43,884.	4	5,900.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6 Loans and other 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) Complete Part II of Schedule L	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	0
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	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	215.	15	243.
16 Total assets. Add lines 1 through 15 (must equal line 34)	4,191,649.	16	4,449,441.	
Liabilities	17 Accounts payable and accrued expenses	0	17	0
	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 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	0	26	0
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	4,191,649.	27	4,449,441.
	28 Temporarily restricted net assets	0	28	0
	29 Permanently restricted net assets	0	29	0
	Organizations that do not follow SFAS 117 (ASC 958), 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	4,191,649.	33	4,449,441.
	34 Total liabilities and net assets/fund balances	4,191,649.	34	4,449,441.

Form 990 (2013)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,917,259.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,658,883.
3	Revenue less expenses Subtract line 2 from line 1	3	258,376.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,191,649.
5	Net unrealized gains (losses) on investments	5	0
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	-584.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	4,449,441.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

- 1** Accounting method used to prepare the Form 990 ☒ Cash ☐ Accrual ☐ 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?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both.
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- 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.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b		X
2c		
3a		X
3b		

Form **990** (2013)

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

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 ▶ \$
- 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. ▶ \$
- 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) 2013

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												
1a	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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a 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) 2013

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	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated group list); Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

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.

OMB No 1545-0047

2013

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

94-2919522

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. 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 ALGONQUIN RD, STE 1010	95-3080691	501(C)(3)	71,651				GENERAL SUPPORT
(2) ILLINOIS STATE UNIVERSITY FOUNDATION 1101 N MAIN ST NORMAL, IL 61790	37-6025713	501(C)(3)	10,000				SCHOLARSHIP
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

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

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

Schedule I (Form 990) (2013)

JSA

3E1288 1 000

89364J 649R

1447160

PAGE 91

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	SCHOLARSHIP	23	24,000			
2						
3						
4						
5						
6						
7						

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

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

PART II

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 ISACA'S RESEARCH PROJECTS THROUGH ITGI AND IS FAMILIAR WITH ITGI'S MISSION. ISACA CHAPTERS RECEIVE REGULAR UPDATES TO MAINTAIN AN AWARENESS OF RESEARCH PROJECTS WITHIN ISACA THROUGH A MONTHLY NEWSLETTER.

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

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

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

PART III

CHAPTERS PROVIDE SCHOLARSHIPS TO IT AUDITING AND SECURITY PROFESSIONALS

AND TO ACADEMIC STUDENTS FOR CERTIFICATION AND/OR ACADEMIC STUDIES.

SCHOLARSHIPS ARE MERIT-BASED ON AN INDIVIDUAL SCORE. ALL FUNDS ISSUED TO

INDIVIDUALS ARE REQUIRED TO BE USED TO DEFRAY THE COST OF CERTIFICATION,

TUITION AND BOOKS. THE INDIVIDUAL CHAPTERS DO NOT FOLLOW UP WITH

INDIVIDUALS AFTER ISSUANCE OF SCHOLARSHIP.

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

2013

**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
07/04/12	HUNTSVILLE 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

Name of the organization	INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION CHAPTERS	Employer identification number
--------------------------	---	--------------------------------

01/09/06	NORTHWEST OHIO CHAPTER
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

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

11/22/80 WILLAMETTE VALLEY CHAPTER

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

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

TX GREATER HOUSTON CHAPTER
MO GREATER KANSAS CITY CHAPTER
PA HARRISBURG CHAPTER
HI HAWAII CHAPTER
NY HUDSON VALLEY CHAPTER
AL HUNTSVILLE CHAPTER
IL ILLINI CHAPTER
IA ILLOWA CHAPTER
FL JACKSONVILLE CHAPTER
KY KENTUCKIANA CHAPTER
WI KETTLE MORAINES 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

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

OH NORTHWEST OHIO CHAPTER
NE OMAHA CHAPTER
CA ORANGE COUNTY CHAPTER
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

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

OR WILLAMETTE VALLEY CHAPTER

FORM 990, PART IV, LINE 12A

INDEPENDENT AUDITED FINANCIAL STATEMENTS

40 OF THE 71 ISACA CHAPTERS RESPONDED "NO" TO LINE 12A.

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

ANCHORAGE CHAPTER

ATLANTA CHAPTER

AUSTIN CHAPTER

BOISE CHAPTER

CENTRAL ARKANSAS CHAPTER

CENTRAL MARYLAND CHAPTER

DENVER CHAPTER

DETROIT CHAPTER

GREATER HARTFORD CHAPTER

GREATER HOUSTON CHAPTER

HUDSON VALLEY CHAPTER

HUNTSVILLE CHAPTER

MINNESOTA CHAPTER

NEW ORLEANS CHAPTER

NEW YORK METRO CHAPTER

ORANGE COUNTY CHAPTER

PHILADELPHIA CHAPTER

PHOENIX CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

PITTSBURGH CHAPTER
RESEARCH TRIANGLE CHAPTER
RHODE ISLAND CHAPTER
SACRAMENTO CHAPTER
SAN DIEGO CHAPTER
SAN FRANCISCO CHAPTER
SC MIDLANDS CHAPTER
SILICON VALLEY CHAPTER
SPRINGFIELD MISSOURI CHAPTER
TULSA CHAPTER
UTAH CHAPTER
WEST FLORIDA CHAPTER
WESTERN MICHIGAN CHAPTER

BASED ON ESTABLISHED AUDIT THRESHOLDS FOR NON-PROFITS, AN EXTERNAL AUDIT IS NOT REQUIRED OF ALL INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (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.

FORM 990, PART V, LINE 1A
NUMBER REPORTED IN BOX 3 OF FORM 1096
66 OF THE 71 ISACA CHAPTERS RESPONDED "NO" TO LINE 1A.

THE FOLLOWING INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA)

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

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

ATLANTA CHAPTER	1
DETROIT CHAPTER	5
LOS ANGELES CHAPTER	2
NEW ENGLAND CHAPTER	4
SILICON VALLEY CHAPTER	1

FORM 990, PART VI, SECTION A, LINE 2

FAMILY OR BUSINESS RELATIONSHIP

69 OF THE 71 ISACA CHAPTERS RESPONDED "NO" TO LINE 2.

THE FOLLOWING INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA)
CHAPTERS RESPONDED "YES" TO LINE 2 AND INDICATED THE FAMILY OR BUSINESS
RELATIONSHIP AS FOLLOWS:

PUGET SOUND CHAPTER:

DON MCGILLIVRAY, THE VICE PRESIDENT, AND ROBERTA MCGILLIVRAY, THE
MEMBERSHIP DIRECTOR, HAVE A FAMILY RELATIONSHIP.

SOUTH FLORIDA CHAPTER:

PETER CHRISTIAANS, THE PRESIDENT, AND SANDRA PARRAS, THE PROGRAMMING
DIRECTOR, HAVE A FAMILY RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 4

GOVERNING DOCUMENT CHANGES

69 OF THE 71 ISACA CHAPTERS RESPONDED "NO" TO LINE 4.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

THE FOLLOWING INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA)
CHAPTERS RESPONDED "YES" TO LINE 4 AND INDICATED THAT CHANGES HAD BEEN
MADE TO THEIR GOVERNING DOCUMENTS:

KENTUCKIANA CHAPTER:

BYLAWS WERE UPDATED, REVISING CHAPTER OFFICER RESPONSIBILITIES,
MEMBERSHIP CLASSIFICATIONS AND QUALIFICATIONS, AND COMMITTEE
RESPONSIBILITIES.

RHODE ISLAND CHAPTER:

BYLAWS WERE UPDATED, REVISING CHAPTER OFFICER RESPONSIBILITIES,
MEMBERSHIP CLASSIFICATIONS AND QUALIFICATIONS, AND COMMITTEE
RESPONSIBILITIES.

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 180 COUNTRIES AND RUN THE GAMUT OF JOB TITLES, INCLUDING

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

INFORMATION SYSTEM 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 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:

MEMBERS ELECT BOARD MEMBERS.

ATLANTA CHAPTER:

CHAPTER MEMBERS ELECT THE BOARD OF DIRECTOR POSITIONS FOR PRESIDENT, VICE

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

PRESIDENT, SECRETARY AND TREASURER.

AUSTIN CHAPTER:

ANNUAL VOTING PROCESS FOR FOLLOWING YEAR'S BOARD MEMBERS. VOTE HELD
DURING ANNUAL GENERAL MEETING.

BATON ROUGE CHAPTER:

PRIOR TO THE ANNUAL GENERAL MEMBERSHIP (AGM) MEETING, A COMMUNICATION IS
SENT TO ISACA MEMBERS ACCEPTING NOMINATIONS FOR BOARD POSITIONS. IF
ACCEPTED BY THE NOMINEE, THOSE NOMINATED ARE INCLUDED ON THE VOTING
BALLOT. DURING AGM, MEMBERS HAVE A COPY OF THE BALLOT AND VOTE FOR
POSITIONS. BALLOTS ARE COUNTED BY A PERSON PREFERABLY INDEPENDENT OF THE
ISACA ORGANIZATION. THE PERSON WITH THE MOST VOTES WILL HOLD THE
RESPECTIVE BOARD POSITION.

BIRMINGHAM CHAPTER:

CHAPTER MEMBERS ANNUALLY ELECT CHAPTER OFFICERS BASED ON BYLAWS AROUND
NOMINATION AND VOTING.

BOISE CHAPTER:

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

CENTRAL ARKANSAS CHAPTER:

MEMBERS OF THE ORGANIZATION VOTE ON BOARD MEMBER POSITIONS.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

CENTRAL FLORIDA CHAPTER:

MEMBERSHIP ELECTS THE GOVERNING BODY EACH YEAR AT THE ANNUAL AGM.

CENTRAL INDIANA CHAPTER:

ANNUAL CHAPTER ELECTIONS

CENTRAL IOWA CHAPTER:

ALL MEMBERS VOTE ANNUALLY ON A ROSTER OF CANDIDATES FOR THE CHAPTER
OFFICE.

CENTRAL MARYLAND CHAPTER:

ANNUAL ELECTION THROUGH WEBSITE VOTING IN APRIL AND ANNOUNCEMENT OF BOARD
IN MAY TRAINING EVENT. IN FEBRUARY BOARD MEETING, BOARD VOTES TO ALLOW
NOMINEES TO EXCEED TWO-YEAR ELECTED CYCLE SINCE MOST ELECTED BOARD
MEMBERS ARE INCUMBENTS.

CENTRAL NEW YORK CHAPTER:

ALL MEMBERS ELECT THE CHAPTER OFFICERS AND BOARD OF DIRECTORS.

CENTRAL OHIO CHAPTER:

THE MEMBERS ELECT THE OFFICERS AND BOARD OF DIRECTORS ON A YEARLY BASIS.
THE BOARD CAN APPOINT INDIVIDUALS TO A PARTICULAR OFFICE OR BOARD
POSITION IN THE EVENT THAT NO ONE RUNS FOR AN ELECTED POSITION.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

CENTRAL OKLAHOMA CHAPTER:

GOVERNING BODY IS ELECTED BY MEMBERS.

CHARLOTTE CHAPTER:

MEMBERS ELECT THE EXECUTIVE BOARD AT THE ANNUAL GENERAL MEETING WHICH IS
HELD IN JUNE OF EACH YEAR.

CHICAGO CHAPTER:

THE CHAPTER MEMBERS CAN VOTE FOR THE BOARD.

DENVER CHAPTER:

SEVEN CHAPTER OFFICERS ARE ELECTED BY THE MEMBERS, THE OTHER FOUR 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.

GREATER CINCINNATI CHAPTER:

ELECTIONS ARE HELD AT THE FINAL ANNUAL MEETING AT THE END OF EACH TWO
YEAR TERM. THOSE RUNNING FOR ELECTION ARE VOTED FOR AND APPROVED BY THOSE
ATTENDING THE MEETING. A QUORUM OF ACTIVE ISACA MEMBERS MUST BE PRESENT
FOR THIS.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

GREATER HARTFORD CHAPTER:

BALLOT IS PREPARED BY AN INDEPENDENT TEAM OF MEMBERS. BALLOT IS PRESENTED
THROUGH A THIRD PARTY WEB BASED SYSTEM, "VOTE.COM." BALLOT RESULTS ARE
PRESENTED AT THE ANNUAL MEETING.

GREATER HOUSTON CHAPTER:

WE HAVE AN ELECTION OF BOARD MEMBERS EVERY TWO YEARS IN MAY.

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 BOARD MEMBERS ARE APPOINTED.

HARRISBURG CHAPTER:

MEMBERS VOTE IN THE ELECTION OF THE GOVERNING BODY.

HAWAII CHAPTER:

THE GOVERNING BODY IS ELECTED ANNUALLY BY A SIMPLE MAJORITY VOTE OF ALL
MEMBERS IN GOOD STANDING AT THE TIME OF THE VOTE.

HUDSON VALLEY CHAPTER:

MEMBERS ELECT THE BOARD.

HUNTSVILLE CHAPTER:

ANNUAL ELECTIONS WITH OFFICERS INSTALLED AT ANNUAL GENERAL MEETING.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ILLINI CHAPTER:

ELECTIONS ARE HELD FOR THE BOARD EVERY TWO YEARS.

ILLOWA CHAPTER:

ALL MEMBERS OF THE BOARD ARE ELECTED AT THE ANNUAL MEETING EACH YEAR BY
THOSE MEMBERS PRESENT AT THE MEETING.

JACKSONVILLE CHAPTER:

MEMBERS VOTE FOR OFFICERS OF THE CHAPTER AT THE ANNUAL MEETING.

KENTUCKIANA CHAPTER:

MEMBERS ELECT ALL OFFICERS.

KETTLE MORaine CHAPTER:

ALL MEMBERS VOTE TO ELECT THE GOVERNING BOARD ANNUALLY.

LAS VEGAS CHAPTER:

BOARD IS ELECTED BY ALL MEMBERS.

LOS ANGELES CHAPTER:

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.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

MEMPHIS CHAPTER:

ALL MEMBERS IN GOOD STANDING HAVE THE OPPORTUNITY TO ELECT MEMBERS OF THE
BOARD.

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:

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 SAME VOTING RIGHTS AS THE GOVERNING BOARD. BALLOTS ARE
ISSUED OUT IN APRIL AND A GENERAL MEMBER MEETING IS HELD IN MAY TO VOTE
FOR THE MEMBERS OF THE BOARD.

NATIONAL CAPITAL AREA CHAPTER:

THE CHAPTER OFFICERS ARE ELECTED BY THE CHAPTER MEMBERS BI-ANNUALLY.
INDIVIDUALS ARE NOMINATED, THE NOMINEES BIOS ARE POSTED TO THE CHAPTER
WEB SITE, THE ENTIRE MEMBERSHIP IS NOTIFIED OF THE ELECTION AND HOW TO
CAST THEIR VOTE ELECTRONICALLY.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

NEW ENGLAND CHAPTER:

ANNUAL ELECTION OF BOARD.

NEW JERSEY CHAPTER:

ANNUALLY NOMINATIONS ARE SOLICITED FROM THE NJ CHAPTER MEMBERS FOR THE
NOMINATION COMMITTEE REVIEW. AFTER WHICH, NJ CHAPTER MEMBERS VOTE FOR 19
OFFICERS AND BOARD MEMBERS, WHO ARE INSTALLED ON JULY 1ST.

NEW MEXICO CHAPTER:

MEMBERS OF THE BOARD ARE ELECTED BY THE MEMBERS DURING THE ANNUAL
MEETING.

NEW ORLEANS CHAPTER:

THE CHAPTER HAS MEMBERS THAT CAN ELECT OR APPOINT ONE OR MORE MEMBERS OF
THE GOVERNING BODY AND ARE ELECTED DURING THE ANNUAL GENERAL MEETING
(AGM) .

NEW YORK CITY CHAPTER:

MEMBERS DO ELECT THE CHAPTER BOARD IN AN ANNUAL ELECTION AS STATED IN THE
BYLAWS.

NORTH TEXAS CHAPTER:

MEMBERSHIP VOTES ANNUALLY ON THE BOARD MEMBERS.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

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 SEPTEMBER 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: 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. 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

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

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:

ALL MEMBERS VOTE ANNUALLY FOR THE CHAPTER OFFICERS.

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:

MEMBERS ELECT THE BOARD MEMBERS ONCE A YEAR THROUGH VOTE.

PUGET SOUND CHAPTER:

MEMBERS VOTE FOR THE BOARD AT THE ANNUAL GENERAL MEETING IN MAY.

RESEARCH TRIANGLE CHAPTER:

CHAPTER MEMBERS ELECT THE BOARD OF DIRECTORS (THE GOVERNING BODY). THE
RESEARCH DIRECTORS, WEBMASTER, SOCIAL MEDIA COORDINATOR, ETC. ARE
APPOINTED BY THE ELECTED BOARD OF DIRECTORS.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

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.

IF A VACANCY SHOULD OCCUR IN ANY OFFICE OTHER THAN THE PRESIDENT, THE

VACANCY SHALL BE FILLED BY THE CHAPTER BOARD.

SAN ANTONIO/SOUTH TEXAS CHAPTER:

WHEN WE HAVE MORE THAN ONE PERSON NOMINATED FOR THE SAME POSITION. THEN

AN EMAIL IS SENT TO ALL MEMBERS, ASKING FOR THEIR VOTE SO THAT THEY CAN

SEE THE PEOPLE NOMINATED PER POSITION, AND DECIDE WHO WILL SERVE ON THE

BOARD FOR THAT SPECIFIED POSITION.

SAN DIEGO CHAPTER:

MEMBERS VOTE FOR OFFICERS AND DIRECTORS EACH YEAR IN ADVANCE OF THE

GENERAL MEETING.

SAN FRANCISCO CHAPTER:

MEMBERS OF THE SAN FRANCISCO CHAPTER ELECT OFFICERS AND DIRECTORS

ANNUALLY.

SC MIDLANDS CHAPTER:

MEMBERSHIP IN THE ASSOCIATION IS A REQUIREMENT FOR MEMBERSHIP IN A

CHAPTER. THEREFORE, UPON JOINING THE CHAPTER, A PERSON MUST ALSO JOIN THE

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ASSOCIATION, WITH ACCOMPANYING RIGHTS AND RESPONSIBILITIES.

A. 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 TO HOLD OFFICE.

B. RETIRED MEMBER - ANY MEMBER, WHO PRESENTS PROOF OF RETIREMENT STATUS, SUBJECT TO RULES ESTABLISHED BY THE ASSOCIATION BOARD. RETIRED MEMBERS SHALL BE ENTITLED TO VOTE AND HOLD OFFICE AT THE CHAPTER LEVEL.

C. STUDENT MEMBER - FULL TIME STUDENT CURRENTLY ENROLLED IN A DEGREE PROGRAM OF AN ACCREDITED COLLEGE OR UNIVERSITY, SUBJECT TO RULES ESTABLISHED BY THE ASSOCIATION BOARD. STUDENT MEMBERS SHALL BE ENTITLED TO VOTE AND HOLD OFFICE AT THE CHAPTER LEVEL.

ADDITIONALLY, THE PRESIDENT MAY APPOINT DIRECTORS AS NEEDED.

SILICON VALLEY CHAPTER:

ALL MEMBERS HAVE THE POWER TO ELECT MEMBERS OF THE GOVERNING BODY.

SOUTH FLORIDA CHAPTER:

THE ORGANIZATION HAS A GENERAL MEMBERSHIP THAT ELECTS THE CHAPTER OFFICERS AND BOARD (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.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

SPRINGFIELD MISSOURI CHAPTER:

MEMBERS CAN ELECT OFFICERS. BOARD CAN APPOINT DIRECTORS.

ST. LOUIS CHAPTER:

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

TALLAHASSEE CHAPTER:

CHAPTER MEMBERS NOMINATE THE PEOPLE WHO WILL MAKEUP THE GOVERNING BODY
AND VOTE ON THE NOMINEES THEY WOULD LIKE TO HAVE ON THE GOVERNING BODY.

TULSA CHAPTER:

ANNUALLY, THE CHAPTER MEMBERSHIP VOTES ON THE MEMBERS OF THE CHAPTER
BOARD FOR THE FISCAL YEAR ENDING IN APRIL.

UTAH CHAPTER:

CHAPTER MEMBERS VOTE FOR BOARD.

VIRGINIA CHAPTER:

MEMBERS ELECT ALL OFFICERS.

WEST FLORIDA CHAPTER:

THE BOARD CAN VOTE FOR MEMBERS OF THE GOVERNING BODY JUST LIKE CHAPTER
MEMBERS. VOTING IS DONE THROUGH CVENT AND THE REPORT SHOWING RESULTS IS

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

DISTRIBUTED.

WESTERN MICHIGAN CHAPTER:

MEMBERSHIP VOTES FOR BOARD MEMBERS AT GENERAL MEMBERSHIP MEETING.

WESTERN NEW YORK CHAPTER:

MEMBERS VOTE AT ANNUAL GENERAL MEETING TO ELECT, RE-ELECT, OR CONFIRM
INTERIM BOARD/ OFFICER APPOINTMENTS.

WILLAMETTE VALLEY CHAPTER:

BOARD MEMBERS ARE ELECTED AT THE ANNUAL BUSINESS MEETINGS BY THE
MEMBERSHIP. TO FILL VACATED OR NEWLY CREATED BOARD POSITIONS BETWEEN
ANNUAL BUSINESS MEETINGS, THE PRESIDENT NOMINATES INDIVIDUALS TO THE
BOARD, SUBJECT TO RATIFICATION AT THE NEXT BOARD MEETING.

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

GOVERNING BODY DECISIONS SUBJECT TO APPROVAL

17 OF THE 71 ISACA CHAPTERS ANSWERED "NO" TO LINE 7B.

THE FOLLOWING INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA)
CHAPTERS ANSWERED "YES" TO LINE 7B:

ATLANTA CHAPTER:

CHANGES TO BYLAWS ARE SUBJECT TO APPROVAL BY MEMBERS.

BIRMINGHAM CHAPTER:

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

CHAPTER BYLAW REVISIONS ARE SUBJECT TO MEMBERSHIP APPROVAL (IN ADDITION
TO OFFICER APPROVAL).

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 ARKANSAS CHAPTER:

THE MEMBERS MUST VOTE TO APPROVE ANY CHANGES/UPDATES TO THE CHAPTER
BYLAWS.

CENTRAL FLORIDA CHAPTER:

THE BYLAWS ARE VOTED ON BY THE MEMBERSHIP, CURRENTLY WITH A TWO-THIRDS
(2/3) MAJORITY OF THE CURRENT MEMBERS BY E-MAIL CONFIRMATIONS OR BY VOICE
DURING A CHAPTER MEETING. MEMBERS WHO ARE NOT INTERESTED IN VOTING MAY
ABSTAIN, AND ARE NOT INCLUDED IN THE TOTAL MAJORITY NEEDED. MEMBERS WHO
RESPOND TO, BUT DO NOT SPECIFICALLY APPROVE THE BYLAWS, ARE CONSIDERED
"NO" VOTES.

CENTRAL INDIANA CHAPTER:

THE CHAPTER MEMBERS IN GOOD STANDING ARE ELIGIBLE TO VOTE ON AMENDMENTS
TO THE CHAPTER BYLAWS AND IN DETERMINING THE DISSOLUTION OF THE CHAPTER.

CENTRAL NEW YORK CHAPTER:

IN REGARDS TO GOVERNANCE DECISIONS, THE CHAPTER MEMBERS IN GOOD STANDING

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

ARE ELIGIBLE TO VOTE ON CHAPTER DISSOLUTION ONLY.

CENTRAL OKLAHOMA CHAPTER:

GOVERNANCE DECISIONS NEED TO BE APPROVED BY MEMBERS.

CHICAGO CHAPTER:

SIGNIFICANT BYLAW CHANGES ARE VOTED ON BY THE CHAPTER MEMBERS.

DENVER CHAPTER:

ISACA DENVER CHAPTER MEMBERS HAVE VOTING RIGHTS ON GOVERNANCE DECISIONS
INCLUDING BYLAWS AND BUDGET ITEMS OVER \$1,000.

DETROIT CHAPTER:

THESE BYLAWS MAY BE AMENDED AT ANY REGULAR MEETING BY A TWO-THIRDS (2/3)
VOTE PROVIDED THAT THE AMENDMENT HAS BEEN SUBMITTED IN WRITING AT THE
PREVIOUS REGULAR MEETING, OR HAS BEEN MAILED TO THE ENTIRE CHAPTER
MEMBERSHIP AT LEAST TEN (10) DAYS PRIOR TO THE MEETING AT WHICH IT WILL
BE CONSIDERED.

GREATER CINCINNATI CHAPTER:

ELECTIONS FOR THE NEW GOVERNING BODY ARE COMPLETED BY ORGANIZATION
MEMBERS FOR EACH TWO YEAR TERM.

GREATER HARTFORD CHAPTER:

THE CHAPTER BYLAWS MUST BE APPROVED BY THE MEMBERS OF THE CHAPTER.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

GREATER HOUSTON CHAPTER:

TWO-THIRDS (2/3) OF THE CHAPTER MEMBERS MUST VOTE TO DISSOLVE THE CHAPTER
OR CHANGE BYLAWS.

GREATER KANSAS CITY CHAPTER:

CHANGES TO THE CHAPTER BYLAWS ARE VOTED ON BY THE MEMBERS.

HARRISBURG CHAPTER:

BYLAW REVISIONS REQUIRE MEMBER APPROVAL.

HUDSON VALLEY CHAPTER:

CHAPTER MEMBERS APPROVE BYLAW CHANGES AND ELECTION OF THE BOARD.

HUNTSVILLE CHAPTER:

OUR BYLAWS, UPON ANY REVISION TRIGGERED EITHER BY THE BOARD OR AN INITIAL
MOTION OF THE MEMBERSHIP, MUST FIRST BE REVIEWED AND APPROVED BY ISACA;
THE INTERNATIONAL ASSOCIATION BASED IN CHICAGO, IL. THEN THE REVISION IS
VOTED UPON BY THE GENERAL MEMBERSHIP IN A FORMAL MEETING FOR THAT PURPOSE
WITH SPECIFIC ADVANCE NOTICE.

ILLINI CHAPTER:

CHANGING BYLAWS REQUIRES A CHAPTER MEMBER VOTE.

KENTUCKIANA CHAPTER:

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

PER CHAPTER BYLAWS, MEMBERS MAY VOTE ON AMENDMENTS TO BYLAWS, CHAPTER
DISSOLUTION, AND OFFICER ELECTIONS.

KETTLE MORaine CHAPTER:

MEMBERS VOTE ON BYLAW CHANGES WHEN THEY ARE NEEDED.

LAS VEGAS CHAPTER:

CERTAIN LARGE EXPENDITURES AND CHANGES TO BYLAWS REQUIRE MEMBER
APPROVAL.

LOS ANGELES CHAPTER:

TO AMEND THE CHAPTER BYLAWS, THE CHAPTER BOARD MUST APPROVE ALL BYLAW
CHANGES AND FORWARD THEM TO THE MEMBERSHIP DIVISION OF THE ASSOCIATION
WITH CHANGES INDICATED. THE ASSOCIATION MUST APPROVE ALL BYLAW CHANGES
PRIOR TO THEM BEING SUBMITTED FOR A VOTE BY CHAPTER MEMBERSHIP. CHAPTER
BYLAW AMENDMENTS WILL BE APPROVED, AT ANY CHAPTER MEETING, BY A
TWO-THIRDS (2/3) VOTE, PROVIDED THAT THE AMENDMENT HAS BEEN SUBMITTED IN
WRITING AT THE PREVIOUS MEETING, OR HAS BEEN MAILED OR E-MAILED TO THE
ENTIRE CHAPTER MEMBERSHIP AT LEAST TEN (10) DAYS PRIOR TO THE MEETING AT
WHICH IT WILL BE CONSIDERED. THE MEMBERSHIP DIVISION OF THE ASSOCIATION
WILL BE ADVISED THAT THE BYLAW AMENDMENTS HAVE BEEN APPROVED, AND WILL BE
SENT A COPY OF THE APPROVED VERSION OF THE BYLAWS. IF DISSOLUTION OF THE
CHAPTER BECOMES INEVITABLE, THESE BYLAWS MUST BE RESCINDED BY A
TWO-THIRDS (2/3) VOTE OF THE CHAPTER MEMBERSHIP AFTER TEN (10) DAYS
NOTICE HAS BEEN MAILED TO EACH MEMBER.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

MEMPHIS CHAPTER:

WHEN CHANGES ARE DESIRED THE CHANGES ARE SENT TO ALL MEMBERS AND THEN
VOTED ON DURING A NORMAL MONTHLY MEETING. MEMBERS ARE NOTIFIED PRIOR TO
THE MEETING AND TOPIC OF VOTE.

MIDDLE TENNESSEE CHAPTER:

AMENDMENTS TO THE CHAPTER'S BYLAWS MUST BE ADOPTED BY TWO-THIRDS (2/3) 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 (2/3) 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.

NATIONAL CAPITAL AREA CHAPTER:

MEMBERSHIP VOTE ON THE BYLAWS.

NEW ENGLAND CHAPTER:

IN PRACTICE, OUR BOARD OF DIRECTORS (BOD) WILL VOTE ON BUDGETING, BY LAW
CHANGES, ETC. HOWEVER, ANY MEMBERS ARE WELCOME TO JOIN THE BOD COMMITTEES
AND VOTE. FOR MORE SIGNIFICANT GOVERNANCE TOPICS SUCH AS CHAPTER
DISSOLUTION, OR BOD SLATE FOR THE YEAR. WE VOTE AT OUR ANNUAL MEETING
WITH THE ENTIRE MEMBERSHIP, NOT JUST BOD. IF YOU WANT TO DEFINE VOTING ON
GOVERNANCE CHANGES IN THAT CONTEXT, THEN WE WOULD ALWAYS BE VOTING ON
THOSE SIGNIFICANT TOPICS WITH THE MEMBERSHIP AT OUR ANNUAL GENERAL

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

MEETING EACH JUNE. WE ALSO HAVE WORDING IN OUR BYLAWS FOR OUR ANNUAL
MEETING, OR SPECIAL MEETINGS (IF AN EMERGENCY DECISION WAS NEEDED TO BE
MADE, THAT WAS BEYOND THE SCOPE THE BOD WAS ABLE TO HANDLE).

NEW JERSEY CHAPTER:

MEMBERS APPROVE THE BUDGET AT THE AGM.

NEW MEXICO CHAPTER:

PROPOSED CHANGES TO THE BYLAWS MUST BE APPROVED BY CHAPTER MEMBERS.

NEW YORK METRO CHAPTER:

BYLAW CHANGES AND DISSOLUTION ARE APPROVED BY THE MEMBERSHIP.

NORTH TEXAS CHAPTER:

MEMBERSHIP VOTES ON ANY CHANGES TO BYLAWS.

NORTHEAST OHIO CHAPTER:

NON-BUDGETED EXPENDITURES OVER \$3,000 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 A CHAPTER MEETING
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

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

PER OUR BYLAWS.

OMAHA CHAPTER:

THE CHAPTER BOARD SHALL APPROVE ALL SUGGESTED BYLAW CHANGES AND FORWARD THEM TO THE MEMBERSHIP DIVISION OF THE ASSOCIATION, WITH CHANGES INDICATED. THE ASSOCIATION MUST GIVE APPROVAL TO ALL BYLAW CHANGES PRIOR TO THEM BEING SUBMITTED FOR A VOTE BY CHAPTER MEMBERSHIP. CHAPTER BYLAW AMENDMENTS WILL BE APPROVED, AT ANY CHAPTER MEETING, BY A TWO-THIRDS (2/3) VOTE, PROVIDED THAT THE AMENDMENT HAS BEEN SUBMITTED IN WRITING AT THE PREVIOUS MEETING, OR HAS BEEN MAILED OR E-MAILED TO THE ENTIRE CHAPTER MEMBERSHIP AT LEAST TEN (10) DAYS PRIOR TO THE MEETING AT WHICH IT WILL BE CONSIDERED. THE MEMBERSHIP DIVISION OF THE ASSOCIATION WILL BE ADVISED THAT THE BYLAW AMENDMENTS HAVE BEEN APPROVED, AND WILL BE SENT A COPY OF THE APPROVED VERSION OF THE BYLAWS.

PHILADELPHIA CHAPTER:

ELECTION OF CHAPTER OFFICERS AND CHANGES TO BYLAWS.

PHOENIX CHAPTER:

MEMBERS HAVE THE FOLLOWING VOTING RIGHTS PER CHAPTER BYLAWS: BYLAW CHANGES - AT SUCH MEETING OF THE BOARD, THE PROPOSED CHANGE TO THE BYLAWS SHALL BE CONSIDERED AND VOTED UPON BY THE MEMBERS PRESENT. IF AT LEAST TWO-THIRDS (2/3) OF THE BOARD VOTE IN FAVOR OF SUCH CHANGE, THE APPROVED AMENDMENT, REPEAL OR ADDITION SHALL BE RECOMMENDED TO THE MEMBERSHIP. THESE BOARD RECOMMENDED CHANGES SHALL BE SUBMITTED IN WRITING AT THE

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

PREVIOUS REGULAR CHAPTER MEETING OR BE MAILED TO THE ENTIRE CHAPTER MEMBERSHIP AT LEAST TEN (10) DAYS PRIOR TO THE MEETING AT WHICH IT WILL BE CONSIDERED. AT THE CHAPTER MEETING, THE BYLAWS WILL BE AMENDED BY A TWO THIRDS (2/3) VOTE. DISSOLUTION - TO AFFECT DISSOLUTION OF THE CHAPTER, THESE BYLAWS MUST BE RESCINDED BY A TWO-THIRDS (2/3) VOTE OF THE MEMBERSHIP AFTER TEN (10) DAYS NOTICE HAS BEEN MAILED TO EACH MEMBER.

PITTSBURGH CHAPTER:

MEMBERS VOTE ON BYLAW CHANGES DURING OUR ANNUAL MAY MEETING AND ARE INCLUDED ON SIGNIFICANT DECISIONS SUCH AS CHAPTER DISSOLUTION.

PUGET SOUND CHAPTER:

TO EFFECT DISSOLUTION OF THE CHAPTER, THESE BYLAWS MUST BE RESCINDED BY A TWO-THIRDS (2/3) VOTE OF THE CHAPTER MEMBERSHIP AFTER TEN (10) DAYS NOTICE HAS BEEN MAILED TO EACH MEMBER. BYLAWS MAY BE AMENDED AT ANY REGULAR MEETING BY A TWO-THIRDS (2/3) VOTE PROVIDED THAT THE AMENDMENT HAS BEEN SUBMITTED IN WRITING AT THE PREVIOUS REGULAR MEETING, OR HAS BEEN MAILED OR EMAILED TO THE ENTIRE CHAPTER MEMBERSHIP AT LEAST TEN (10) DAYS PRIOR TO THE MEETING AT WHICH IT WILL BE CONSIDERED.

RESEARCH TRIANGLE CHAPTER:

BOARD OF DIRECTORS CAN PROPOSE CHANGES TO THE CHAPTER BYLAWS. CHANGES THEN HAVE TO BE APPROVED BY CHAPTER MEMBERS (AND ISACA INTERNATIONAL).

RHODE ISLAND CHAPTER:

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

MEMBERS HAVE VOTING RIGHTS ON CHAPTER BYLAWS.

SACRAMENTO CHAPTER:

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

SAN ANTONIO/SOUTH TEXAS CHAPTER:

MEMBERS HAVE VOTING RIGHTS ON CHAPTER BYLAWS.

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 NONPROFIT MUTUAL
BENEFIT CORPORATION LAW (THE "CODE") ALSO REQUIRES APPROVAL OF THE
MEMBERS OR APPROVAL OF A MAJORITY OF ALL MEMBERS.

SAN FRANCISCO CHAPTER:

CHANGES TO CHAPTER BYLAWS ARE SUBJECT TO APPROVAL BY ISACA AND CHAPTER
MEMBERSHIP.

SC MIDLANDS CHAPTER:

THE MEMBERSHIP DOES VOTE ON ANY CHAPTER BYLAW CHANGES AFTER APPROVAL OF
SUCH CHANGES BY THE BOARD AND ALSO ON DISSOLUTION OF THE CHAPTER. CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

BYLAW AMENDMENTS WILL BE APPROVED, AT ANY CHAPTER MEETING, BY A TWO-THIRDS (2/3) VOTE. IF DISSOLUTION OF THE CHAPTER BECOMES INEVITABLE, THESE BYLAWS MUST BE RESCINDED BY A TWO-THIRDS (2/3) VOTE OF THE CHAPTER MEMBERSHIP AFTER TEN (10) DAYS NOTICE HAS BEEN MAILED TO EACH MEMBER. THE CHAPTER MEMBERSHIP DOES NOT VOTE ON THE ANNUAL BUDGET, THIS IS THE RESPONSIBILITY OF THE CHAPTER BOARD.

SILICON VALLEY CHAPTER:

MEMBERS SHOULD APPROVE EXPENDITURES OUTSIDE OR EXCEEDING DOLLAR LIMITS DESCRIBED IN THE CURRENT BYLAWS OF THE APPROVED BUDGET.

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 TWO-THIRDS (2/3) OF THE MEMBERSHIP.

SPRINGFIELD MISSOURI CHAPTER:

THE MEMBERS HAVE VOTING RIGHTS IN ACCORDANCE TO OUR CHAPTER BYLAWS.

ST. LOUIS CHAPTER:

THE MEMBERSHIP WILL VOTE ON ANY CHANGES TO THE CHAPTER BYLAWS. THE CHANGES IN ORDER TO BE APPROVED REQUIRE A TWO-THIRDS (2/3) MAJORITY AT A REGULAR CHAPTER MEETING. THE VOTE IS REQUIRED TO BE ANNOUNCED AT THE PREVIOUS MEETING.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

TULSA CHAPTER:

YES, ACCORDING TO THE TULSA CHAPTER BYLAWS, THE CHAPTER MEMBERSHIP, BY
TWO-THIRDS (2/3) VOTE, APPROVE BYLAW CHANGES AND CHAPTER DISSOLUTION.

WEST FLORIDA CHAPTER:

THE BOARD ACTS ON BEHALF OF, AND IS SUBORDINATE TO, THE CHAPTER'S FULL
MEMBERSHIP GROUP, WHICH CHOOSES THE MEMBERS OF THE BOARD. IF SUGGESTIONS
ARE MADE BY THE MEMBERSHIP GROUP THAT ALIGN TO OUR CHAPTER STRATEGY AND
BYLAWS, WE WOULD PUT IT TO A VOTE.

WESTERN MICHIGAN CHAPTER:

MEMBERS VOTE ON REVISION/APPROVAL OF THE CHAPTER BYLAWS.

WESTERN NEW YORK CHAPTER:

MEMBERS VOTE ON ANY UPDATES TO BYLAWS OR OTHER DELEGATED ACTIONS AS
DESCRIBED IN BYLAWS.

WILLAMETTE VALLEY CHAPTER:

ELECTION OF BOARD AND CHANGES TO BYLAWS ARE APPROVED BY MEMBERSHIP AT
ANNUAL MEETING.

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

ORGANIZATION DOCUMENT MEETINGS BY EACH COMMITTEE

58 OF THE 71 ISACA CHAPTERS RESPONDED "YES" TO LINE 8B.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

THE FOLLOWING INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA)
CHAPTERS HAVE NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE
GOVERNING BODY:

GREATER KANSAS CITY CHAPTER

HARRISBURG CHAPTER

ILLOWA CHAPTER

MIDDLE TENNESSEE CHAPTER

MINNESOTA CHAPTER

NORTH TEXAS CHAPTER

PITTSBURGH CHAPTER

PUGET SOUND CHAPTER

SACRAMENTO CHAPTER

SAN DIEGO CHAPTER

TULSA CHAPTER

THE FOLLOWING ISACA CHAPTERS DO NOT CONTEMPORANEOUSLY DOCUMENT EVERY
MEETING HELD AND WRITTEN ACTION TAKEN:

ATLANTA CHAPTER

KENTUCKIANA CHAPTER

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

SUMMARY OF THE FORM 990 REVIEW PROCESS

THE 2013 FORM 990 FOR INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

(ISACA) CHAPTERS WAS PREPARED BY GRANT THORNTON LLP (GRANT THORNTON),
BASED UPON INFORMATION PROVIDED BY ISACA AND ISACA CHAPTERS. THIS
DOCUMENT SUMMARIZES THE REVIEW POINTS AND AVAILABILITY ASSOCIATED WITH
THE RETURNS.

THE DATA FOR THE RETURN WERE COMPILED BASED ON INFORMATION PREPARED FOR
2013, 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 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

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

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

42 OF THE 71 ISACA CHAPTERS RESPONDED "NO" TO LINE 12A:

THE FOLLOWING INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA)
CHAPTERS RESPONDED "YES" TO LINE 12A:

ATLANTA CHAPTER

AUSTIN CHAPTER

BIRMINGHAM CHAPTER

CENTRAL FLORIDA CHAPTER

CENTRAL MARYLAND CHAPTER

DENVER CHAPTER

DETROIT CHAPTER

GREATER CINCINNATI CHAPTER

GREATER HARTFORD CHAPTER

GREATER HOUSTON CHAPTER

HUNTSVILLE CHAPTER

JACKSONVILLE CHAPTER

MEMPHIS CHAPTER

MINNESOTA CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

NATIONAL CAPITAL AREA CHAPTER

NEW JERSEY CHAPTER

NEW ORLEANS CHAPTER

NEW YORK CITY CHAPTER

NORTHWEST OHIO CHAPTER

PHOENIX CHAPTER

PITTSBURGH CHAPTER

SACRAMENTO CHAPTER

SILICON VALLEY CHAPTER

SOUTH FLORIDA CHAPTER

SPRINGFIELD MISSOURI CHAPTER

TALLAHASSEE CHAPTER

VIRGINIA CHAPTER

WEST FLORIDA CHAPTER

WESTERN MICHIGAN CHAPTER

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

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

REQUIRED TO DISCLOSE CONFLICT OF INTERESTS ANNUALLY

26 OF THE 29 ISACA CHAPTERS THAT RESPONDED "YES" TO LINE 12A ALSO
RESPONDED "YES" TO LINE 12B.

ATLANTA CHAPTER

AUSTIN CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

BIRMINGHAM CHAPTER

CENTRAL FLORIDA CHAPTER

CENTRAL MARYLAND CHAPTER

DENVER CHAPTER

DETROIT CHAPTER

GREATER HARTFORD CHAPTER

GREATER HOUSTON CHAPTER

HUNTSVILLE CHAPTER

JACKSONVILLE CHAPTER

MEMPHIS CHAPTER

MINNESOTA CHAPTER

NEW JERSEY CHAPTER

NEW ORLEANS CHAPTER

NORTHWEST OHIO CHAPTER

PHOENIX CHAPTER

PITTSBURGH CHAPTER

SACRAMENTO CHAPTER

SILICON VALLEY CHAPTER

SOUTH FLORIDA CHAPTER

SPRINGFIELD MISSOURI CHAPTER

TALLAHASSEE CHAPTER

VIRGINIA CHAPTER

WEST FLORIDA CHAPTER

WESTERN MICHIGAN CHAPTER

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

COMPLIANCE WITH WRITTEN CONFLICT OF INTEREST POLICY

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

24 OF THE 29 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:

STATEMENTS OF DISCLOSURE ARE REQUIRED TO BE COMPLETED AND ARE REVIEWED
PRIOR TO BOARD MEMBERS ACCEPTING OFFICE.

BIRMINGHAM CHAPTER:

BOARD MEMBERS ARE ASKED TO READ THE POLICY AND ACKNOWLEDGE THEY ARE IN
COMPLIANCE WITH THE POLICY.

CENTRAL MARYLAND CHAPTER:

AS EACH MEMBER IS APPOINTED AND/OR ELECTED, THEY ARE REQUIRED TO COMPLETE
A CONFLICT OF INTEREST STATEMENT. THE BOARD REVIEWS THE SIGNED STATEMENTS
AT WHICH TIME ANY CONFLICTS ARE DISCUSSED.

DENVER CHAPTER:

OFFICERS MUST DISCLOSE AND SIGN WHEN THEY JOIN THE BOARD AND PROVIDE
ANNUAL RECERTIFICATIONS DURING THEIR TENURE. TREASURER IS AWARE OF THE

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

TRANSACTIONS AND INTERESTS AS DISCLOSED.

DETROIT CHAPTER:

MEMBERS ARE REQUIRED TO DISCLOSE CONFLICT OF INTERESTS ANNUALLY. REVIEWS
ARE PERFORMED TO ENSURE ALL DOCUMENTS HAVE BEEN RETURNED.

GREATER HARTFORD CHAPTER:

ALL BOARD MEMBERS MUST READ AND SIGN THE CONFLICT OF INTEREST POLICY ON
AN ANNUAL BASIS. THIS IS REVIEWED VERBALLY, QUARTERLY BY THE ACTING
PRESIDENT WITH THE BOARD.

GREATER HOUSTON CHAPTER:

WE REQUIRE ALL VOTING BOARD MEMBERS TO SIGN A CONFLICT OF INTEREST POLICY
EVERY VOTING YEAR. WE ALSO DISCUSS THIS AT BOARD MEETINGS.

HUNTSVILLE CHAPTER:

ALL OFFICERS ARE REQUIRED TO SIGN THE STOCK ISACA-PROVIDED CONFLICT OF
INTEREST FORM BEFORE ELIGIBILITY FOR OFFICE WHETHER ELECTED OR APPOINTED.
THE FULL BOARD IS INVOLVED FOR ALL FINANCIAL EXPENDITURES AND DECISIONS
LARGE OR SMALL.

JACKSONVILLE CHAPTER:

SIGNED ANNUALLY AND ANY POTENTIAL CONFLICTS ARE VETTED BY THE BOARD.

MEMPHIS CHAPTER:

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

TO CONSISTENTLY MONITOR AND ENFORCE COMPLIANCE, AS AN ORGANIZATION, WE
CREATE AN ENVIRONMENT OF TRANSPARENCY, INTEGRITY, AND ACCOUNTABILITY. IN
ADDITION WE FOLLOW UP ON ALL POTENTIAL CONFLICTS.

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. 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 ALL SUBMITTED
EXPENSES.

NEW JERSEY CHAPTER:

WE REQUIRE ANNUAL REPORTING BY EACH OFFICER AND DIRECTOR OF ANY
CONFLICTS, WHICH IS REVIEWED BY THE NOMINATING COMMITTEE. IN ADDITION,
THE INDEPENDENT EXPENDITURE APPROVER (OFFICER OR DIRECTOR) IS REQUIRED TO
IDENTIFY POTENTIAL CONFLICT.

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.

PHOENIX CHAPTER:

BOARD MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST STATEMENT PRIOR

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

TO TAKING OFFICE THAT REQUIRES DISCLOSURE OF ANY CHANGE IN INTERESTS
DURING THEIR TERM IN OFFICE.

PITTSBURGH CHAPTER:

OFFICERS SIGN CONFLICT OF INTEREST STATEMENTS ANNUALLY.

SACRAMENTO CHAPTER:

AT ELECTION OF OFFICERS, THE BOARD MEMBERS AND CANDIDATES ARE REQUESTED
TO SIGN AND RETURN THE CONFLICT OF INTEREST FORM.

SILICON VALLEY CHAPTER:

THE NOMINATING COMMITTEE ENSURES ALL ELECTED BOARD MEMBERS COMPLETE AND
SUBMIT THE CONFLICT OF INTEREST DECLARATION ANNUALLY.

SOUTH FLORIDA CHAPTER:

THE CONFLICT OF INTEREST POLICY IS INCLUDED IN THE NOMINATION OR
RENOMINATION FORMS THAT ARE SIGNED ANNUALLY BY EACH DIRECTOR OR OFFICER.

SPRINGFIELD MISSOURI CHAPTER:

OFFICERS SIGN AN ACKNOWLEDGEMENT.

TALLAHASSEE CHAPTER:

THE CHAPTER BOARD MEMBERS ARE REQUIRED TO FILL OUT A CONFLICT OF INTEREST
STATEMENT ANNUALLY THAT IS RETAINED BY THE SECRETARY OF THE CHAPTER.

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

VIRGINIA CHAPTER:

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

WEST FLORIDA CHAPTER:

EACH BOARD MEMBER IS REQUIRED TO SIGN OFF AND REVIEW THE POLICY EACH YEAR
TO ENSURE THEY ARE IN COMPLIANCE.

WESTERN MICHIGAN CHAPTER:

HONOR SYSTEM, BOARD AND COMMITTEE AWARENESS, BOARD VOTING FOR ALL CHAPTER
BUSINESS DECISIONS.

FORM 990, PART VI, SECTION B, LINE 13

WHISTLEBLOWER POLICY

67 OF THE 71 ISACA CHAPTERS ANSWERED "NO" TO LINE 13.

THE FOLLOWING INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA)
CHAPTERS RESPONDED "YES" TO LINE 13:

HUNTSVILLE CHAPTER

JACKSONVILLE CHAPTER

MINNESOTA CHAPTER

NEW JERSEY CHAPTER

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

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

FORM 990, PART VI, SECTION B, LINE 14

DOCUMENT RETENTION AND DESTRUCTION POLICY

65 OF THE 71 ISACA CHAPTERS ANSWERED "NO" TO LINE 14:

THE FOLLOWING INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA)

CHAPTERS RESPONDED "YES" TO LINE 14:

CHARLOTTE CHAPTER

HUNTSVILLE CHAPTER

JACKSONVILLE CHAPTER

MINNESOTA CHAPTER

NATIONAL CAPITAL AREA CHAPTER

TALLAHASSEE 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

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

55 OF THE 71 ISACA CHAPTERS MAKE THEIR GOVERNING DOCUMENTS (BYLAWS AND/OR
ARTICLES OF INCORPORATION), CONFLICT OF INTEREST POLICY, AND FINANCIAL
STATEMENTS AVAILABLE TO THE PUBLIC:

ANCHORAGE CHAPTER

ATLANTA CHAPTER:

AUSTIN CHAPTER

BATON ROUGE CHAPTER

BIRMINGHAM CHAPTER

BOISE CHAPTER

CENTRAL FLORIDA CHAPTER

CENTRAL IOWA CHAPTER

CENTRAL MARYLAND CHAPTER

CENTRAL OHIO CHAPTER

CENTRAL OKLAHOMA CHAPTER

CHARLOTTE CHAPTER

CHICAGO CHAPTER

DENVER CHAPTER

DETROIT CHAPTER

GREATER CINCINNATI CHAPTER

GREATER HARTFORD CHAPTER

GREATER HOUSTON CHAPTER

GREATER KANSAS CITY CHAPTER

HARRISBURG CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

HAWAII CHAPTER

HUDSON VALLEY CHAPTER

HUNTSVILLE CHAPTER

ILLINI CHAPTER

ILLOWA CHAPTER

KENTUCKIANA CHAPTER

KETTLE MORaine CHAPTER

LOS ANGELES CHAPTER

MEMPHIS CHAPTER

MIDDLE TENNESSEE CHAPTER

MINNESOTA CHAPTER

NATIONAL CAPITAL AREA CHAPTER

NEW ENGLAND CHAPTER

NEW JERSEY CHAPTER

NEW ORLEANS CHAPTER

NEW YORK METRO CHAPTER

NORTHEAST OHIO CHAPTER

OMAHA CHAPTER

PHILADELPHIA CHAPTER

PHOENIX CHAPTER

PITTSBURGH CHAPTER

PUGET SOUND CHAPTER

RESEARCH TRIANGLE CHAPTER

RHODE ISLAND CHAPTER

SACRAMENTO CHAPTER

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

SAN ANTONIO/SOUTH TEXAS CHAPTER

SAN DIEGO CHAPTER

SAN FRANCISCO CHAPTER

SC MIDLANDS CHAPTER

SILICON VALLEY CHAPTER

SOUTH FLORIDA CHAPTER

ST. LOUIS CHAPTER

UTAH CHAPTER

WEST FLORIDA CHAPTER

WESTERN MICHIGAN CHAPTER

FORM 990, PART XI, LINE 9

RECONCILIATION OF NET ASSETS

PRIOR PERIOD ADJUSTMENTS WERE MADE BY THE FOLLOWING CHAPTERS:

WESTERN NEW YORK CHAPTER	-665
--------------------------	------

SAN ANTONIO/SOUTH TEXAS CHAPTER	80
---------------------------------	----

TOTAL	-585
-------	------

FORM 990, PART XII, LINE 2C

ORGANIZATION'S FINANCIAL STATEMENTS

IT IS RECOMMENDED THAT INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION
(ISACA) CHAPTERS ESTABLISH AN INDEPENDENT AUDIT COMMITTEE, EITHER FOR THE

Name of the organization INFORMATION SYSTEMS AUDIT AND
CONTROL ASSOCIATION CHAPTERS

Employer identification number

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, 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 INFORMATION
TECHNOLOGY (IT), 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 PROFESSIONS, 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 2

FORM 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
71-0937387
177

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

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

BATON ROUGE CHAPTER
7817 N. JEFFERSON PLACE CIR., APT D
BATON ROUGE, LA 70809
72-1056363
085

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

BOISE CHAPTER
2458 SUNSHINE DR.
BOISE, ID 83712
82-0353193
042

CENTRAL ARKANSAS CHAPTER
1598 SUGAR MAPLE LANE
HENSLEY, AR 72065
52-1315583
082

AFFILIATED ORGANIZATIONS INC

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

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

CENTRAL IOWA CHAPTER
8504 LONG MEADOW LANE
JOHNSTON, IA 50131
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
16-1107127
029

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

CENTRAL OKLAHOMA CHAPTER
VELAVAN, INC., 4304 NW 164TH TER.
EDMOND, OK 73013
73-1206933
049

AFFILIATED ORGANIZATIONS INC

CHARLOTTE CHAPTER
7546 SEDGEBROOK DRIVE EAST
STANLEY, NC 28164
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
131 GUILFORD ROAD
BLOOMFIELD HILLS, MI 48304
23-7410401
008

GREATER CINCINNATI CHAPTER
881 LAFAYETTE AVE, #5
CINCINNATI, OH 45243
23-7291478
003

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

GREATER HOUSTON CHAPTER
P.O. BOX 2424
HOUSTON, TX 77252
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
1901 LUSITANA ST.
HONOLULU, HI 96813
99-0219334
071

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

HUNTSVILLE CHAPTER
P.O. BOX 4064
HUNTSVILLE, AL 35815
80-0809623
221

ILLINI CHAPTER
P.O. BOX 2322
DECATUR, IL 62524
37-1141574
077

ILLOWA CHAPTER
4322 WIDGEON DRIVE
MARION, IA 55016
36-4428918
169

AFFILIATED ORGANIZATIONS INC

JACKSONVILLE CHAPTER
2915 TUSCARORA TRAIL
MIDDLEBURG, FL 32060
59-2155120
058

KENTUCKIANA CHAPTER
3605 FLAGSTAFF DR.
JEFFERSONVILLE, IN 47130
61-0942117
037

KETTLE MORaine CHAPTER
1313 N. FRANKLIN PL 703
MILWAUKEE, WI 53202
39-1400443
057

LAS VEGAS CHAPTER
2940 HARBOR HEIGHTS DRIVE
LAS VEGAS, NV 89117
20-3339497
187

LOS ANGELES CHAPTER
P.O. BOX 712726
LOS ANGELES, CA 90071
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

AFFILIATED ORGANIZATIONS INC

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

MT. RAINIER CHAPTER
P.O. BOX 6551
OLYMPIA, WA 98507
91-1557795
129

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

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

NEW JERSEY CHAPTER
58 RONALD DRIVE
EAST HANOVER, NJ 07936
22-2203291
030

NEW MEXICO CHAPTER
7608 OAKLAND AVE. NE
ALBUQUERQUE, NM 87122
85-0333609
083

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

AFFILIATED ORGANIZATIONS INC

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

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

NORTHEAST OHIO CHAPTER
4635 SPINNAKER CT.
MENTOR, OH 44060
94-2579763
026

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

OMAHA CHAPTER
17529 Y ST.
OMAHA, NE 68135
47-0592567
023

ORANGE COUNTY CHAPTER
2206 CRESCENT OAK
IRVINE, CA 92618
33-0024331
079

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

AFFILIATED ORGANIZATIONS INC

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
6602 CHENNAULT BEACH DR.
MUKILTEO, WA 98275
91-1044622
035

RESEARCH TRIANGLE CHAPTER
7812 PANTHER BRANCH DR.
RALEIGH, NC 27612
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

AFFILIATED ORGANIZATIONS INC

SAN DIEGO CHAPTER
2702 MATEO PLACE
CARLSBAD, CA 92009
95-3095287
019

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

SC MIDLANDS CHAPTER
2107 HEATH POND RD.
ELGIN, SC 29045
57-0709139
054

SILICON VALLEY CHAPTER
P.O. BOX 2105
CUPERTINO, CA 95015
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
71 HOMEFIELD MANORS CT.
O'FALLON, MO 63366
51-0161367
011

AFFILIATED ORGANIZATIONS INC

TALLAHASSEE CHAPTER
2564 HEATHROW DR.
TALLAHASSEE, FL 32312
45-3664518
213

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

UTAH CHAPTER
625 W 5300 S, STE A-126
MURRAY, UT 84123
87-6162790
004

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

WEST FLORIDA CHAPTER
P.O. BOX 1101
TAMPA, FL 33601
59-1933237
041

WESTERN MICHIGAN CHAPTER
13643 THORNAPPLE LN.
PERRY, MI 48872
36-3007751
038

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

AFFILIATED ORGANIZATIONS INC

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

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

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

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

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

BATON ROUGE CHAPTER
7817 N. JEFFERSON PLACE CIR., APT D
BATON ROUGE, LA 70809
72-1056363
085

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

BOISE CHAPTER
2458 SUNSHINE DR.
BOISE, ID 83712
82-0353193
042

CENTRAL ARKANSAS CHAPTER
1598 SUGAR MAPLE LANE
HENSLEY, AR 72065
52-1315583
082

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

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

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

CENTRAL IOWA CHAPTER
8504 LONG MEADOW LANE
JOHNSTON, IA 50131
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
16-1107127
029

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

CENTRAL OKLAHOMA CHAPTER
VELAVAN, INC., 4304 NW 164TH TER.
EDMOND, OK 73013
73-1206933
049

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

CHARLOTTE CHAPTER
7546 SEDGEBROOK DRIVE EAST
STANLEY, NC 28164
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
131 GUILFORD ROAD
BLOOMFIELD HILLS, MI 48304
23-7410401
008

GREATER CINCINNATI CHAPTER
881 LAFAYETTE AVE, #5
CINCINNATI, OH 45243
23-7291478
003

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

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

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

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
1901 LUSITANA ST.
HONOLULU, HI 96813
99-0219334
071

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

HUNTSVILLE CHAPTER
P.O. BOX 4064
HUNTSVILLE, AL 35815
80-0809623
221

ILLINI CHAPTER
P.O. BOX 2322
DECATUR, IL 62524
37-1141574
077

ILLOWA CHAPTER
4322 WIDGEON DRIVE
MARION, IA 55016
36-4428918
169

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

JACKSONVILLE CHAPTER
2915 TUSCARORA TRAIL
MIDDLEBURG, FL 32068
59-2155120
058

KENTUCKIANA CHAPTER
3605 FLAGSTAFF DR.
JEFFERSONVILLE, IN 47130
61-0942117
037

KETTLE MORaine CHAPTER
1313 N. FRANKLIN PL 703
MILWAUKEE, WI 53202
39-1400443
057

LAS VEGAS CHAPTER
2940 HARBOR HEIGHTS DRIVE
LAS VEGAS, NV 89117
20-3339497
187

LOS ANGELES CHAPTER
P.O. BOX 712726
LOS ANGELES, CA 90071
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

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

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
23-7360726
005

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

NEW JERSEY CHAPTER
58 RONALD DRIVE
EAST HANOVER, NJ 07936
22-2203291
030

NEW MEXICO CHAPTER
7608 OAKLAND AVE. NE
ALBUQUERQUE, NM 87122
85-0333609
083

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

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

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

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

NORTHEAST OHIO CHAPTER
4635 SPINNAKER CT.
MENTOR, OH 44060
94-2579763
026

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

OMAHA CHAPTER
17529 Y ST.
OMAHA, NE 68135
47-0592567
023

ORANGE COUNTY CHAPTER
2206 CRESCENT OAK
IRVINE, CA 92618
33-0024331
079

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

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

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
6602 CHENNAULT BEACH DR.
MUKILTEO, WA 98275
91-1044622
035

RESEARCH TRIANGLE CHAPTER
7812 PANTHER BRANCH DR.
RALEIGH, NC 27612
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

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

SAN DIEGO CHAPTER
2702 MATEO PLACE
CARLSBAD, CA 92009
95-3095287
019

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

SC MIDLANDS CHAPTER
2107 HEATH POND RD.
ELGIN, SC 29045
57-0709139
054

SILICON VALLEY CHAPTER
P.O. BOX 2105
CUPERTINO, CA 95015
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
71 HOMEFIELD MANORS CT.
O'FALLON, MO 63366
51-0161367
011

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

TALLAHASSEE CHAPTER
2564 HEATHROW DR.
TALLAHASSEE, FL 32312
45-3664518
213

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

UTAH CHAPTER
625 W 5300 S, STE A-126
MURRAY, UT 84123
87-6162790
004

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

WEST FLORIDA CHAPTER
P.O. BOX 1101
TAMPA, FL 33601
59-1933237
041

WESTERN MICHIGAN CHAPTER
13643 THORNAPPLE LN.
PERRY, MI 48872
36-3007751
038

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

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

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

**Application for Extension of Time To File an
Exempt Organization Return**

► **File a separate application for each return.**
► **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

OMB No. 1545-1709

- 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

Enter filer's identifying number, see instructions

**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

94-2919522

Number, street, and room or suite no. If a P.O. box, see instructions

3701 ALGONQUIN ROAD

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)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	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 ► ROBERT MICEK

Telephone No. ► 847 253-1545FAX 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, 2014, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☒ **X** calendar year 2013 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 funds withdrawal (direct debit) 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. 1-2014)

- 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.	Enter filer's identifying number, see instructions	
	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION CHAPTERS	94-2919522
	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) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	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 **► ROBERT MICEK**
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**

- 4 I request an additional 3-month extension of time until **11/17, 2014**.
- 5 For calendar year **2013**, or other tax year beginning **20**, and ending **20**.
- 6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 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 Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$	0
b If this application is for Forms 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 \$	0
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$	0

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 **► Bridget J Roche** Title **► Manager** Date **► 8/7/2014**
Form 8868 (Rev. 1-2014)