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efile GRAPHIC print - DO NOT PROCESS As Filed Data -Form **990**

For Paperwork Reduction Act Notice, see the separate instructions.

Return of Organization Exempt From Income Tax

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

2016

DLN: 93493152003337 OMB No 1545-0047

		of the Treasu enue Service	Information about	ial security numbers on this form as it n ut Form 990 and its instructions is at <u>wi</u>				pen to Public Inspection
A F	or th	e 2016 c		nning 01-01-2016 $$, and ending 12-	31-2016			
		applicable	C Name of organization INFORMATION SYSTEMS AUDIT AN	D		D Employ	er identific	ation number
□ Na		change nange	CONTROL ASSOCIATION INC			23-706	7291	
☐ Ini	tıal re	-	Doing business as isaca					
Fin Detur		minated		nail is not delivered to street address) Room/	suite	E Telepho	ne number	
		d return	3701 Algonquin Road No 1010	ian is not derivered to street address) incomy.	suite	(847) 2	253-1545	
⊔ Ар	plicati	ion pending	City or town, state or province, cou	ntry, and ZIP or foreign postal code				
			Rolling Meadows, IL 60008			G Gross re	eceipts \$ 79,	788,144
			F Name and address of principal MATTHEW S LOEB	al officer	H(a) Is	this a group re	turn for	
			3701 Algonquin Road No 1010			ubordinates [?] re all subordina	tec	□Yes ☑No
	v-0×0	mpt status	Rolling Meadows, IL 60008			icluded?	tes	☐ Yes ☐No
			☐ 501(c)(3) ☑ 501(c)(6) 	(insert no) 4947(a)(1) or 527		"No," attach a	•	•
J W	ebsi	te:▶ ww	w isaca org		11(0) G	roup exemption	n number P	•
K Forr	n of o	organization	✓ Corporation ☐ Trust ☐ Asso	ociation Other	L Year of	formation 1969	M State of	legal domicile IL
Pa	rt I	Sum	mary		_			
			scribe the organization's mission o	or most significant activities ION IS TO HELP PROFESSIONALS REALI	7E THE (SE	E SCHEDIII E O'	\ DOSITI\/E	POTENTIAL OF
e C		TECHNOL		ION IS TO TILLE PROFESSIONALS REALI	2L 111L (3L	L SCHEDOLL O,) FOSITIVE	POTENTIAL OF
e E								
Activities & Governance								
65				scontinued its operations or disposed of				
≈ 5	l			ng body (Part VI, line 1a)			3	15
.	l		· -	f the governing body (Part VI, line 1b)			4	13
Ĭ	l		mber of individuals employed in ca			5	199	
AC	l			cessary)			6 7a	1,171 477,049
	l			m Form 990-T, line 34			7a 7b	477,043
	-	Net unite	lated business taxable income no	11 TOTH 990-1, IIIIe 34		Prior Year		Current Year
_	8	Contribut	tions and grants (Part VIII, line 1h	1)		20,647,		21,819,56
Ravenua	l		, ,	,])		24,295,		27,070,63
ĕΛċΙ	10	Investme	ent income (Part VIII, column (A),	lines 3, 4, and 7d)		3,618,	607	1,870,45
<u> </u>	11	Other rev	venue (Part VIII, column (A), lines	s 5, 6d, 8c, 9c, 10c, and 11e)		6,462,	616	6,869,49
	12	Total rev	enue—add lines 8 through 11 (mu	ust equal Part VIII, column (A), line 12)		55,024,	198	57,630,150
	13	Grants ar	nd sımılar amounts paıd (Part IX,	column (A), lines 1–3)....		5,	100	682,210
	14	Benefits	paid to or for members (Part IX, o	column (A), line 4)			0	(
\mathfrak{L}				enefits (Part IX, column (A), lines 5–10)		21,944,	356	23,757,95
Expenses	16a	a Professio	onal fundraising fees (Part IX, colu	ımn (A), lıne 11e)			0	-
Ω.			raising expenses (Part IX, column (D), I					
			penses (Part IX, column (A), lines	•		31,298,		35,276,99
	l	•	penses Add lines 13–17 (must equ			53,247,		59,717,160
<u> </u>	19	Revenue	less expenses Subtract line to it	rom line 12	Begin	1,776, ning of Current \		-2,087,010 End of Year
Net Assets or Fund Balances								
SS &	20	Total ass	ets (Part X, line 16)			92,830,	575	93,893,30
a g	21	Total liab	oilities (Part X, line 26)			24,019,	107	26,491,69
			ts or fund balances Subtract line	68,811,	468	67,401,61		
Pai			ature Block	and the return and disconnection				h - h +
				nined this return, including accompanying Declaration of preparer (other than of				
any k	nowl	edge						
		****	*			2017-05-31		
Sign		Signat	ure of officer			Date		
Here	:		RT A MICEK TREASURER & CFO					
		17	or print name and title	Droppror's signature	Date		DTIN	
Do:	J		Print/Type preparer's name FHOMAS LANNING	Preparer's signature THOMAS LANNING	Date 2017-05-31	Check 📙 ıf	PTI N P00851654	
Paid		or	Firm's name COHNREZNICK LLP			self-employed Firm's EIN ▶ 22	-1478099	
Pre Use		eı -	Firm's address ▶ 4 BECKER FARM ROAD			Phone no (973)		
	Ji	''y	ROSELAND, NJ 07068	3				
May t	he IF	RS discuss	this return with the preparer sho	wn above? (see instructions)				s 🗆 No

Cat No 11282Y

Form **990** (2016)

Form	990 (2016)				Page 2
1	Check if Sche	t of Program Service Acc edule O contains a response or organization's mission	complishments note to any line in this Part III .		🗹
2	-	undertake any significant pro or 990-EZ?	gram services during the year which v	vere not listed on	☐ Yes ☑ No
3	Did the organization services?	ese new services on Schedule cease conducting, or make sights	gnificant changes in how it conducts, a	any program	□Yes ☑No
4	Describe the organiz Section 501(c)(3) ar	zation's program service accon	nplishments for each of its three large required to report the amount of grai ervice reported		
4a	(Code SEE SCHEDULE O) (Expenses \$	including grants of \$) (Revenue \$)
4b	(Code SEE SCHEDULE O) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code SEE SCHEDULE O) (Expenses \$	including grants of \$) (Revenue \$)
	inspiring confidence the academic guidance (in bimonthly, and support by providing peer-reviewell The ISACA Journa circulation at year-end ExpressLine, published quarterly to COBIT use completed a review of the need for the latest an average open rate o interest to ISACA mem In 2016, nearly 500 titl students and curricula) Systems Auditing Stand	at enables innovation through technic addition to the items noted in the died in the off months by online article and in the off months by online article and items and items and items and items and providing chapter leaders, to provide them case studies, in all periodicals to improve digital funcybersecurity information. The public and providing chapter leaders, at discounted prices. New self less and 200 downloadable items we precognizing that they hold the futidards, Guidelines and Procedures, vecans and procedures, vecans and procedures, we self less and guidelines and Procedures, vecans and self-self-self-self-self-self-self-self-	including grants of \$ Including grants of \$	by providing information, standards and 3) The ISACA Journal is ISACA's clency and competitive advantage of a available in digital format on the webon page views on the ISACA web site eakly electronic newsletter dedicated carry out their responsibilities, and opportunities, and general tips and to opportunities, and general tips and to inthly e-newsletter, The Nexus Cybe 14,500 by year-end and reader engilection of peer-reviewed publications talog remains current with changing dedicates considerable attention to us groups rose to 84 in 2016 ISACA ance on how audits should be underliked.	, publications and official magazine Issued lits international readership to site and via mobile app as a in 2016 ISACA Journal I to ISACA news, COBIT Focus, issued techniques ISACA er News Converged, meets lagement was strong with son professional topics of trends and member needs niversities (professors, issues Information taken The standards,
4d	Other program serv (Expenses \$	ices (Describe in Schedule O) including (grants of \$	(Revenue \$)

4e

Total program service expenses ▶

or X as applicable

Section 501(c)(3) organizations.

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Page 3

No

Νo

No

No

No

Nο

Nο

No

Nο

Nο

Nο

Nο

No

Nο

No

No

No

Form **990** (2016)

Checklist of Required Schedules Yes Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🛸 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 🔒 . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

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

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

b Was the organization included in consolidated, independent audited financial statements for the tax year?

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 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

assessments, or similar amounts as defined in Revenue Procedure 98-19?

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11a

11b

11c

11d

11e

11f

12a

12b

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14a

14h

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16

17

18

19

29

Page 4

No

Part IV Checklist of Required Schedules (continued)

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

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, If "Yes,"

24a 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? If "Yes," answer lines 24b through 24d and

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

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 🔧

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic 21

Yes 22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

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31

32

33

34

35a

35h

36

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Yes

Yes

Yes

Form 990 (2016)

Yes

Nο

Nο

No

Nο

No

No

No

Nο

Nο

No

Nο

Nο

No

Nο

	990 (2016)			Page
Par				
	Check if Schedule O contains a response or note to any line in this Part V			Ш
	Enter the growth or growth due Box 2 of France 1000 February 0 of make analysis like		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 59 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 00	4		
		4		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
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	4	.,	
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	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
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		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	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		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	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			
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		
	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?	76		
8	Sponsoring organizations maintaining donor advised funds.	7h		
	Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			
_		8		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter Institution foca and control control control ded on Part VIII. June 12.			
	Initiation fees and capital contributions included on Part VIII, line 12	-		
	Section 501(c)(12) organizations. Enter	-		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
а	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 Enter the amount of reserves the organization is required to maintain by the states in	13a		
-	which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Par	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 $$. $$. $$.				✓			
Se	ction	A. Governing Body and Management			1				
1 =	Enter	the number of voting members of the governing body at the end of the tax year	Г		Yes	No			
14	Lincei	1a	15						
	body,	ere are material differences in voting rights among members of the governing, or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O							
Ь		the number of voting members included in line 1a, above, who are independent							
2		ny officer, director, trustee, or key employee have a family relationship or a business relation							
3		er, director, trustee, or key employee? he organization delegate control over management duties customarily performed by or unde	<u> </u>	3		No No			
_		icers, directors or trustees, or key employees to a management company or other person?	F	3		No			
4		he organization make any significant changes to its governing documents since the prior Foi	rm 990 was filed?	4		No			
5	Did th	he organization become aware during the year of a significant diversion of the organization'	s assets? .	5		No			
6	Did th	he organization have members or stockholders?	[6	Yes				
7a	Dıd th meml	he organization have members, stockholders, or other persons who had the power to elect of bers of the governing body?	or appoint one or more	7a	Yes				
b		iny governance decisions of the organization reserved to (or subject to approval by) members other than the governing body?	ers, stockholders, or	7b	Yes				
8		he organization contemporaneously document the meetings held or written actions undertal ollowing	ken during the year by						
а	The g	governing body?		8a	Yes				
b		committee with authority to act on behalf of the governing body?	F	8b	Yes				
9		ere any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot but a similarity of the cannot but and addresses in Schedule O		9		No			
Se	ction	B. Policies (This Section B requests information about policies not required by	the Internal Revenue	Code					
10-	Did H	he organization have local chapters, branches, or affiliates?	Γ	10a	Yes Yes	No			
		es," did the organization have written policies and procedures governing the activities of suc		104	162				
	and b	pranches to ensure their operations are consistent with the organization's exempt purposes	,	10b	Yes				
11a		the organization provided a complete copy of this Form 990 to all members of its governing?		11a	Yes				
Ь	Descr	ribe in Schedule O the process, if any, used by the organization to review this Form 990							
		he organization have a written conflict of interest policy? If "No," go to line 13		12a	Yes				
b		officers, directors, or trustees, and key employees required to disclose annually interests the cts?		12b	Yes				
С		he organization regularly and consistently monitor and enforce compliance with the policy? . dule O how this was done		12c	Yes				
13	Did th	he organization have a written whistleblower policy?		13	Yes				
14		he organization have a written document retention and destruction policy?		14	Yes				
15	perso	he process for determining compensation of the following persons include a review and appions, comparability data, and contemporaneous substantiation of the deliberation and decision	on?						
a		organization's CEO, Executive Director, or top management official	=	15a	Yes				
Ь		r officers or key employees of the organization		15b	Yes				
165		es" to line 15a or 15b, describe the process in Schedule O (see instructions) he organization invest in, contribute assets to, or participate in a joint venture or similar arr	rangement with a						
	taxab	ole entity during the year?		16a		No			
D	ın joir	es," did the organization follow a written policy or procedure requiring the organization to event or executive arrangements under applicable federal tax law, and take steps to safeguard the swith respect to such arrangements?	organization's exempt	16b					
Se	ction	C. Disclosure		-95					
17		he States with which a copy of this Form 990 is required to be filed▶							
18		CA , IL on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 9	90-T (501(c)(3)s only)						
	_	able for public inspection. Indicate how you made these available. Check all that apply							
10		Own website 🏻 L. Another's website 🗹 Upon request 🗘 Other (explain in Schedule (ribe in Schedule O whether (and if so, how) the organization made its governing documents	•						
19		ribe in Schedule O whether (and it so, now) the organization made its governing documents y, and financial statements available to the public during the tax year	, commet or interest						
20		the name, address, and telephone number of the person who possesses the organization's ert a micek 3701 Algonquin Road No 1010 Rolling Meadows, IL 60008 (847) 253-1545	books and records						

(A)

Name and Title

(F)

Estimated

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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"

(B)

Average

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

(C)

Position (do not check more

(D)

Reportable

(E)

Reportable

hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations from the for related 2/1099-MISC) (W-2/1099organization and Highest compensatemples ee Former Individual trustee or director Office organizations Ē MISC) related Institutional Trust⊷e below dotted organizations employee line) See Additional Data Table

Page **8**

Part VII Section A. Officers, Direct	tors, Trustee	s, Key	Emp	loye	es,	and	Hig	hest Co	mpen	sate	d Employees	(con	tınued)	
(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					son a	(D) Reportable compensation from the organization (W- 2/1099-MISC)				(F) Estimated amount of other compensation from the organization and		
	organizations below dotted line)		Institutional Trustee	Officei	key employee	Highest compensated employee	Former	2/10:	יבנויו-על	-)	2/1099-MIS	-)	relat organiz	:ed
See Additional Data Table							<u> </u>							
	+		\vdash	H		 	\vdash							
			\vdash				lacksquare							
		-	\vdash			_	\vdash					+		
			\perp				<u> </u>							
1b Sub-Total		<u></u>	<u> </u>	<u></u>	<u></u>	<u> </u> ▶	<u></u>		_			\perp		
c Total from continuation sheets to P d Total (add lines 1b and 1c)	•				•	▶			,555,157		<u> </u>	0		692,185
Total number of individuals (including of reportable compensation from the compensa	g but not limited	to thos			bov€		o rec			<u> </u>	00,000	<u>"I</u>		
3 Did the organization list any former line 1a? If "Yes," complete Schedule			tee, k			oyee,	or hı	ighest co	ompensa	ated	employee on	3	Yes	No
For any individual listed on line 1a, is organization and related organization individual	ns greater than \$	\$150,00	00? <i>If</i>								the	4	Yes	
5 Did any person listed on line 1a rece services rendered to the organization									ation or	ındıv •	vidual for	5		No
Section B. Independent Contract					_						1122.200.6			
1 Complete this table for your five high from the organization Report compe												mper	nsation	
Name	(A) and business addre	255								Descr	(B) uption of services		(C Compe	
Blast Radius P O Box 751474	and business										-Commerce Desig	ın		,382,353
Charlotte, NC 28275 Greenberg Traurig LLP 77 East wacker Drive					_				Legal S	ervice	25			682,498
7/ East Wacker Drive Chicago, IL 60601 Onpoint consulting									It Servi	ces				377,000
7009 East acoma Drive Suite 2015 Scottsdale, AZ 85254														
Deloitte & Touche LLP									Training	g Sup	port Services			320,897
P O Box 844708 Dallas, TX 75284 Exam Matrix									exam s	arvice	ıc.			225,598
7991 Shaffer Pkwy Ste 100 Littleton, CO 80124									exam s					223,330
2. Total number of independent contractor	re (including but	t not lin	uted (to th		listed	abo	ve) who	receive	d mo	ro than \$100.0	വ വ		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization ▶ 11

Part	VI	• Statement of	Revenue								rage 3
				a respo	onse or note to any	/ line in t	hıs Part VIII				🗆
							A) revenue		ed or mpt ction	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
(4	1:	a Federated campaig	ns	1 a				Teve	inde		312-314
ints unts		b Membership dues		1 b	21,819,566						
6ra 1101		c Fundraising events		1c							
₹		d Related organizatio	ns	1d							
		e Government grants (co	ontributions)	1e							
ns, Sim		f All other contributions			_						
atio er		and similar amounts n above	ot included	1f							
년 된 원		g Noncash contribution	ons included								
Contributions, Giffs, Grants and Other Similar Amounts		ın lınes 1a-1f \$									
	┤ ┖	Total. Add lines 1a-1	.f			,	1,819,566			1	
Service Revenue	,,	Certification Program			Busines	611430	18 18	35,842	18,185,8	:42	
₹		conferences & Seminars				611430		52,332	7,500,9	-	251,346
<u>د</u>	c	license fees				541519	64	14,075	644,0	75	
εĶ	d	Publication & Subscription	on			541800	48	38,385	11,3	36 477,0	49
S	e	, ———									
Program	f	All other program se	rvice revenue								
Ĕ	g	Total.Add lines 2a-2f	f		▶	070,634					
		Investment income (ii			nterest, and other		2,549,720				2,549,720
		Income from investme			ond proceeds		· ·				
				-		•	140,776	5			140,776
			(ı) Rea		(II) Personal						
	6a	Gross rents									
	Ŀ	Less rental expenses									
		Daniel				_					
	ľ	Rental income or (loss)									
	٠	Net rental income o	r (loss)								
	_	Constant	(ı) Securit	ies	(II) Other						
	7a	Gross amount from sales of	20,2	63,919	662,61	11					
		assets other than inventory									
	ŀ	Less cost or other basis and	20.0	85,703	720,09	\ <u></u>					
		sales expenses	·	21,784							
	ı	Gain or (loss) Net gain or (loss)				⁷⁹	-679,263				-679,263
	l	Gross income from f			<u> </u>		,				,2
ne m		(not including \$		of							
æ		contributions reporte See Part IV, line 18		а							
Re	Ŀ	Less direct expense	s	b							
Other Revenue		Net income or (loss)			ents 🕨	_					
Ö	9 a	Gross income from g See Part IV, line 19		es							
				а							
	l	Less direct expense Net income or (loss)		b	105						
		Gross sales of invent		activit	les •						
		returns and allowand		1							
	١,	Less cost of goods s	rold	a b							
		Net income or (loss)		- 1	,		5,421,162	2	5,421,162		
		Miscellaneous		mvem	Business Code						
	11	- a sponsorship			90000)4	1,143,625	5			1,143,625
	l t	other			90000	04	163,930				163,930
											
	(
		All other revenue									<u> </u>
	"	a All other revenue . • Total. Add lines 11a			•						
		2 Total revenue. See					1,307,555	5			
				- '	• • • •		57,630,150)	31,763,401	477,049	3,570,134 Form 990 (2016)

Form 990 (2016)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	nızatıons must com	plete 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) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	277,110	·		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	405,100			
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,976,105			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	139,265			
7 Other salaries and wages	15,454,664			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	531,332			
9 Other employee benefits	2,388,297			
10 Payroll taxes	1,268,291			
11 Fees for services (non-employees)				
a Management				
b Legal	782,480			
c Accounting	107,732			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	7,975,254			
12 Advertising and promotion	6,696,254			
13 Office expenses	5,329,234			
14 Information technology	2,240,091			
15 Royalties	982,957			
16 Occupancy	741,177			
17 Travel	2,957,250			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	5,174,464			
20 Interest				
21 Payments to affiliates				

1,913,388

122,813

130,725

50,000

45,770

18,916

8,491 59,717,160

Form **990** (2016)

22 Depreciation, depletion, and amortization

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

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

23 Insurance . . .

a Other Expenses

e All other expenses

b Franchise fee

c Bad debt

d awards

expenses on Schedule O)

	Check if Schedule O contains a response or note to any line in this Part IX $$.			🗆
		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing		1	
2	Savings and temporary cash investments	6,346,245	2	3,402,554
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	1,509,318	4	1,624,562
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			

	6
S	
et	7
Assets	8
٨	9
	10a
	ь
	11
	12

	4	Accounts recei
Assets	5 6 7	Loans and oth trustees, key of II of Schedule Loans and oth section 4958(f contributing er voluntary emp Part II of Sche Notes and loan
SS	8	Inventories foi
A	9	Prepaid expen
	10a	Land, buildings basis Complet
	b	Less accumul
	11	Investments-

	2	Savings and ten
	3	Pledges and gra
	4	Accounts receive
	5	Loans and other trustees, key en II of Schedule L
	6	Loans and other section 4958(f)(contributing employed
Assets	7	Part II of Sched Notes and loans
SS	8	Inventories for s
4	9	Prepaid expense
	10a	Land, buildings, basis Complete
	ь	Less accumulat
	11	Investments—p
	12	Investments—of
	13	Investments—pr
	14	Intangıble asset
	15	Other assets Se
	16	Total assets.Ad
	17	Accounts payabl
	18	Grants payable
	19	Deferred revenu
	20	Tax-exempt bon
S	21	Escrow or custoo
ilitie	22	Loans and other key employees,
iabil		persons Comple
_	23	Secured mortga
	24	Unsecured notes
	25	Other liabilities (and other liabilit Complete Part X
	26	Total liabilities
e S		Organizations
anc	27	complete lines Unrestricted net
33	28	Temporarily rest
Б Е	29	Permanently res
Vet Assets or Fund Ba		Organizations
5		check here ▶
\$	30	Capital stock or
5	31	Paid-in or capita
Á	32	Retained earning
Zet Vet	33	Total net assets
_	34	Total liabilities a

	Savings and temporary cash investments	Savings and temporary cash investments						
	ledges and grants receivable, net							
	Accounts receivable, net							
	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L							
	Loans and other receivables from other disqualific section 4958(f)(1)), persons described in section contributing employers and sponsoring organizat voluntary employees' beneficiary organizations (s Part II of Schedule L	4958 ons c	(c)(3)(B), and of section 501(c)(9)					
	Notes and loans receivable, net							
	Inventories for sale or use		•					
	Prepaid expenses and deferred charges	٠.						
	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	12,941,225					
	Less accumulated depreciation	10 b	7,861,026					
	Investments—publicly traded securities .							
	Investments—other securities See Part IV, line 1	11 .						
	Investments—program-related See Part IV, line	11 .	•					
	Intangible assets							
	Other assets See Part IV, line 11							
	Total assets.Add lines 1 through 15 (must equal line 34)							
	Accounts payable and accrued expenses							
	Grants payable							
	Deferred revenue							
	Tax-exempt bond liabilities							
	Escrow or custodial account liability Complete Pa	Escrow or custodial account liability Complete Part IV of Schedule D						
	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							
	Secured mortgages and notes payable to unrelate	ed thi	rd parties					
	Unsecured notes and loans payable to unrelated	thırd _I	parties					
	Other liabilities (including federal income tax, pay and other liabilities not included on lines 17-24) Complete Part X of Schedule D	yables	to related third parties,					
	Total liabilities. Add lines 17 through 25							
	Organizations that follow SFAS 117 (ASC 95 complete lines 27 through 29, and lines 33 a Unrestricted net assets							
	Temporarily restricted net assets							
	Permanently restricted net assets							
	Organizations that do not follow SFAS 117 (ASC 9	958),					
	check here ▶ ☐ and complete lines 30 thr Capital stock or trust principal, or current funds		• .					
	Paid-in or capital surplus, or land, building or equ	ııpmeı	nt fund					
	Retained earnings, endowment, accumulated inco	ome, o	or other funds					
	Total net assets or fund balances							
	Total liabilities and net assets/fund balances .							
-								

6

7

8

9

10c

11

432,416

3,094,873

4,714,662

52,944

92,830,575

9,037,480

14,034,992

946,635

24,019,107

68,811,468

68,811,468

92,830,575

30 31 32

33

34

76,680,117

Page **11**

474,094

2,519,208

5,080,199

72,061,780

67,401,616

93,893,306

Form **990** (2016)

Form	990 (2016)				Page 12
Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			<u></u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		57	,630,150
2	Total expenses (must equal Part IX, column (A), line 25)	2		59	,717,160
3	Revenue less expenses Subtract line 2 from line 1	3		-2	,087,010
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		68	,811,468
5	Net unrealized gains (losses) on investments	5			677,158
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
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		67	,401,616
Par	Financial Statements and Reporting Check If Schedule O contains a response or note to any line in this Part XII				V
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basis,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	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?		2c	Yes	

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

За

3b

Nο

Form **990** (2016)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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

Audit Act and OMB Circular A-133?

Software ID:

Software Version:

EIN: 23-7067291

Name: INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION INC

0

0

16,500

898,708

0

0

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0

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0

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311,228

Director

Director

Director

RV Raghu

Director

Leonard Ong

Matthew S Loeb

Director & Chief Executive Officer

Jo Stewart-Rattray

Form 990 (2016)					-			00001,10 1	-	
, ,	f Officare D	irocto	us T	·	+	. V	o		host	
Form 990, Part VII - Compensation of	bndent Cont	recto	irs, i			:S, K	ey	l I		1 1
Compensated Employees, and Indep	` '			(C)				(D)	(E)	(F)
Name and Title	Average hours per week (list any hours	pers and	an on on is a dir	e bo both	x, u n an	eck m Inless Office Ustee	er	Reportable compensation from the organization	Reportable compensation from related organizations	Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Andre Pitkowski Director	2 00	Х						0	0	0
Christos K Dimitriadis Chair	13 00 2 00	х		x				0	0	0
Edward G Schwartz Director	2 00	х						0	0	0
Garry Barnes 116-616 Outgoing Director	2 00	x	_					0	0	0
Gregory T Grocholski Past Chair	2 00	x						0	0	0
Jeff Spivey 616-1216	2 00	V								

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Compensated Employees, and Independent Contractors (D) (E) Name and Title Average Position (do not check more Reportable Reportable hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations (W-2/1099-(W-2/1099organization and Highest compensat Former MISC) MISC)

(F)

Estimated

from the

related

organizations

53,601

39,632

28,694

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

1 00 2 00

1 00 2 00

1 00 45 00

5 00 48 00

2 00 47 00

3 00

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4,500

376,151

341,824

305,384

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee
Robert A Clyde	2 00		
		X	

Director

Past Chair

Chair-Elect

Director

Tony Haves

Past Chair

Director

Zubin Chaqpar

Robert A Micek

Francisco Schettini

Ken Kujundjic

Chief Innovation Officer

Treasurer & Chief Financial Officer

Sr VP, Business Development & Sales

Robert E Stroud

Outgoing Director

Theresa Grafenstine

Rosemary Amato 116-616

Tichaona Zororo 616-1216

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Compensated Employees, and Independent Contractors (D) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related any hours and a director/trustee) organization organizations for related (W-2/1099-(W- 2/1099-organization and

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	organizations below dotted line)	Indradual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
Ronald Hale	50 00				x			706,340	0	48,38
outgoing Chief Knowledge Officer					^			700,540	0	40,50
Tara Wisniewski	50 00				.,					51.0

(F)

Estimated

compensation

from the

13,200

13,738

Konaid Hale			х		706,340	ام	
outgoing Chief Knowledge Officer			^		700,540	ı	
Tara Wisniewski	50 00						
Managıng Director, Advocacy & Public Affairs	•••••		Х		307,403	0	
Tim Mason	48 00						
			~		260 220	. Ω!	

							1
Tara Wisniewski Managing Director, Advocacy & Public Affairs	50 00		X		307,403	0	51,8
Tim Mason Chief Marketing Officer	48 00 2 00		Х		368,320	0	43,4
Ed Moyle	50 00			Х	215,726	0	23,3

50 00				v			307 403	0	51,840
				^			307,403	0	31,840
48 00				_			260 220	0	42.407
				*			368,320	0	43,497
					.,		245 726		22.225
					X		215,/26	0	23,335
	48 00	48 00 2 00 50 00	48 00 2 00 50 00	48 00 2 00 50 00	48 00 X 2 00 50 00	48 00 X X 2 00 50 00 0	48 00 X X 2 00 50 00	X 307,403 48 00 X 368,320 50 00	X 307,403 0 48 00 X 368,320 0 2 00 50 00

Managing Director, Advocacy & Public Affairs					,		· ·
Tim Mason	48 00		>		368,320	0	43,497
Chief Marketing Officer	2 00		^		308,320	0	45,497
Ed Moyle	50 00			×	215.726	0	23,335
Director, Thought Leadership & Research				^	213,720	0	25,555
Elizabeth Santilli	50 00						

Director, Thought Leadership & Research				Х	215,726	0	23,335
Elizabeth Santilli	50 00			×	211,569	0	22,713
VP, Human Resources							

Elizabeth Santilli	50 00			x	211.569	0	22,713
VP, Human Resources				^,	211,303	J	
Julia Fullerton	48 00						
				X	208.299	0	l 42.323

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222,179

232,989

139,265

2 00 49 00

1 00 50 00

50.00

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Sr Director of Legal & Compliance

Director of Info Security Practices

outgoing Chief Relations Officer

Narayanan Krishnan

Shannon Donahue

Terry Trsar

Director of Web Services

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Political Campaign and Lobbying Activities

OMB No 1545-0047

DLN: 93493152003337

Open to Public

Department of the Treasury Internal Revenue Service

SCHEDULE C (Form 990 or 990-

EZ)

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

Inspection

• S	ection 501(c)(3) organizations Cor Section 501(c) (other than section 5 Section 527 organizations Complet		Part I-C I-A and C below	Do not con	nplete Part I-	В		n .
• S • S f the	Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form 99 thave filed Form 5768 (election under si thave NOT filed Form 5768 (election un n Form 990, Part IV, Line 5 (Proxy Tax s), then	ection 501(h)) Co der section 501(h	mplete Par)) Complet	t II-A Do not e Part II-B D	com o not	plete Part II-l t complete Pa	art II-A
	Section 501(c)(4), (5), or (6) organiz	zations Complete Part III						
INF	me of the organization ORMATION SYSTEMS AUDIT AND NTROL ASSOCIATION INC				Employer id 23-7067291	lentif	fication nun	ıber
Par	t I-A Complete if the orga	nization is exempt under sectio	n 501(c) or is	a section	1 527 orga	niza	tion.	
1 2	Provide a description of the organ Political expenditures	ization's direct and indirect political cam	npaign activities in	Part IV	•	\$ _		
3	Volunteer hours					_		
Par	t I-B Complete if the orga	nization is exempt under sectio	n 501(c)(3).					
1	Enter the amount of any excise ta	ex incurred by the organization under se	ction 4955		•	\$ _		
2	Enter the amount of any excise ta	ax incurred by organization managers ur	nder section 4955		>	\$ _		
3	If the organization incurred a sect	tion 4955 tax, did it file Form 4720 for t	his year?				☐ Yes	□ No
4a	Was a correction made?						☐ Yes	□ No
b	If "Yes," describe in Part IV							
Par	t I-C Complete if the orga	nization is exempt under sectio	n 501(c), exce	ept section	n 501(c)(3).		
1	·	ed by the filing organization for section	·			\$ _		
2	Enter the amount of the filing org function activities	anızatıon's funds contributed to other or	ganizations for se	ection 527 e	exempt •	\$ _		
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and on	Form 1120-POL,	lıne 17b	>	\$		
4	Did the filing organization file Fori	m 1120-POL for this year?					☐ Yes	□ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere se (PAC) If additional space is needed,	unt paid from the ed to a separate p	filing orgai olitical orga	nization's fun inization, suc	ds A	lso enter the	
	(a) Name	(b) Address	(c) EIN	filing o	unt paid fron rganization's f none, enter -0-		(e) Amount contributions and promp directly deliv separate p organization enter	s received only and vered to a political of the following
2								
3								
1								
5								
5								

	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxa	ble amount is:						
	Not over \$500,000	20% of the amount on line	1e	<u> </u>					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the e	excess over \$500,000	1					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the e	excess over \$1,000,000	1					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the ex	cess over \$1,500,000	1					
	Over \$17,000,000	\$1,000,000		1					
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? 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 t	he separate instruc	tions for lines 2	a through 2	.f.)				
	Lobbying Expe	enditures During 4-	Year Averaging	Period					
	Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total			
2a	Lobbying nontaxable amount								
Ь	Lobbying ceiling amount (150% of line 2a, column(e))								
	Total lobbying expenditures								

Schedule C (Form 990 or 990-EZ) 2016

Grassroots nontaxable amount

Grassroots lobbying expenditures

Grassroots ceiling amount (150% of line 2d, column (e)) activity

Volunteers?

Part IV

Return Reference

1

(b)

Amount

(a)

Yes

No

Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? 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)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Part III-A (6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 Nο 1 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Yes Did the organization agree to carry over lobbying and political expenditures from the prior year? Nο Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B 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." Dues, assessments and similar amounts from members 1 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). 2a Current year 2b Carryover from last year C Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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

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, lines 1 and 2 (see

Explanation

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

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Supplemental Information

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

5

SCHEDULE D

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990.

DLN: 93493152003337 OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number

Open to Public Inspection

	ORMATION SYSTEMS AUDIT AND NTROL ASSOCIATION INC			23-7067291		
	rt I Organizations Maintaining Donor	Advised Funds or Otl	her Similar Fund			
	Complete if the organization answere					
		(a) Donor advised f	unds	(b)Funds and	d other accounts	
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor funds are the organization's property, subject to t	advisors in writing that the the organization's exclusive	assets held in dono e legal control?	r advised	☐ Yes	□ No
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?				☐ Yes	□ No
Pa	rt III Conservation Easements. Complet	e if the organization an	swered "Yes" on F	orm 990, Part IV	, line 7.	
1	Purpose(s) of conservation easements held by the	e organization (check all th	at apply)			
	\square Preservation of land for public use (e g , rec	reation or education)	Preservation o	f an historically impo	ortant land area	
	Protection of natural habitat		Preservation o	f a certified historic	structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization heasement on the last day of the tax year	neld a qualified conservation	on contribution in the		tion t the End of the	Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easemen	ts		2b		
c	Number of conservation easements on a certified	historic structure included	ın (a)	2c		
d	Number of conservation easements included in (c) structure listed in the National Register) acquired after 8/17/06, a	nd not on a historic	2d		
3	Number of conservation easements modified, trar tax year ▶	nsferred, released, extingui	ished, or terminated	by the organization	during the	
4	Number of states where property subject to conse	ervation easement is locate	ed ▶	_		
5	Does the organization have a written policy regar and enforcement of the conservation easements i		ig, inspection, handli	ing of violations,	☐ Yes ☐	No
6	Staff and volunteer hours devoted to monitoring, •	inspecting, handling of vio	lations, and enforcin	g conservation ease	ments during the	year
7	Amount of expenses incurred in monitoring, insper ▶ \$	ecting, handling of violation	s, and enforcing cor	nservation easement	s during the year	-
8	Does each conservation easement reported on lin	e 2(d) above satisfy the re	quirements of section	on 170(h)(4)(B)(ı)		
	and section 170(h)(4)(B)(II)?				☐ Yes ☐	No
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation eas	of the footnote to the orga				
Pai	*TIII Organizations Maintaining Collect Complete if the organization answere			Other Similar As	sets.	
1a	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he provide, in Part XIII, the text of the footnote to it	eld for public exhibition, ed	ucation, or research	in furtherance of pu		of
b	If the organization elected, as permitted under SF historical treasures, or other similar assets held for following amounts relating to these items	FAS 116 (ASC 958), to repo	ort in its revenue sta	tement and balance		
((i) Revenue included on Form 990, Part VIII, line 1			▶ \$		
C	ii)Assets included in Form 990, Part X			<u> </u>		
2	If the organization received or held works of art, following amounts required to be reported under					
а	Revenue included on Form 990, Part VIII, line 1			▶ \$		
b	Assets included in Form 990, Part X			▶ \$		<u></u>
For	Paperwork Reduction Act Notice, see the Instr	uctions for Form 990.	Cat	No 52283D Sch e	edule D (Form 9	90) 2016

d Equipment .

e Other .

Page **2**

Par	3111	Organizations M	aintaining Coll	lections of Ar	rt, Histori	cal T	reasu	res, or Othe	r Similar A	ssets (cont	inued)
3		the organization's acq (check all that apply)	uisition, accession	n, and other reco	ords, check	any of	the fol	lowing that are	a significant i	use of its col	llection
а		Public exhibition			d		Loan	or exchange pr	ograms		
b		Scholarly research			е		Other				
С		Preservation for future	e generations								
4	Provi Part)	de a description of the XIII	organızatıon's coll	ections and expl	lain how the	ey furth	ner the	organization's	exempt purpo	ose in	
5		ig the year, did the org is to be sold to raise fui							ımılar	☐ Yes	□ No
Pai	rt IV	Escrow and Cust	odial Arrange	ments.							
		Complete if the or X, line 21.								unt on Forr	n 990, Part
1a		e organization an agent ded on Form 990, Part		an or other inter	mediary for	contri	butions	s or other asset	s not	☐ Yes	□ No
b	If "Ye	es," explain the arrange	ement in Part XIII	and complete th	ne followina	table			Δ	mount	
c		nning balance		and complete th				1c			
d	-	ions during the year						1d			
e		butions during the year	r					1e			
f		- ·						1f			
		ng balance		000 B+ V	l 24 - 6				L - L - L + - 2		
2a	Dia ti	he organization include	an amount on Fo	rm 990, Part X,	line 21, for	escrow	or cu	stodial account	liability?	∐ Yes	⊔_No
b		es," explain the arrange			<u>.</u>			•			
Pa	rt V	Endowment Fun	ds. Complete If								
4 _	D = =:==	una af wasu balansa		(a)Current year 38,801,:		rior yea		(c) Two years back 32,340,28		ars back (e) ,186,325	Four years back
	-	ing of year balance .				34,922		• •			28,678,191
		outions		5,020,2	294	3,878	5,036	2,582,19	97 2	,153,958	1,508,134
		estment earnings, gair									
		or scholarships									
е		expenditures for faciliti ograms	es								
f	Admını	istrative expenses .									
g	End of	year balance		43,821,4	432	38,801	L,138	34,922,4	32	,340,283	30,186,325
2	Provi	de the estimated perce	ntage of the curre	ent year end bala	ance (line 1	g, colu	mn (a)) held as			
а	Board	d designated or quasi-e	ndowment 🕨 🗀 1	100 000 %							
b	Perm	anent endowment 🕨									
С	Temp	orarily restricted endo	wment 🕨								
•	The p	percentages on lines 2a	, 2b, and 2c shoul	ld equal 100%							
3a		here endowment funds nization by	not in the possess	sion of the organ	nization tha	t are h	eld and	d administered	for the		Yes No
	(i) uı	nrelated organizations								3a(i)	No
	(ii) r	elated organizations .								3a(ii)	No No
b	If "Y∈	es" on 3a(11), are the re	lated organization	s listed as requii	red on Sche	dule R	? .			3b	
4	Desci	ribe in Part XIII the inte	ended uses of the	organization's e	ndowment 1	funds					
Pa	rt VI	Land, Buildings, Complete if the or			Form 990,	Part	IV, lın	e 11a. See Fo		rt X, line 1	 0.
	Descri	ption of property	(a) Cost or oth (investme	er basis (b)	Cost or other			(c)Accumulated			look value
1a	Land										
	Buildin										
		old improvements				88	36,599		582,783		303,816

2,861,478

9,193,148

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)

732,850

4,043,533

5,080,199

2,128,628

5,149,615

Part VII	Investments—Other Securities. Complete if the See Form 990, Part X, line 12. (a) Description of security or category		ganization ans	wered 'Yes' on	Form 990, Pa	
	(including name of security)	_	b)book value	Cos		ar market value
(1)Financial (2)Closely-h	derivatives					
(3)Other (A) ISACA E	nterprises, Inc		8,194,988		F	
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	n (b) must equal Form 990, Part X, col (B) line 12)		8,194,988			
Part VIII	Investments—Program Related. Complete if See Form 990, Part X, line 13.	the o	rganization an	swered 'Yes' o	n Form 990,	Part IV, line 11c.
	(a) Description of investment		(b) Book value	Cos	(c) Method of	valuation ar market value
(1)					, , , , , , , , , , , , , , , , , , , ,	
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 13)	•				
Part IX	Other Assets. Complete if the organization answered (a) Description		on Form 990, Pa	art IV, line 11d	See Form 990,	Part X, line 15 (b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 15)				T)/ line 110 c	• 116
	Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.	iiiswe			TV, illie TTe C	or 111.
1. (1) Federal :	(a) Description of liability ncome taxes		(B) E	Book value		
					<u> </u> -	
DEFERRED R	RENT			89,270	_	
INTERCOMP	ANY PAYABLE			669,511		
OPEN ORDE	RS			127,448		
STATE CHEC	K LIABILITY			78,149		
NOTES - CAI	PITAL LEASE			27,475		
(6)				<u>.</u>		
(7)]	
(8)					1	
(9)					1	
	n (b) must equal Form 990, Part X, col (B) line 25)		•	991,853	-	
	or uncertain tax positions In Part XIII, provide the text o 's liability for uncertain tax positions under FIN 48 (ASC 7					_

Net unrealized gains (losses) on investments . . . а Donated services and use of facilities . 2b b 2c c Recoveries of prior year grants . . .

Other (Describe in Part XIII) . . 2d 7,271,703 d Add lines 2a through 2d е 3

2e Subtract line 2e from line 1 . 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1

Investment expenses not included on Form 990, Part VIII, line 7b. 4a

Other (Describe in Part XIII)

Add lines 4a and 4b . . .

b

Total expenses and losses per audited financial statements .

Donated services and use of facilities .

Prior year adjustments . . .

Other (Describe in Part XIII) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Other (Describe in Part XIII)

Supplemental Information

Schedule D (Form 990) 2016

Part XI

5

1

2

а

b

d

е 3

а

b

c

Part XIII

5

4

Part XII

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

4b

2a

2b 2c

2d

4b

Explanation

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

-609.680

9,375,239

4c

2e

3

4c

5

Page 4

66,188,691

7,948,861

58,239,830

-609,680

57,630,150

69,092,399

9,375,239

59.717.160

59,717,160

Schedule D (Form 990) 2015

Page 5		Schedule D (Form 990) 2015						
	ormation (continued)	Part XIII Supplemental Information (continued)						
	Explanation	Return Reference						

Schedule D (Form 990) 2016

Additional Data

Software ID:

Software Version: EIN: 23-7067291

Name: INFORMATION SYSTEMS AUDIT AND

CONTROL ASSOCIATION INC

Supplemental Information

Return Reference Explanation Part V, Line 4 The Association's Board of Directors and the Institute's Board of Trustees designate a portion of the Organization's unrestricted net assets for contingency purposes in order to protect the Organization against unforeseen global events and economic downturn

Supplemental Information							
Return Reference	Explanation						
Part X, Line 2	THE FINANCIAL ACCOUNTING STANDARDS BOARD ISSUED GUIDANCE THAT REQUIRES TAX EFFECTS FROM UN CERTAIN TAX POSITIONS TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS ONLY IF THE POSITION IS MORE LIKELY THAN NOT TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AU THORITY MANAGEMENT HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN POSITIONS THAT REQ UIRE RECOGNITION IN THE FINANCIAL STATEMENTS ADDITIONALLY, NO PROVISION FOR INCOME TAXES IS REFLECTED IN THESE FINANCIAL STATEMENTS, AND THERE IS NO INTEREST OR PENALTIES RECOGNIZ ED IN THE STATEMENT OF ACTIVITIES OR STATEMENT OF FINANCIAL POSITION THE ASSOCIATION'S FE DERAL AND STATE INCOME TAX RETURNS PRIOR TO 2013 ARE CLOSED, AND MANAGEMENT CONTINUALLY EV ALUATES EXPIRING STATUTES OF LIMITATIONS, AUDITS, PROPOSED SETTLEMENTS, CHANGES IN TAX LAW						

AND NEW AUTHORITATIVE RULINGS

Supplemental Information

upplemental Information	
Return Reference	Explanation
art XI, Line 2d - Other djustments	related organization revenue 7,404,703 elimination entries -133,000

Su

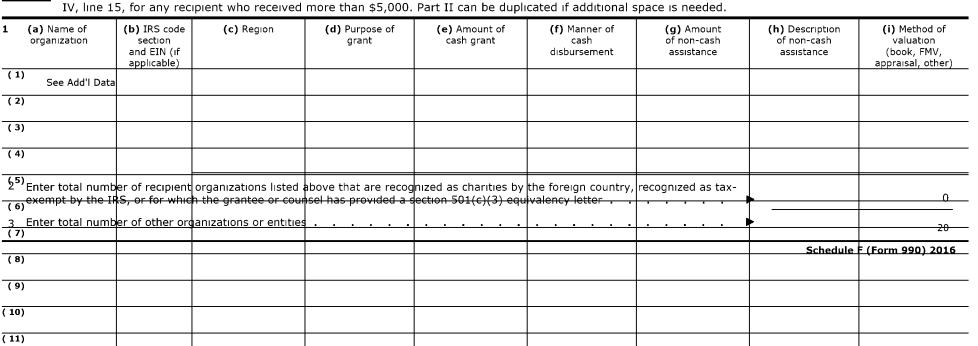
Supplemental Information						
Return Reference	Explanation					
Part XI, Line 4b - Other Adjustments	reclass of loss on disposal -57,479 reclass of cost of good sold -552,201					

Supplemental Information Return Reference Explanation related organization expenses 8,898,559 elimination entries -133,000 reclass of loss on Part XII, Line 2d - Other Adjustments disposal 57,479 reclass of cost of good sold 552,201

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -	-	DLN	: 93493152003337
SCHEDULE F (Form 990)	Statement of	Activities (Outside the Uni	ted States	OMB No 1545-0047
(1 51 555)	► Comple	<u>-</u>	n answered "Yes" to Form 9	990,	2016
			14b, 15, or 16. See separate instructions.		Open to Public
Department of the Treasury Internal Revenue Service			and its instructions is at www.	w.irs.gov/form990.	Inspection
Name of the organization INFORMATION SYSTEMS AUDIT	- AND			Employer ider	ntification number
CONTROL ASSOCIATION INC	AND			23-7067291	
Part I General Inform Form 990, Part		s Outside the U	Jnited States. Comple	te if the organization a	answered "Yes" to
1 For grantmakers.Doe	s the organization ma	intain records to s	substantiate the amount	of its grants and	
, -		the grants or assis	stance, and the selection	criteria used	
to award the grants or	assistance?				🗹 Yes 🗌 No
2 For grantmakers. Des outside the United State		ganızatıon's proce	dures for monitoring the	use of its grants and ot	her assistance
3 Activites per Region (The	e following Part I, line 3	table can be dupli	cated if additional space is	needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region		(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data			,		
(2)					
(3)					
(4)					
(5)					
3a Sub-total		0 0			4,488,525
b Total from continuation sh	neets to	0 0			85,237
c Totals (add lines 3a and 3		0 0		No 50082W Schedu	4,573,762

(12) (13)

 $\overline{(14)}$ (15) (16)



(10) (11) (12)

(13) (14) (15) (16) (17) (18) Page **3**

Schedule F (Form 990) 2016

, ,							9			
Part IIII Grants and O	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.									
Part III can be	Part III can be duplicated if additional space is needed.									
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV,			

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Mo valu (book apprais
(1)							

aisal, other)

(2)

(3) (4) (5)

(6) (7) (8) (9)

Sche	dule F (Form 990) 2016		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		
	Instructions for Forms 3320 and 3320-Ay	☐Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Colporations (see Instructions for Form 5471)	☐Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(See Instructions for Form 6665)	☐Yes	✓ No
	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713)	∐ Yes	✓ No

Schedule F (Form 990) 2016 Page 5 Part V **Supplemental Information** Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting

method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions). 990 Schedule F, Supplemental Information

Return Reference	Explanation
Part I, Line 2	ISACA UNDERSTANDS THE VALUE OF CHAPTER LEADERS HAVING THE OPPORTUNITY TO ATTEND AN ISACA L EADERSHIP EVENT, THE FOLLOWING CHAPTER GRANT PROGRAM HAS BEEN ESTABLISHED TO COVER/DEFRAY THE COSTS OF TRAVEL EXPENSES ALL ISACA CHAPTERS (U.S. AND WORLDWIDE) ARE ELIGIBLE TO APPL Y FOR GRANT FUNDS. A CHAPTER WHO PLANS TO SEND AN INDIVIDUAL TO AN EVENT WILL BE PROVIDED WITH A GRANT(S), EACH IN THE AMOUNT OF US \$XXXX TO COVER/DEFRAY THE COSTS FOR ECONOMY AIRF ARE. THE HOTEL, LOCAL TRANSPORTATION, MEALS IN TRANSIT AND OTHER EXPENSES ASSOCIATED WITH ATTENDING WHILE THE GRANT(S) WILL BE ISSUED TO A CHAPTER VIA THE CHAPTER'S PREFERRED REMI TTANCE METHOD, THE CHAPTER MUST AGREE TO THE FOLLOWING, TO RETAIN THE GRANT AFTER THE EVEN T. 1) ATTENDEE(S) MUST STAY AT THE HOST HOTEL DETAILS WILL BE PROVIDED IN THE OFFICIAL RE GISTRATION MESSAGE. 2) ATTENDEE(S) MUST ATTEND ALL THREE DAYS OF THE EVENT ATTENDANCE WILL BE VERIFIED EVERY DAY AND REGISTRATIONS WILL BE RECONCILED AFTER THE EVENT CONCLUDES. 3) THE GRANT IS A FIXED AMOUNT AND IS INTENDED TO COVER/DEFRAY MOST OF THE COSTS ASSOCIATED WITH ATTENDING THIS EVENT IF THE AMOUNT EACH ATTENDEE SPENDS IS LESS THAN THE AMOUNT OF THE GRANT, THE CHAPTER WILL BE ALLOWED TO RETAIN THE ADDITIONAL FUNDS. IF THE GRANT DOES NO TOVER ALL OF THE COSTS ASSOCIATED WITH EACH INDIVIDUAL'S ATTENDANCE, ANY ADDITIONAL COST S (AS DEEMED REASONABLE AND PROPER BY THE CHAPTER, SHOULD BE REIMBURSED TO THE INDIVIDUAL SOT HE CHAPTER 4) THERE IS NO CHAPTER DEDUCTIBLE FOR THIS EVENT AND EXPENSE REPORTS WILL NOT BE SUBMITTED TO ISACA INTERNATIONAL HOA AFTER THE EVENT CONCLUDES. IF, FOR ANY REASON, THE REPRESENTATIVE(S) FROM A CHAPTER DOES NOT ATTEND THE ISACA LEADERSHIP EVENT. THE CHAPTE RWILL BE REQUITED TO RETURN THE GRANT TO ISACA INTERNATIONAL IN ITS ENTIRETY THE TOTAL OF THE GRANT WILL BE WITHHELD FROM THE CHAPTER'S MONTHLY DUES REMITTANCE-OR DEDUCTED FROM CHAPTER CREDIT-UNTIL THE BALANCE OF THE GRANT IS PAID IN FULL ALTERNATIONAL AFTER THE TOTAL OF THE GRANT WILL BE WITHHELD FROM THE CHAPTER HOR AND THE GRANT

Additional Data

Europe

East Asia and the Pacific

Software ID: Software Version:

EIN: 23-7067291

INFORMATION SYSTEMS AUDIT AND Name: CONTROL ASSOCIATION INC.

Form 990 Schedule F Part I - Activities Outside The United States							
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region		

recipients located in the

Fast Asia and the Pacific

0

0

region) 0 Board Meeting

Meeting

0 Program Service

0 Audit & RISK Committee

Board Meeting

Audit Committee Meeting

Training and Education

8,611

928,639

236,095

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 0 Program Service 2.963.382 Europe Training and Education North America 0 Program Service Training and Education 12,590 South Asia 0 Program Service Training and Education 4.524

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Sub-Saharan Africa 312.691 0 Program Service Training and Education East Asia and the Pacific 0 Program Service Trade Show 21,993 Europe 0 Program Service Trade Show 79.127

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region services, grants to service(s) in region region recipients located in the region) Sub-Saharan Africa 0 Program Service Trade Show 6.110

(i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of (c) Region cash non-cash (book, FMV, organization and EIN(If grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) 5,120 Wire Transfer FMV Central America To defray travel and the expense to Carıbbean ISACA Leadership Conference (Puerto Rico Chapter) Central America To defray travel 5,120 Wire Transfer FMV and the expense to Caribbean ITSACA

Form 990 Schedule F Part II - Grants or Entities Outside The United States

		Leadership Conference (Kingston Chapter)				
	the Pacific	To defray travel expense to ISACA	7,820	Wire Transfer		FMV

	To defray travel expense to ISACA Leadership Conference (Brisbane Chapter)	7,820	Wire Transfer		FMV
	To defray travel expense to ISACA	5,120	Wire Transfer		FMV

Leadership Conference (Melbourne Chapter)

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of (c) Region (book, FMV. cash non-cash organization and EIN(If cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) 5,120 Wire Transfer East Asia and To defray travel FMV the Pacific expense to ISACA Leadership Conference (Adelaide Chapter) 5,120 Wire Transfer FMV East Asia and To defray travel the Pacific expense to ISACA Leadership Conference (Canberra Chapter) East Asia and To defray travel 5.120 Wire Transfer IFM∨ the Pacific expense to ISACA Leadership Conference (Wellington Chapter)

5,120

Wire Transfer

FMV

East Asia and

the Pacific

To defray travel

expense to ISACA Leadership Conference (Auckland Chapter)

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of of (c) Region (book, FMV, cash non-cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) 5,120 Wire Transfer ΙFΜV North America To defray travel expense to ISACA Leadership Conference (Vancouver Chapter) North America To defray travel 5,120 Wire Transfer IFMV expense to ISACA Leadership Conference (Winnipeg

	Chapter)				
	To defray travel expense to ISACA Leadership Conference (Quebec City Chapter)	5,120	Wire Transfer		FMV
	To defray travel expense to ISACA	5,120	Wire Transfer		FMV

Leadership Conference (Calgary Chapter)

(1) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of (c) Region non-cash (book, FMV, cash and EIN(If organization cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) 5,120 Wire Transfer FMV North America To defray travel expense to ISACA Leadership Conference (Edmonton Chapter) North America 5,120 Wire Transfer lFM∨ To defray travel expense to ISACA Leadership Conference (Mexico City Chapter)

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Leadership Conference (Guadalajara Chapter)

	To defray travel expense to ISACA Leadership Conference (Monterrey Chapter)	5,120	Wire Transfer		FMV
	To defray travel expense to ISACA	5,120	Wire Transfer		FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of of (c) Region (book, FMV, cash non-cash and EIN(If organization cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) 5,120 Wire Transfer FMV South America To defray travel expense to ISACA Leadership Conference (Santiago Chapter) Sub-Saharan To defray travel 5,120 Wire Transfer IFMV Africa expense to ISACA Leadership Conference (Gaborone Chapter)

	Africa	To defray travel expense to ISACA Leadership Conference (Mauritius Chapter)	5,120	Wire Transfer		FMV
		To defray travel expense to	5,120	Wire Transfer		FMV

		Conference (Mauritius Chapter)				
	Africa	To defray travel expense to ISACA Leadership Conference (Lusaka Chapter)	5,120	Wire Transfer		FMV

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -					DLN: 93493152003337
Schedule I (Form 990) Department of the Treasury Internal Revenue Service	Coi	Governments a	ther Assistance and Individuals tion answered "Yes," o Attach to Form I (Form 990) and its in	in the United in Form 990, Part IV, 990.	d States , line 21 or 22.		OMB No 1545-0047 2016 Open to Public Inspection
Name of the organization INFORMATION SYSTEMS AUDIT	AND						ntification number
CONTROL ASSOCIATION INC Part I General Inform	ation on Grants	and Assistance				23-7067291	
	to award the grants anization's procedure Assistance to Dom	or assistance? es for monitoring the use	of grant funds in the Uni	ited States			✓ Yes □ No
(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 o non-cash assistant	
(1) ISACA Detroit Chapter PO Box 43 Romeo, MI 48065	23-7410401	501(c)(6)	9,560		FM∨	N/A	To defray travel expense to ISACA leadership conference
(2) ISACA New England Chapter PO Box 170951 Boston, MA 02117	04-2592391	501(c)(6)	15,370		FMV	N/A	To defray travel expense to ISACA leadership conference
(3) ISACA Willamette Valley PO Box 413 Portland, OR 972070413	36-3538334	501(c)(6)	14,320		FMV	N/A	To defray travel expense to ISACA leadership conference
(4) Lighthouse Guild International Inc 15 West 65th St New York, NY 100236601	46-4215298	501(c)(3)	12,500		FMV	N/A	NFP Vision & Healthcare Organization
2 Enter total number of sect		-	listed in the line 1 table .			•	1
3 Enter total number of other				Cat No 50055		<u> ▶</u>	Schedule I (Form 990) 2016

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990. Part IV. line 22

(2) (3) (4) (5) (6)

(7) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Return Reference Explanation ISACA UNDERSTANDS THE VALUE OF CHAPTER LEADERS HAVING THE OPPORTUNITY TO ATTEND AN ISACA LEADERSHIP EVENT, THE FOLLOWING CHAPTER GRANT PROGRAM HAS BEEN ESTABLISHED TO COVER/DEFRAY THE COSTS OF TRAVEL EXPENSES ALL ISACA CHAPTERS (U.S. AND WORLDWIDE) ARE ELIGIBLE TO APPLY FOR GRANT FUNDS A CHAPTER WHO PLANS TO SEND AN INDIVIDUAL TO AN EVENT WILL BE PROVIDED WITH A GRANT(S), EACH IN THE AMOUNT OF US \$XXXX TO COVER/DEFRAY THE COSTS FOR ECONOMY AIRFARE, THE HOTEL, LOCAL TRANSPORTATION, MEALS IN TRANSIT AND OTHER EXPENSES ASSOCIATED WITH ATTENDING WHILE THE GRANT(S) WILL BE ISSUED TO A CHAPTER VIA THE CHAPTER'S PREFERRED REMITTANCE METHOD. THE CHAPTER MUST AGREE TO THE FOLLOWING, TO RETAIN THE GRANT AFTER THE EVENT 1) ATTENDEE(S) MUST STAY AT THE HOST HOTEL DETAILS WILL BE PROVIDED IN THE OFFICIAL REGISTRATION MESSAGE 2) ATTENDEE(S) MUST ATTEND ALL THREE DAYS OF THE EVENT ATTENDANCE WILL BE VERIFIED EVERY DAY AND REGISTRATIONS WILL BE RECONCILED AFTER THE EVENT CONCLUDES 3) THE GRANT IS A FIXED AMOUNT AND IS INTENDED TO COVER/DEFRAY MOST OF THE COSTS ASSOCIATED WITH ATTENDING THIS EVENT. IF THE AMOUNT EACH ATTENDEE SPENDS IS LESS THAN THE AMOUNT OF THE GRANT, THE CHAPTER WILL BE ALLOWED TO RETAIN THE ADDITIONAL FUNDS IF THE GRANT DOES NOT COVER ALL OF THE COSTS ASSOCIATED WITH EACH INDIVIDUAL'S ATTENDANCE, ANY ADDITIONAL COSTS (AS

Part I, Line 2

Schedule I (Form 990) 2016

DEEMED REASONABLE AND PROPER BY THE CHAPTER) SHOULD BE REIMBURSED TO THE INDIVIDUAL BY THE CHAPTER 4) THERE IS NO CHAPTER DEDUCTIBLE FOR THIS EVENT AND EXPENSE REPORTS WILL NOT BE SUBMITTED TO ISACA INTERNATIONAL HO AFTER THE EVENT CONCLUDES. IF, FOR ANY REASON, THE REPRESENTATIVE(S) FROM A CHAPTER DOES NOT ATTEND THE ISACA LEADERSHIP EVENT, THE CHAPTER WILL BE REQUIRED TO RETURN THE GRANT TO ISACA INTERNATIONAL IN ITS ENTIRETY THE TOTAL OF THE GRANT WILL BE WITHHELD FROM THE CHAPTER'S MONTHLY DUES REMITTANCE-OR DEDUCTED FROM CHAPTER CREDIT-UNTIL THE BALANCE OF THE GRANT IS PAID IN FULL ALTERNATIVELY, THE CHAPTER CAN SEND (VIA CHECK OR WIRE TRANSFER) THE TOTAL OF THE GRANT TO ISACA INTERNATIONAL AFTER THE EVENT Chapters are an integral part of ISACA's success and future vision. Through our chapter network, ISACA provides its members with education, resource sharing, advocacy, professional networking, and a host of other benefits on a local level. In the spirit of ISACA's core value, "We ARE ONE", ISACA provides new chapters funding in the amount of US \$2,000 to assist with chapter startup activities This funding may be used for chapter administrative fees, a kick-off event, to build reserves, etc. The requirements are that the chapter needs to, 1) be registered locally, and 2) have a bank account in the chapter's name. The ISACA board of directors elected to make a donation to the Lighthouse Guild in support of 2016 award recipient and former ISACA board of directors chair, Marios Damianades

Page 2

Additional Data

ISACA Detroit Chapter

ISACA New England Chapter

Romeo, MI 48065

Boston, MA 02117

ISACA Willamette Valley

Portland, OR 972070413

PO Box 170951

PO Box 413

PO Box 43

Software ID: Software Version:

23-7410401

04-2592391

36-3538334

EIN: 23-7067291

Name: INFORMATION SYSTEMS AUDIT AND

CONTROL ASSOCIATION INC.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

or government	- ,	-	assistance	other)

501(c)(6)

501(c)(6)

501(c)(6)

To defray travel

expense to ISACA

To defray travel

To defray travel

expense to ISACA

leadership conference

expense to ISACA leadership conference

leadership conference

(h) Purpose of grant

(d) Amount of cash (e) Amount of noncash grant

9,560

15,370

14,320

(a) Name and address of (b) EIN (c) IRC section if applicable (book, FMV, appraisal, organization

(f) Method of valuation

FMV

FMV

lFM∨

(q) Description of

In/a

N/A

N/A

non-cash assistance or assistance

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (d) Amount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (b) EIN (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 46-4215298 501(c)(3) 12.500 lFM∨ IN/A NFP Vision & Healthcare Lighthouse Guild International Organization

15 West 65th St New York, NY 100236601

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493152003337 **Compensation Information** OMB No 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest 2016 Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at Open to Public Department of the Treasury www.irs.gov/form990. Inspection Internal Revenue Service **Employer identification number** Name of the organization INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION INC. 23-7067291 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e g , maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain **1**b Yes 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III $\overline{\mathbf{v}}$ Compensation committee Written employment contract $\overline{\mathbf{V}}$ Independent compensation consultant Compensation survey or study \square Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Yes 4b Yes Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4c Participate in, or receive payment from, an equity-based compensation arrangement? No If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 5 compensation contingent on the revenues of The organization? 5a 5b Any related organization? If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 6 compensation contingent on the net earnings of The organization? 6a Any related organization? 6b If "Yes," on line 6a or 6b, describe in Part III 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 8 Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2016 Cat No 50053T

Schedule J (Form 990) 2016							Page 2
Part II Officers, Directors, Trustees, Key Employees, and	d Highest Compe	ensated Employe	es. Use duplicate o	copies if addition	nal space is ne	eded.	
For each individual whose compensation must be reported on Schedule J, reinstructions, on row (ii) Do not list any individuals that are not listed on Fol Note. The sum of columns (B)(i)-(iii) for each listed individual must equal to $(1 - \frac{1}{2})$ for each listed individual mu	rm 990, Part VII	•	``	•	·		ridual
(A) Name and Title	(B) Breakdown o	of W-2 and/or 1099-N	(C) Retirement	(D)	(E) Total of	(F)	
	(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	and other deferred compensation	Nontaxable benefits	columns (B)(ı)-(D)	Compensation in column(B) reported as deferred on prior Form 990
See Additional Data Table							_

Schedule J (Form 990) 2016

	<u>-</u>								
Part III Supplemental Information									
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information									
Return Reference	Explanation								
·	THE FOLLOWING INDIVIDUALS RECEIVED SEVERANCE PAYMENTS TERRY TRSAR (former CHIEF RELATIONS OFFICER), \$139,265 RONALD HALE (former CHIEF KNOWLEDGE OFFICER), \$312,000 THE FOLLOWING INDIVIDUALS PARTICIPATED IN A SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN MATTHEWS LOEB (DIRECTOR & CHIEF EXECUTIVE OFFICER), \$260,500 (including \$234,000 contribution to 457f) ROBERT a MICEK (TREASURER & CHIEF FINANCIAL OFFICER), \$11,000 TIM MASON (CHIEF MARKETING OFFICER), \$11,000 FRANCISCO SCHETTINI (CHIEF INFORMATION OFFICER), \$11,001 Ken Kunndug (St. V.P. Burgers Development & Sales) \$7,615 Tara Wigneyerk (Managing Director Advances of Burgles Officer).								

Page 3

Schedule J (Form 990) 2016

JKNOWLEDGE OFFICER), \$11,041 Ken Kujundjic (Sr. VP, Business Development & Sales), \$7,615 Fara Wisniewski (Managing Director, Advocacy & Public Affairs),

Schedule J (Form 990) 2016

\$10,577

Schedule J, Part II, Column b(II) INCLUDED ON SCHEDULE J, PART II, COLUMN B(II) ARE AMOUNTS REPRESENTING BONUS PAYMENTS THESE AMOUNTS WERE APPROVED BY THE BOARD AND INCLUDED IN THE INDIVIDUAL'S 2016 W-2S

(A) Name and Title

Chief Marketing Officer

Director, Thought Leadership & Resea 8Elizabeth Santilli

VP, Human Resources

Sr Director of Legal & Compliance

10Narayanan Krishnan

11Shannon Donahue

Practices

Officer

12Terry Trsar

Director of Info Security

outgoing Chief Relations

Director of Web Services

9Julia Fullerton

7Ed Moyle

(11)

(1)

(1)

(II)

(II)

(1)

Software ID:

Software Version:

(B) Breakdown of W-2 and/or 1099-MISC compensation

(ii)

Bonus & incentive

compensation

(i) Base Compensation

197,726

200,092

189,876

201,579

212,389

EIN: 23-7067291

Name: INFORMATION SYSTEMS AUDIT AND

(iii)

Other reportable

compensation

CONTROL ASSOCIATION INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (D) Nontaxable

18,000

10,000

18,000

18,000

18,000

1Matthew S Loeb Director & Chief Executive	(1)	709,908	157,500	31,300	247,250	63,978	1,209,936	0
Officer	(11)	0	0	0	0	0	0	0
Treasurer & Chief Financial	(1)	315,151	50,000	11,000	13,250	40,351	429,752	0
Officer	(11)	0	0	0	0	0	0	0
2Francisco Schettini Chief Innovation Officer (1	(1)	285,824	45,000	11,000	13,250	26,382	381,456	0
	(11)	0	0	0	0	0	0	0
3 Ken Kujundjic Sr VP, Business	(1)	180,769	117,000	7,615	10,462	18,232	334,078	0
Development & Sales	(11)	0	0	0	0	0	0	0
4 Ronald Hale outgoing Chief Knowledge	(1)	338,299	45,000	323,041	13,250	35,134	754,724	0
Officer	(11)	0	0	0	0	0	0	0
5 Tara Wisniewski Managing Director,	(1)	246,058	12,500	48,845	13,295	38,545	359,243	0
Advocacy & Public ((11)	0	0	0	0	0	0	0
6Tim Mason	(1)	312,320	45,000	11,000	13,194	30,303	411,817	0

1,477

423

2,600

2,600

139,265

(C) Retirement and

other deferred

compensation

10,786

9,374

10,764

11,109

11,649

benefits

12,549

13,339

31,559

2,091

2,089

(E) Total of columns

(B)(i)-(D)

239,061

234,282

250,622

235,379

246,727

139,265

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

0

0

0

0

0

0

0

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 934931					l: 93493152003337	
SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury		Complete to pro Form 990 o ▶ Information abou	ovide information fo or 990-EZ or to prov ▶ Attach to Form t Schedule O (Form	tion to Form 990 or 990-EZ for responses to specific questions on ovide any additional information. orm 990 or 990-EZ. m 990 or 990-EZ) and its instructions is at qov/form990. OMB No 1545-0047 2016 Open to Public Inspection		
Internal Revenue fiervice Name of the organizatio INFORMATION SYSTEMS AU CONTROL ASSOCIATION IN		DIT AND			Employer iden 23-7067291	tification number
990 Schedule	e O, Su	ipplemental Informatio	n			
Return Reference		Explanation				
form 990, part III, line 1, description of organization mission	rprises cy and nforma ded in ts and countri ISACA), Certi e IT (C Cybers ders IS obally a logy an	by being a leading global pro- education on information sys- tion technology (IT), IT-relate 1969, ISACA sponsors interr publishes research, provides es, and develops internations also administers the globally fied Information Security Mai GEIT), Certified in Risk and is security Practitioner (CSXP) of SACA supports development adopted business framework	ovider of knowledge, costems assurance and seed risk and compliance lational conferences, postems grespected Certified Information Systems (CISM), Certified Information Systems Costems Costems and has respected conformation for governing and mack), which offers creden	A) serves both individuals and elertifications, community, advocasecurity, governance of enterprise, and other related topics. Foun publishes the ISACA Journal, colore than 130,000 members, in 1 auditing and control standards information Systems Auditor (CISIC) designations, are more than 159,000 certification in activities related to COBIT 5, an aging enterprise information te tialing, training and career devergers.	anduc 88 6A 61 61 61 61 61 61 61 61 61 61 61 61 61	

Return Reference	Explanation
form 990, part III, line 4a, program service accomplishments	Information Systems Audit and Control Association's (ISACA) primary purpose is to serve it s members. One way ISACA does that is by helping them do their jobs better, by offering them pragmatic guidance on emerging technologies they deal with every day. In 2016, 11 white papers, two books and five audit programs were issued. Nearly 500 titles and 200 download able items were available in the ISACA Bookstore. ISACA translated 164 items and publications into 14 non-English languages in 2016. Much of the research publications are offered to members for free download as a benefit of membership. ISACA hosted seven in-person conferences and several other training opportunities, including online learning. The association offers member benefits in the areas of professional development, community and leadership, and continually reviews and expands its portfolio of benefits to address the changing needs of members. Many member benefits are documented and further explained within the other responses on this form. As a result of this activity, ISACA membership grew five percent from 1 January to 31 December 2016, growing to 130,822 members in 188 countries. Three new chapters were added, taking the total number of chapters worldwide to 215.

Return Reference	Explanation
form 990, part III, line 4b, program service accomplishments	Information technology (IT) is a rapidly changing industry, and it demands a commitment on the part of its practitioners to learn continuously and master new skills. Certification is one way to expand one's skill set and be recognized for doing so. Holding an Information is Systems Audit and Control Association (ISACA) professional certification demonstrates ex cellence in the topic and a commitment to remaining current and informed, it distinguishes an individual from his/her peers. Information Systems Audit and Control Association (ISACA) offers five certifications. Certified Information Systems Audit and Control Association (ISACA) offers five certifications. Certified Information Systems Auditor (CISA), Certified Information Security Manager (CISM), Certified in the Governance of Enterprise IT (CGEIT), Certified in Risk and Information Systems Control (CRISC), and Cybersecurity Practitioner (CSXP) designations. In 2016, which was first offered in 1978, CISA saw a 6 5 percent increases, growing to 129,462 certification earners by year's end. The CISA exam was available in multiple languages at more than 250 locations. CISM, was first offered in 2002, saw an 11 8 percent increase this year, growing to 34,050 certification earners by year's end. CGEIT, which was introduced in 2007, saw a 5 8 percent increase this year, growing to 7,176 certification earners by year's end. CRISC, which was introduced in 2010, saw a 7 2 percent increase this year, growing to 21,023 certification earners by year's end. CSXP, ISACA's newest certification, was introduced in 2015. 2016 marked the tenth year the CISA and CISM certifications were accredited under international standard ANSI/ISO/IEC 17024 from the International Organization for Standardization (ISO), the sixth year CGEIT received that accreditation, and the fourth year that CRISC was so recognized.

Return Reference	Explanation
form 990, part III, line 4c, program service accomplishments	In 2016, the Information Systems Audit and Control Association (ISACA) education roster in cluded major face-to-face events such as the global Computer Audit, Control and Security (CACS) conferences, topic-specific conferences (on information security and risk management, and on governance, risk and compliance), and week-long training events focusing in-depth on one or two topics. ISACA is dedicated to monitoring the professional environment and developing new programs as needed to complement its established portfolio of events. The as sociation has focused a considerable amount of effort on distance learning, as it provides a way to cover late-breaking topics on a timely basis and offer low-cost education to a globally dispersed audience. The online events program included quarterly webinar programs specific to geographical regions, including a Spanish language event in Latin America and events in Europe and Africa. In 2016, in addition to CSX North America, ISACA expanded the cybersecurity conference to CSX Asia Pacific and CSX Europe. ISACA's webinar program included 44 webinars on various topics, of which more than 37,000 attendees took advantage. In 2016, ISACA launched new virtual instructor-led training, which included six live events and three recorded versions. ISACA also launched four CPE On Demand recorded video bundles and the COBIT video series. The Training Week program included 13 events presented in cooperation with Deloitte LLP. As valuable as distance learning is, the benefits of small-ven ue, face-to-face training continues to be appreciated. In 2016, ISACA provided 79 on-site training programs, an increase of more than 15 percent over last year, which enterprises u sed as a low-cost, customizable way to educate multiple employees at once.

Return Reference	Explanation
Form 990, Part VI, Section A, line 6	INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) MAINTAINS A MEMBERSHIP OF INDIVIDUALS, THERE IS NO CORPORATE MEMBERSHIP CATEGORY ANYONE INTERESTED IN THE PURPOSES AND OB JECTIVES OF THE ASSOCIATION IS ELIGIBLE FOR MEMBERSHIP THE VAST MAJORITY OF ISACA MEMBERS ALSO BELONG TO A LOCAL CHAPTER (MEMBERSHIP IN ISACA IS REQUIRED FOR ANYONE HOLDING MEMBER SHIP IN A CHAPTER) A MEMBER-AT-LARGE CATEGORY EXISTS FOR INDIVIDUALS WHO WISH TO JOIN ISA CA BUT WHO LIVE AT SUCH A DISTANCE FROM A LOCAL CHAPTER THAT ATTENDANCE AT MEETINGS IS PROHIBITIVE STUDENT AND RETIRED MEMBER CATEGORIES ARE OFFERED AS WELL ISACA'S MEMBERSHIP IS CHARACTERIZED BY DIVERSITY THE CONSTITUENTS LIVE AND WORK IN 188 COUNTRIES AND RUN THE GAMUT OF JOB TITLES, INCLUDING 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 A TMIDDLE MANAGEMENT LEVELS OR SENIOR RANKS THEY WORK IN FINANCE AND BANKING, PUBLIC ACCOUNTING, HOSPITALITY, HEALTH CARE, GOVERNMENT AND THE PUBLIC SECTOR, UTILITIES, MANUFACTURIN GAND RETAIL ISACA MEMBERS EMBRACE THIS DIVERSITY AS PROVIDING A VAST LEARNING GROUND WHE RE THEY MAY DELVE INTO THE CHALLENGES AND OPPORTUNITIES FACED BY COLLEAGUES IN OTHER COUNT RIES, POSITIONS OR INDUSTRIES ISACA RECOGNIZES THAT ITS MEMBERS CONSTITUTE AN EXTENSIVE A ND VARIED POOL OF EXPERTISE, EXPERTISE THE ASSOCIATION COUNTS ON TO HELP PROVIDE SERVICES AND PRODUCTS THAT ENGENDER CREDIBILITY AND CAPABILITY IN ITS CONSTITUENTS THE MORE MEMBER S, THE MORE EXPERTISE, THE MORE EXPERTISE, THE BETTER THE ABILITY TO MEET CONSTITUENT NEED S ISACA'S MEMBERS ARE ITS MOST VALUABLE ASSET

Return Reference	Explanation
Form 990, Part VI, Section A, Iine 7a	Information Systems Audit and Control Association (ISACA) has a Nominating Committee that prepares a slate of officers (Chair, Vice-Chair and elected directors) for member review Members may submit the names of additional candidates by way of petition prior to 120 days before the Annual Meeting of the Membership. The petition must be signed by one-twentieth of 1 percent of the members in good standing, equaling a minimum of 100 members, no more than 20 of which may be from any one chapter. If members propose additional candidates or if the Nominating Committee itself proposes more candidates than there are openings on the Board of Directors, an election is held. If an election is held, the election is conducted by voice, electronic vote or ballot. Only those ballots received 20 or more days prior to the Annual Meeting are counted. Results of the election are certified by an independent professional group and announced at the Annual Meeting. If no additional candidates are proposed by the members, or the Nominating Committee's slate presents a number of candidates which does not exceed the number of openings available, the committee's slate is considered elected by acclamation.

Return Reference	Explanation
Form 990, Part VI, Section A, line 7b	WHEREAS NOT ALL DECISIONS OF THE BOARD OF DIRECTORS ARE SUBJECT TO REVIEW AND APPROVAL BY THE MEMBERSHIP, CERTAIN ONES ARE EACH YEAR, AT THE ANNUAL MEETING OF THE MEMBERSHIP, THE FOLLOWING ITEMS ARE PRESENTED TO THE MEMBERS IN ATTENDANCE - HIGHLIGHTS OF DECISIONS MADE BY THE BOARD OVER THE PREVIOUS YEAR - THE PREVIOUS ANNUAL MEETING'S MINUTES - THE TREASUR ER'S REPORT - APPOINTMENT OF THE ASSOCIATION'S INDEPENDENT AUDITORS FOR THE FOLLOWING YEAR THE BYLAWS REQUIRE THE MEMBERS TO VOTE ON ANY CHANGES TO THE BYLAWS THAT (I) MATERIALLY A ND ADVERSELY AFFECT THE MEMBERS' RIGHTS AS TO VOTING, DISSOLUTION, REDEMPTION, OR TRANSFER, (II) INCREASE OR DECREASE THE NUMBER OF MEMBERS AUTHORIZED IN TOTAL OR FOR ANY CLASS, (II) EFFECT AN EXCHANGE, RECLASSIFICATION, OR CANCELLATION OF ALL OR PART OF THE MEMBERSHIP S, (IV) AUTHORIZE A NEW CLASS OF VOTING MEMBERSHIP, (V) INCREASE OR EXTEND THE TERMS OF DIRECTORS, (VI) INCREASE THE QUORUM FOR MEMBERS' MEETINGS, (VII) REPEAL, RESTRICT, CREATE, EXPAND, OR OTHERWISE CHANGE PROXY RIGHTS, or (VIII) AUTHORIZE CUMULATIVE VOTING FURTHER, WHERE AMENDMENTS TO THE BYLAWS REQUIRE APPROVAL BY THE MEMBERS AS SET FORTH UNDER THE CORPORATIONS CODE AS STATED ABOVE, THE AMENDMENT MAY BE APPROVED BY THE VOTE OF A MAJORITY OF THE MEMBERS PRESENT AT A MEETING AT WHICH A QUORUM IS MET OR BY MAIL/ELECTRONIC BALLOT

Return Reference	Explanation
Form 990, Part VI, Section B, line 11b	The 2016 Form 990 for Information Systems Audit and Control Association (ISACA) was prepar ed by CohnReznick LLP (CohnReznick), based upon information provided by ISACA. This docume nt summarizes the review points and availability associated with the returns. The data for the return was compiled based on information prepared for the 2016 audit, as well as othe r accounting records. This information was submitted to CohnReznick for preparation of the returns. In addition to the financial information CohnReznick received, CohnReznick had a n opportunity to raise questions about governance and other issues, and request additional information as needed. The narrative explanations of program accomplishments and policies were coordinated with the applicable Directors and members of the Executive Team. Upon completion of the return, several layers of review were conducted. Initial reviews of return. The initial review of the completed return was completed by the respective staff within the Finance Department. Senior Management review. Following the initial review, the Executive Team including the CEO were provided a copy of the return for comment. The CEO, CF. O and VP, Human Resources also provided an additional review of the compensation-related a reas. Comments were forwarded to CohnReznick for incorporation into the return. Voluntee review. The organization's Governance Committee Chair reviewed the return. Comment is from these reviews were evaluated and provided to CohnReznick, who updated the return, if applicable. The Board of Directors was provided access to the return via the board effect (web site) prior to its filling.

Return Reference	Explanation
Form 990, Part VI, Section B, Iine 12c	Information Systems Audit and Control Association (ISACA) has a conflict of interest polic y that defines an interested person and independent director, directs Board members and others to keep in confidence all ISACA confidential information, requires Board members and others to disclose arrangements that may propose a conflict of interest so that the Conflict of Interest Panel comprised of the Governance Committee, Board Chair and ISACA CEO may evaluate such arrangements. This policy details the procedures that must be used in considering a conflict of interest, periodic reviews of any compensation arrangements and other partnerships. Further, potential conflicts of interest are documented and monitored each year, through (1) self-proclamations made by individual volunteers who sign the participation on agreements required for participation in association boards, committees, working groups and task forces, (2) disclosure of conflicts in standard consulting agreements, and (3) disclosure by ISACA employees upon hire (and annually) by review and signature of the organization's employee agreement. Consultants, volunteers and employees are encouraged to report any conflicts that may arise throughout the year. If such instances are reported, they are dealt with at that time and based on the circumstances relating to the potential conflict.

Return Reference	Explanation
Form 990, Part VI, Section B, line 15	The compensation philosophy of Information Systems Audit and Control Association (ISACA), which is affirmed by the Board of Directors, should facilitate ISACA's ability to attract, motivate and retain quality staff. The compensation philosophy is supported by use of an independent compensation consulting firm and the establishment of a Compensation Committee composed of independent members of the Board of Directors (current and two immediate past board chairs). Based on the compensation philosophy, the compensation range for the CEO is developed by the compensation consultant and reported to the Committee Compensation ranges are also developed by the consultant for the executive management team with compensation variances to the ranges provided to the Committee Ranges are calculated based on position responsibilities and a blend of the not-for-profit and for-profit sectors, which reflects the labor market in which ISACA competes for executive talent 60% for-profit organizations and 40% not-for-profit organizations. The final report of the compensation consultant as accepted by the Committee, the compensation philosophy, and contract (if applicable) then serve as the basis for the determination of compensation, consisting of base salary, incentives, total cash compensation and benefits. Determination for executive management is made by the CEO based upon the accepted compensation ranges and approved by the Compensation Committee. Determination for the CEO is made by the Compensation Committee itself. The is process is completed every three years except if there is a change in control, merger and/or acquisition, or other activity that changes roles and responsibilities, then perform ed as needed. Gathering the information necessary to evaluate the market competitiveness of ISACA's compensation, provide data on executive compensation from a control and governance standpoint, and facilitate ISACA's compensation philosophy, accomplish organizational objectives and provide value to its constituents, which ISACA consi

990 Schedule O, Supplemental Information Return Reference Explanation

Form 990. THE FOLLOWING DOCUMENTS ARE POSTED TO THE WEB SITE AND PROVIDED UPON REQUEST (1) PARTICIP Part VI. ATION AGREEMENT AND INTELLECTUAL PROPERTY (IP) WAIVER, WHICH OUTLINES THE CONFLICT OF INTE Section C. REST POLICY AND INTELLECTUAL PROPERTY OWNERSHIP ISSUES AND IS REQUIRED TO BE SIGNED BY ALL VOLUNTEERS. (2) THE ARTICLES OF INCORPORATION OF THE ORGANIZATION AND BYLAWS OF THE ORGAN line 19 IZATION, AND (3) THE ANNUAL REPORT INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISA CA) DOES NOT HAVE A FORM 1023, BUT IT DOES PROVIDE THE IRS LETTER OF DETERMINATION, UPON R EQUEST IN ADDITION, FORM 990 IS PUBLICLY AVAILABLE THROUGH GUIDESTAR'S WEB SITE AND THE I LLINOIS ATTORNEY GENERAL'S WEB SITE

Return Explanation

min services 47.061

Form 990,
Part IX, line
Ofessional Services 4,301,576 Recruiting/Placement Fees 224,789 Temporary Clerical Services 145,220 Temporary Personnel Services 144,835 Translation Services 219,862 office ad

Return Explanation

and compilation of its financial statements

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493152003337 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships 2016** (Form 990) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION INC 23-7067291 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (f) (c) (d) (e) End-of-year assets Name, address, and EIN (if applicable) of disregarded entity Direct controlling Primary activity Legal domicile (state Total income or foreign country) entity (1) CMMI Institute LLC 7,219,895 Training/Consulting PΑ 9,392,567 ISACA Enterprises Inc 11 Stanwix St Ste 1150 Pittsburgh, PA 15222 30-0750321

							-
Part II Identification of Related Tax-Exempt Organizations during the tax year		 nization answered "Ye		art IV, line 34 bec	ause it had one or i	more	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Sectio (b)(contr enti	n 512 [13] folled ity?
(1)IT GOVERNANCE INSTITUTE 3701 ALGONQUIN RD SUITE 1010	RESEARCH/DEVELOPMENT	IL	501(c)(3)	Line 12b, II	ISACA	Yes	No
ROLLING MEADOWS, IL 60008 95-3080691							
For Paperwork Reduction Act Notice, see the Instructions for For	m 990.	Cat No 50135Y			Schedule R (Form	 990) 20	16

ISACA	Yes	
Schedule R (Form 9	90) 20	16

one or more related organization	ganizations Taxable as a ons treated as a partnership	Partnership during the ta	Complet ix year.	e if the org	anızatıon	answered	'Yes" on Form	า 990,	Part I\	V, line 34 l	ecau	se ıt l	nad
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant Income(related unrelated, excluded from tax under sections 512-	lated, total ind ed, from der 512-	of Share of	(h) Disproprtionate r allocations?		(i) Code V-UBI amount in bo 20 of Schedule K- (Form 1065	managing partner?		(k) Percentago wnership
					514)			Yes	No		Yes	No	
Part IV Identification of Related Org because it had one or more rela							nswered "Yes	s" on F	orm 9	90, Part IV	, line	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c Leg dom (state or coun	jal icile foreign	Direct co		(e) Type of entity C corp, S corp, or trust)	(f) Share of total Income	Share	(g) Share of end-of- year assets		(h) Percentage ownership		(I) ection 512(.3) controlle entity? Yes No
(1)ISACA Enterprises Inc 3701 Algonquin Rd Ste 1010 Rolling Meadows, IL 60008 81-1115397	Holding Company	country) DE		Informat Systems and Cont Associati	Audit rol		7,219,89		8,194,988		100 000 %		Yes

(1)IT GOVERNANCE INSTITUTE

(2)IT GOVERNANCE INSTITUTE

(3)ISACA Enterprises Inc

(4)ISACA Enterprises Inc

(5) ISACA Enterprises Inc

(6)ISACA Enterprises Inc

No

Yes

1i

1j

1k

11

1m

1nl 10 Yes

1r Yes

1s

Schedule R (Form 990) 2016

Method of determining amount involved

Yes

Yes 1a |

Page 3

1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? 1a **1**b

1c 1d |

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

Q

0

(b)

Transaction type (a-s)

(c)

Amount involved

128,198

79,587

258,118

407.244

890.543

7,300,000

FMV

FMV

fMV

fMV

fMV

fMV

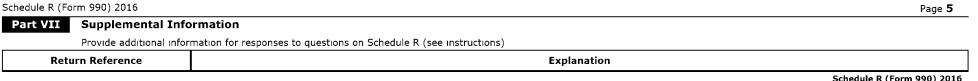
Name of related organization

Yes 1e 1f Sale of assets to related organization(s). **1**g 1h Purchase of assets from related organization(s).

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	l end-of-vear	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
			514)	Yes	No	۱ <u>۱</u>	ļ l	Yes	No		Yes	No	ļ	
								·						
										Schedul	e R (Form	1 990	0) 2016	



Additional Data

ISACA Enterprises Inc

ISACA Enterprises Inc

(4)

(5)

Software ID: Software Version: **EIN:** 23-7067291 Name: INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION INC Form 990, Schedule R, Part V - Transactions With Related Organizations (a) (b) (c) Name of related organization Transaction Amount Involved (d) Method of determining amount involved type(a-s) FMV (1) IT GOVERNANCE INSTITUTE D 128,198 FMV (1) IT GOVERNANCE INSTITUTE Q 79,587 (2) ISACA Enterprises Inc Е 258,118 fMV ISACA Enterprises Inc fMV (3) Ν 407,244

890,543

7,300,000

Q

fMV

fMV