EXTENDED TO NOVEMBER 15, 2017

Departmen of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

Do not enter social security numbers on this form as it may be made publict

Open to Public Inspection

	A F	or the 2	016 calendar year, or tax year beginning		and ending		
	Вс	neck if	C Name of organization			D Employer identifi	cation number
		phicable Address	<u>INFO</u> RMATION SYSTEMS AU			1	
:	<u></u>	change Name	CONTROL ASSOCIATION IN	C GROUP	<del></del>		
3	<u></u>	change Initial	Doing business as	<del>- ,</del>	<del></del>		919522
9		return	Number and street (or P.O. box if mail is not de	livered to street address)	Room/su		
)		Final return/ termin-	3701 ALGONQUIN RD			(847	
•		ated	City or town, state or province, country, and			G Gross receipts \$	4,533,505.
	<u></u>	Amended return		0008		H(a) Is this a group re	
		Applica- tion pending	F Name and address of principal officer ROB	ERT A MICEK		for subordinates	
		perioning	SAME AS C ABOVE	<del></del>		H(b) Are all subordinates in	ncluded? Yes X No
			pt status 501(c)(3) X 501(c) ( 6 )		a)(1) or 5		list (see instructions)
			▶ WWW.ISACA.ORG		- 1		n number ▶ 2504
1				sociation Other	<u>    L Y</u>	ear of formation;	M State of legal domicile:
١	Pa		ummary				
	ا بو		efly describe the organization's mission or most				
	ä		ACILITATE NETWORKING AND				
	ä		eck this box  if the organization disco		ispo	5% of its net as:	
	Š		imber of voting members of the governing body	· ·		3	389
	8		imber of independent voting members of the go	-	16)	4	389
	<u>ies</u>		tal number of individuals employed in calendar y	ear 2016 (Part V, line 2a)		5	700
	Activities & Governance		tal number of volunteers (estimate if necessary)			6	702
	Act		tal unrelated business revenue from Part VIII. co		EIVED	<u>7a</u>	1,861.
		b Ne	t unrelated business taxable income from Forth	990-1, line 34	<del></del> -		0.
	Ì	0 0-		- 41011.4		Prior Year 1,273,227.	Current Year
	enne	8 Cd	entributions and grants (Part VIII, lin 101) 16 1	7 NOV 1	671	2,553,571.	1,480,623.
	ven		ogram service revenue (Part VIII, line 2g)	7-17-10		3,861.	2,861,153. 3,462.
	-Š	-10Inv	restment income (Part VIII, column (A), lines 3, 4,	and MCMMAF	ŀ	158,598.	188,267.
	Ì		her revenue (Part VIII, column (A), lines 5, 6d, 8 <b>s</b> tal revenue - add lines 8 through 11 (must equal		_ }	3,989,257.	4,533,505.
			ants and similar amounts paid (Part IX, column (		۷ ا	171,570.	98,485.
	j		nefits paid to or for members (Part IX, column (A	• •	ŀ	1/1,5/0.	0.
			laries, other compensation, employee benefits (F		10)	0.	0.
	Expenses		ofessional fundraising fees (Part IX, column (A), li		' <sup>'0</sup>	<u>0.</u>	0.
	Ы		tal fundraising expenses (Part IX, column (D), line		0.	· * / // * * * * * * * * * * * * * * * *	<u> </u>
	ŭ		her expenses (Part IX, column (A), lines 11a-11d,		<u>*</u> -	3,511,971.	3,712,543.
	- {		tal expenses Add lines 13-17 (must equal Part I)			3,683,541.	3,811,028.
	- }		venue less expenses Subtract line 18 from line		<b>:</b> [시	305,716.	722,477.
•	58		Tonia roce expenses Gabrias into 10 hori mio		1	Beginning of Current Year	End of Year
	ets	<b>20</b> To	tal assets (Part X, line 16)	NOV 16 201	7 /	3,918,496.	4,675,323.
3	Assets or 1 Balances		tal liabilities (Part X, line 26)			0.	0.
,	ĔĔ		t assets or fund balances Subtract line 21 from	EDYEO O	SPC	3,918,496.	4,675,323.
ı	Pa		Signature Block		<del></del>		<del>'</del>
i	Unde	r penaltie	s of perjury, I declare that I have examined this return,	including accompanying sche	edules and state	ements, and to the best of my	knowledge and belief, it is
			nd complete Declaration of preparer (other than office				,
•			Cohe & Wich		····	011/9	/2017
;	Sign	P	Signature of officer			Date	
	Here	- 1.	ROBERT A MICEK, CFO				
			Type or print name and title				
-		Pr	rint/Type preparer's name	Preparer's signature		Date Check	PTIN
١	Paid			THOMAS LANNING	G	10/27/17 self-employ	P00851654
- 1	Ргер	rer Fi	rm's name  COHNREZNICK LLP			Firm's EIN	22-1478099
1	Use (	nly Fi	rm's address 4 BECKER FARM RO	AD			
			ROSELAND, NJ 070	58		Phone no. 97	3-228-3500
į	Мау	the IRS	discuss this return with the preparer shown about	ve? (see instructions)			X Yes No
(	3200	1 11-11-16	LHA For Paperwork Reduction Act Notice	e, see the separate instru	uctions.		Form <b>990</b> (2016)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Check of Schedule O Contains a sesponse or note to any line in the Part II  Billed, decide the ropinantation's measion  INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) CHAPTERS' MISSION IS TO SERVE BOTH INDIVIDUALS AND ENTERPRISES BY BEING A LOCAL PROVIDER OF KNOWLEDGE, CERTIFICATION EXAM REVIEW, COMMUNITY, ADVOCACY, AND EDUCATION ON SUBJECTS SUCH AS INFORMATION SYSTEMS ASSURANCE AND  DUT the cognization undertake any suprificant program services during the year which were not lested on the prior form 300 or 990-622.  If "Yes," describe these new services on Schedule O  Dut the cognization cause conducting, or make support form 300 or 990-622.  If "Yes," describe these changes on Schedule O  On the cognization cause conducting, or make support form 301 or 990-622.  If "Yes," describe these changes on Schedule O  The support of the support of the support form 301 or 990-622.  Section 5016(3) and 5016(4) cognizations are required to report the amount of grants and allocations to others, the total expenses, as described the support of the support o	Pai	rt III Statement of Program Service Accomplishments	
INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) CHAPTERS' MISSION IS TO SERVE BORH INDIVIDUALS AND ENTERPISES BY BEING A LOCAL PROVIDER OF KNOWLEDGE, CERTIFICATION EXAM REVIEW, COMMUNITY, ADVOCACY, AND EDUCATION ON SUBJECTS SUCH AS INFORMATION SYSTEMS ASSURANCE AND  Dot the organization undertake any significant program services during the year which wore not listed on the providence of the service of the service of the service of the organization crosses conducting, or make significant changes in how it conducts, any program services?  □ Yes IN No if 'Yes', describe these changes on Schedule O  Describe the organization's program service accomplishments for each of its three largest program services as measured by expenses. Section 501(S) and 501(6)(s) granizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported    Cost		Check if Schedule O contains a response or note to any line in this Part III	X
MISSION IS TO SERVE BOTH INDIVIDUALS AND ENTERPRISES BY BEING A LOCAL PROVIDER OF KNOWLEDGE, CERTIFICATION EXAM REVIEW, COMMINITY, ADVOCACY, AND EDUCATION ON SUBBECTS SUCH AS INFORMATION SYSTEMS ASSURANCE AND 20th the organization undertake any significant program services during the year which were not listed on the professor of the professor	1	,	RS'
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AND EDUCATION ON SUBJECTS SUCH AS INFORMATION SYSTEMS ASSURANCE AND  Dot the organization underside any significant program services during the year which were not listed on the prior form 990 or 990-E2?  If "Yes," describe these new services on Schedule O  Dot the organization cease conducting, or make significant changes in how it conducts, any program services?  If "Yes," describe these changes on Schedule O  If "Yes," describe these changes on Schedule O  Obschool the organization's peggram service accompliatments for each of its three largest program services, as measured by expenses.  Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and reverse, d any for seath program service peggram services and reverse, d any for seath program services as a measured by expenses.  Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and reverse, d any for seath program services, as measured by expenses.  Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and reverse day for seath of the services and allocations to others, the total expenses, and reverses and reverse day for seath of the services and allocations to others, the total expenses, and reverses and reverses.  And Committee in the program services of the seath of the services and allocations to other reports and reverses.  Section 501(c) and 501(c)			
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	<u>4e</u>	lotal program service expenses ▶	Form <b>990</b> (2016)

# INFORMATION SYSTEMS AUDIT AND Form 990 (2016) CONTROL ASSOCIATION INC GROUP Part IV Checklist of Required Schedules

94-2919522

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		1 3 2	
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_5_	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	ļ		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_	ļ	<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	]	] ]	
	Schedule D, Part III	_8_		<u>X</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for		}	
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	ļ	<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X		* *	象
	as applicable	· ·		لــــــــــــــــــــــــــــــــــــــ
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	المدا		х
h	Part VI	11a		
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11h		х
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	  -1·1c-		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	1.0		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	-	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		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	1 <u>1f</u>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			<del>-</del>
	Schedule D, Parts XI and XII	12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		_X_
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u> _
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-		Х
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		X
19	1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		
13	complete Schedule G. Part III	19	]	х
	Cultiviete Scredule St. Patt III		990 (	
		. 3,111	(	_ 5, 5/

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
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 complete	]		
	Schedule K. If "No", go to line 25a	24a		_X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	<u> </u>		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	}		
	Schedule L, Part I	25b		
26	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? If "Yes,"			
	complete Schedule L, Part II	26		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	- 1		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	- }	ļ	
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	- <del></del>	* 9 *- <del></del>	<del>\$</del>
	instructions for applicable filing thresholds, conditions, and exceptions).	<u>*</u>		لنيث
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u>X</u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	}	- 1	77
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	{	<u>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	}	- 1	v
04	contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?	_	- 1	X
20	If "Yes," complete Schedule N, Part I	31		_ <u>A</u> _
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	00	- }	Х
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	- 1	х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
<b>0</b> 4	Part V, line 1	24	}	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	300		
J	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	]	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
<b></b>	If "Yes," complete Schedule R, Part V, line 2	36	Ì	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
<b>J</b> .	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	}	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<del>~</del>		
	Note. All Form 990 filers are required to complete Schedule O	38	х	
				2016)

CONTROL ASSOCIATION INC GROUP
Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 13		,	* *
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0		, and	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	2	6	, ,
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	¥Ŷ.	47	
	filed for the calendar year ending with or within the year covered by this return 2a 0		1. 12.	´ · 、
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b_		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	%§		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			}
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country.		48A,	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	` %	V.X.	\$ 15
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		L
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			1
	were not tax deductible?	6b_		L
7	Organizations that may receive deductible contributions under section 170(c).	Ŷ,	73	\$ 3
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		ļ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b_		<b> </b>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			1
	to file Form 8282?	7c		
ď		*		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f.	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	*,	΄χ	\$ \
	sponsoring organization have excess business holdings at any time during the year?	8		ļ
9	Sponsoring organizations maintaining donor advised funds.		, ,	×
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	ís.	<b>4</b>
10	Section 501(c)(7) organizations. Enter	\$. 2 ×	検	**
a	Initiation fees and capital contributions included on Part VIII, line 12	3, "	403	3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	? X	*	* *
11	Section 501(c)(12) organizations. Enter	^. ^.	, ,	* \$
а	Gross income from members or shareholders  11a	100	\$° \$	, % %
b	Gross income from other sources (Do not net amounts due or paid to other sources against	**	\$0 \$\div \frac{\display}{2}	×,
40	amounts due or received from them)	- 3 - 3		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a ⊛		100
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	* *	'44'X	\$ \$
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40	,	**
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	.× ~	- F
L	Note. See the instructions for additional information the organization must report on Schedule O	*	3	3 3
D	Enter the amount of reserves the organization is required to maintain by the states in which the	, , ,	ser <sup>i</sup> é	" <
_	organization is licensed to issue qualified health plans  Enter the amount of receives an hand		. 4	X, ,
	Enter the amount of reserves on hand  Did the organization receive any payments for indeer tanging conjuges during the tay year?	44-	` -	X
	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		
0	ii res, nas ichieu a romi rzo to report these payments / If "No," provide an explanation in Schedule ()		990	(2016)

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to fine ba, 6b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			137
Sec	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management			X
360	tion A. Governing body and Management		T.,,	
4	Enter the number of voting members of the governing body at the end of the tax year 1a 389	- ·	Yes	No
ıa		· s ·	, `	
	If there are material differences in voting rights among members of the governing body, or if the governing	*	. / ^	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.  Enter the number of voting members included in line 1a, above, who are independent  1b 389	3	, , ,	t 30 /
ь		,	*> %	ì
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		37	
_	officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3_	<u> </u>	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_ 5		X
6	Did the organization have members or stockholders?	_6_	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	ļ
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			l
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	* ^	× `	, 4
а	The governing body?	8a	_X_	
b	Each committee with authority to act on behalf of the governing body?	8b	_X_	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes " provide the names and addresses in Schedule O.	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			<b></b>
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
þ	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			1
	and branches to ensure their operations are consistent with the organization's exempt purposes?	-10b-		
-11a-	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
_ <b>b</b> _	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	5	र १	Ke `
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	_X_	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	ſ		
	ın Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	å ·	, & %	, 4°
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	\$ 8 8 x	Ž.	, ë
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	8	4 1/8	4 3
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	* 4	4 ×	<b>∳</b> ′≱
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	ä	, 33	× .
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	**	, , ž	2 8
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) av	ailable		
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and f	ınancı	al	
-	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	ROBERT A MICEK - (847) 253-1545			
	3701 ALGONQUIN ROAD, SUITE 1010, ROLLING MEADOWS, IL 60008			
			000	

Form 990 (2016)

CONTROL ASSOCIATION INC GROUP

94-2919522

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

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

#### Section'A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors, institutional trustees; officers, key employees, highest compensated employees, and former such persons

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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other				
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) THOMAS PHELPS IV DIRECTOR	7.00	x						0.	0.	0.
(2) PRASAD KODUKULLA	7.00	<u> </u>	<u> </u>	-		-			<del></del>	<u>-</u>
DIRECTOR		X					ļ	0.	0.	0.
(3) KELLY LIN	7.00									
DIRECTOR		Х						0	0-	0 <u></u>
(4) AMANDA XU	7.00									-
DIRECTOR		Х						0.	0.	0.
(5) JONATHAN CHAN	7.00									•
(6) ANNA CARLIN	7.00	Х	-	-		-		0.	0.	0.
DIRECTOR	7.00	х	1					0.	0.	0.
(7) DAVID ALEXANDER	7.00	^		$\vdash$	-					
DIRECTOR	7.00	x						0.	0.	0.
(8) NELSON GIBBS	7.00	-								
PRESIDENT		x		х				0.	0.	0.
(9) FAUSTO FLORES	7.00									
VICE PRESIDENT		X		X				0.	0.	0.
(10) CYNTHIA LI	7.00									
TREASURER	ļ	X		X				0.	0.	0.
(11) STEVE HOLT	7.00					]		_	_	_
SECRETARY		X		X		L-		0.	0.	0.
(12) MR. MICHAEL PODEMSKI, CISA, CIS PRESIDENT	2.00	х		x				0.	_	0
(13) MS. PAMELA NIGRO, CISA, CGEIT, C	2.00	<b>-</b>	-	_		Н	_	<u></u>	0.	0.
VICE PRESIDENT	2.00	x		x				0.	0.	0.
(14) MRS. VESELA P. ZLATEVA, CISA	2.00	Ĥ	$\vdash$	-		Н	-			
SECRETARY		х		$\mathbf{x}$				0.	0.	0.
(15) MR. DAVID ALLEN BAKER, CISA	2.00	-				$\vdash$				
TREASURER		x		x	- 1			0.	0.	0.
(16) MR. NATHAN A. ANDERSON, CISA,	2.00									1
MEMBERSHIP DIRECTOR		X						0.	0.	0.
(17) MR. LAMAR BURRELL, CISA	2.00			_ ]						ě
PROGRAM DIRECTOR		Х						0.	0.	0.

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Form 990 (2016)

Form 990 (2016) CONTROL 2	ASSOCIAT	CIC	N	IN	IC	GR	lOU	JP	94-29	<u> 1195</u>	<u> </u>	Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	d Hi	ghes	st C	ompensated Employees	s (continued)			
(A)	(B)			(0	C)			(D)	(E)	Ì		(F)
Name and title	Average	,,,		Pos heck				Reportable	Reportable			mated
•	hours per	box	, unle	ss pe	rson	s bot	h an	compensation	compensation	n	amo	ount of
	week	-	icer ar	nd a d	recto	or/trus	tee)	from	from related	ľ	0	ther
	(list any	director					ı	the	organizations	<b>;</b>	comp	ensation
	hours for	1 >		ļ		ed	1	organization	(W-2/1099-MIS	(C)		m the
	related	<u> </u>	trustee	i		pensa		(W-2/1099-MISC)		ł	•	nization
	organizations below	를	onati		oloye	E 28						related
	line)	Individual	Instituti	Officer	Key employee	Highest compensated employee	Former				organ	nizations
(18) MS. GRACE ZHOU, CISM	2.00	트	<u> </u>	ō	\$	출동	E.	<del> </del>	<del></del>			
PROGRAM DIRECTOR	2.00	X		ļ			ļ	0.		0.		Λ
(19) MS. JENNIFER PANG, CISA	2.00	┢≏	┢	┢	<del> </del>		-	0.		<del></del>		0.
,	2.00	X						1 .				0
PROGRAM DIRECTOR	2 00	1			<del> </del>	⊢	-	0.		0.		0.
(20) MR. MOHSIN KHAMBATY, CISA	2.00	<b>₩</b>			1					۱ ۸		^
EVENT DIRECTOR	2 00	X	├-	├	-	-	┝	0.		0.	<del></del>	0.
(21) MS. ZHE (ALICIA) LI	2.00	٠.								ا ہ		^
EVENT DIRECTOR		X	<u> </u>	-	<u> </u>	-		0.		0.		0.
(22) MRS. ALLYSON R. ZOLLER, CISA,	2.00	<b>∤</b>										_
MEETING DIRECTOR	2 00	X	▙	<u> </u>	_	ļ		0.		0.		0.
(23) MS. DEBBIE WASEMANN, CISA	2.00	۱		ļ		ļ				_		_
MEETING DIRECTOR		X	<b> </b>	<u> </u>	_	ļ	<u> </u>	0.	···	0.		0.
(24) MS. SWATI SHANKAR IYER	2.00											_
MEETING DIRECTOR		X	_	ļ	_	<u> </u>	ļ	0.		0.		0.
(25) MR. NORMAN F. SPIELMAN, CISA	2.00	ļ	İ									_
SEMINAR DIRECTOR	<u> </u>	X	Ļ	<u> </u>		Ļ	Ļ	0.		0.		0.
(26) MR. ROBERT E. PARDON	2.00	1								_		
SEMINAR DIRECTOR	<u> </u>	X	<u>L</u> .			L		0.		0.		0.
1b Sub-total								0.		0.		0.
c_Total from continuation sheets to Part VI	I, Section A							0.		0		0
d Total (add lines 1b and 1c)	. <u>.</u>							0.		0.		0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d at	ove	e) wh	no re	eceived more than \$100,0	000 of reportable			_
compensation from the organization								<u></u>				0
										-		Yes No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	y en	nplo	yee,	, or h	highest compensated em	iployee on	L		č.
line 1a? If "Yes," complete Schedule J for s	uch individual										3	X
4 For any individual listed on line 1a, is the su									e organization	L	- 8	
and related organizations greater than \$150	0,000? If "Yes,	" co	mpl	ete S	Sche	dule	e J fo	or such individual		Ĺ	4	X
5 Did any person listed on line 1a receive or a	accrue comper	nsatı	on f	rom	any	unre	elate	ed organization or individ	ual for services	L		
rendered to the organization? If "Yes." com	nolete Schedule	e <i>J f</i> i	or si	ıch ı	oe <i>r</i> s	on					5	X
Section B. Independent Contractors												
<ol> <li>Complete this table for your five highest co</li> </ol>	mpensated ind	lepe	nde	nt co	ontra	acto	rs th	at received more than \$	100,000 of comp	ensatı	on from	n
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thın	the organization's tax ye	ear			
(A)								(B)			(C)	
Name and business	address	N	INC	3				Description of se	ervices	Cc	ompens	ation
							T	· · · <del></del>				
		_	_	_	_		T					
									T			

\$100,000 of compensation from the organization 
SEE PART VII, SECTION A CONTINUATION SHEETS

Total number of independent contractors (including but not limited to those listed above) who received more than

Form 990 (2016)

			Check if Schedule O cont	ains a response	or note to any li	ne in this Part VIII			[]
3	Ž,	\$	* * * * * * * * * * * * * * * * * * *	44	376	(A)	(B)	(C) Unrelated	(D)
1	×.	ζ.				Total revenue	Related or exempt function	business	Revenue excluded from tax under
		ξ.		<u>~</u>	<u> </u>		revenue	revenue	sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	а	F 3	1a	150 000				
Gra			Membership dues		<u>,472,023.</u>				
ţs, An			Fundraising events	1c					
<u> </u>			Related organizations	1d					
Sir.			Government grants (contributions softs asset						
e ti		Ŧ	All other contributions, gifts, gransimilar amounts not included above	1 1	8,600.	42 %			
를 한	1	_			0,600.				
Ę E	1		Noncash contributions included in lines 1  Total. Add lines 1a-1f	1a-1f \$		1,480,623.		***	*
<u>. O 19</u>	_		Total. Add lines Ta-11		Business Code	30 30		` `	<u> </u>
au .	2	а	CONFERENCES & M	EETINGS		2,414,775.		* * * *	***
Š	-	b	CHAPTER MEETING		611600	446,378.	446,378.		
Program Service Revenue		C		<del></del>		1220,3700	110,370.		
am eve		d					-		·
Pag		е							
Pr		f	All other program service rever	nue					
		<u>q</u>	Total. Add lines 2a-2f		<b>&gt;</b>	2,861,153.		> ( )	: \ .
	3		Investment income (including	dıvıdends, ınter	est, and				
			other similar amounts)	-	<b>&gt;</b>	3,462.			3,462.
	4		Income from investment of tax	exempt bond p	oroceeds >				
	5		Royalties		<u> </u>	2,000.			2,000.
				(i) Real	(ii) Personal			`	
	6		Gross rents		ļ		~ 1	. &	<b>A</b> - <b>(</b> )
			Less. rental expenses					, n	
	_		Rental income or (loss)	L	<u> </u>		<del></del>	<del></del>	- 4
			Net rental income or (loss) Gross amount from sales of	0.0				10000 40000 -	
l	,			(i) Secunties	(II) Other				
			assets other than inventory  Less cost or other basis					7 %	
			and sales expenses				* *		) **
	,		Gain or (loss)					\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	**************************************
			Net gain or (loss)		<u> </u>	**	36.	, , , ,	3 5^
	8 8		Gross income from fundraising	events (not		\$ <u>\$</u> ;	<b>*</b> }	* * * * * * * * * * * * * * * * * * * *	<b>%</b> (`\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
ug			including \$	of			\$ <b>\</b>	ر در ا	
8			contributions reported on line	1c). See					
Other Reven			Part IV, line 18	а			, <sup>(3)</sup>	, ( )	
美	ŧ	)	Less: direct expenses	b				* (	
٦,	•	>	Net income or (loss) from fundi	raising events					
	9 a		Gross income from gaming act	ivities See	1			. W	<u> </u>
			Part IV, line 19	а			, × a		
			Less direct expenses	b	L	\$ ' <u></u>	·	, » \$ %	1 1
			Net income or (loss) from gamil	-		8. 4			
	10 a		Gross sales of inventory, less re	eturns					
			and allowances	a				19"	
			Less cost of goods sold	b	L	* , , ,	<u> </u>		
ŀ			Net income or (loss) from sales		Dunin O	\$ * * * *	, 34 } 72.	×,	2 2 1
ŀ	11 a	_	Miscellaneous Revenue SPONSORSHIP REVE		Business Code 900099	129,700.	(* )	<u>Ř</u>	120 700
- 1	116		CHAPTER SOCIAL E		900099	9,125.		<del></del>	129,700.
			ADVERTISING	- 1 TIT I D	900099	1,861.		1,861.	9,125.
			All other revenue		900099	45,581.		1,001.	45,581.
			Total. Add lines 11a-11d			186,267.	*		<del>43,381.</del>
[	12		Total revenue See instructions.			4,533,505.		1,861.	189/,868.
632009	_					<u>-, -, -, -, -, -, -, -, -, -, -, -, -, -</u>	-,	-,001.	5 <b>900</b> (0046)

## Part IX Statement of Functional Expenses

Do not include amounts reported on lines bb, 8, 8, 9, and 10 of Fart VII.  1 Grafts and other assestance to demestic cognizations and domestic operations to demestic cognizations, and domestic operations.  2 Grants and other assestance to demestic cognizations and other assestance to demestic moderations. See Part IV, line 21 and domestic operations, foreign operations of current officers, directors, trustees, and key employees  3 Compression of current officers, directors, trustees, and key employees  4 Compression of current officers, directors, trustees, and key employees  5 Compression of current officers, directors, trustees, and key employees  6 Compression of current officers, directors, trustees, and key employees  9 and trustees, and key employees  9 control of the assess and wages  9 emission plan accusts and contributions (include section 401(s) and 403(s) employee contributions (include section	Seci	tion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respo			mplete column (A).	
Gailla and other assistance to domestic organizations and domestic governments. See Part IV, line 21		not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
2 Grants and other assistance to domestic individuals. See Part IV, inc 12 15,000.  3 Grants and other assistance to foreign organizations, foreign generating and the comments, and foreign individuals. See Part IV, lines 15 and 16  4 Benefits pact to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Other salaries and wages 8 Person pilla accessals and commissions (include section 401(k) and 403(k) employer contributions) 9 Other employee benefits 10 Payrolt axes 11 Fees for services (pno-employees) 2 Management 1 Legal 755. 1 Caccutting 1 Caccutting 2 Logical Part IV, line 17 1, Investment management fees 9 Other (fill in 19 amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0, 15, 183, 1 10 Office expenses 1 Office expenses on the order of the order o		<del></del>		expenses	general expenses	expenses
2 Grants and other assistance to domestic individuals. See Part IV, inc 12 15,000.  3 Grants and other assistance to foreign organizations, foreign generating and the comments, and foreign individuals. See Part IV, lines 15 and 16  4 Benefits pact to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Other salaries and wages 8 Person pilla accessals and commissions (include section 401(k) and 403(k) employer contributions) 9 Other employee benefits 10 Payrolt axes 11 Fees for services (pno-employees) 2 Management 1 Legal 755. 1 Caccutting 1 Caccutting 2 Logical Part IV, line 17 1, Investment management fees 9 Other (fill in 19 amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0, 15, 183, 1 10 Office expenses 1 Office expenses on the order of the order o	1	_				
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3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Compensation of current officers, directors, trustees, and key employees of Compensation of current officers, directors, trustees, and key employees of Compensation of current officers, directors, trustees, and key employees of Compensation of current officers, directors, trustees, and key employees of Compensation of C	2		15 000			
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A Benefits paul to or for members Compensation or during the order of forcers, directors, trustees, and key employees Compensation or funded above, to disqualried persons discribed in section 4950((1)1) and persons discribed in section 4950((1)1) and persons discribed in section 4950((3)(8))  Other senson plan accruels and contributions (include section 401(x) and 403(x) employer contributions)  Dither employee benefits Payorit taxes  I Fees for services (non-employees)  a Management b Legal C Accounting d Libbying Professional fundratising services. See Part IV, line 17 f. Investment management fees Q Other (Iff ins 11) amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)  Office expenses Office expenses I 50, 0.113. Information technology R Advertising and promotion Office expenses For any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Interest Depreci	3	S .				
A Benefits paul to or for members Compensation or during the order of forcers, directors, trustees, and key employees Compensation and unided above, to disquaffied persons discribed in section 4950(x)1(1) and episons discribed in section 401(x) and 403(x) employer contributions (include section 401(x) and 403(x) employer contributions  Difference of services (non-employees)  a Management  b Legal  755.  Accounting  d Lobbying  Professional fundratising services. See Part IV, line 17  f. Investment management fees  Professional fundrations services. See Part IV, line 17  f. Investment management fees  Outer film 11 gain and invested 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)  25 John Advertising and promotion  15 J. 183.  Advertising and promotion  15 J. 183.  150, 183.  25 John Advertising and promotion  15 J. 183.  26 Conferences, conventions, and meetings  Travel  Travel  Payments of travel or entertainment expenses for any federal, state, or local public officials  Conferences, conventions, and meetings  Travel  Depreciation, depletion, and amortization  Insurance  Other expenses. Himite expenses not covered above. (List miscellaraeous expenses not need above. (List miscellarae						
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f(1)) and persons described in se					* * * * * * * * * * * * * * * * * * * *	
trustees, and key employees Compensation not included above, to disqualifed persons (as defined under section 4550(x)(3)(8) 7 Other salanes and wages 8 Person plan accrusis and contributions (include section 401(x) and 403(x) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal C Accounting d Lobbying Professional fundrasing services. See Part IV, line 17 1_Investment management. fees. 25, 516. 25, 516. 25, 516. 25, 516. 25, 516. 25, 516. 25, 516. 25, 516. 25, 516. 25, 516. 25, 516. 25, 516. 25, 516. 26, 42, 42, 42, 42, 43, 43, 43, 43, 44, 44, 54, 54, 54, 54, 54, 54, 54, 54	-	•				** · · · · · · · · · · · · · · · · · ·
6 Compensation not included above, to disqualified persons (as defined under section 4958(r)(3)(8) 7 Other salanes and wages 8 Person pilan acruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal C Accounting d Lobbyring 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 Sch 0.) 12 Advertising and promotion 13 Office expenses 13 (Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any detrail, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 20 Depreciation, depletion, and amortization 1 Insurance 21 Depreciation, depletion, and amortization 21 Increase 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses, Items expenses in the 24e, if line 24e expenses on Schedule (I) amount, its mice 24e expenses on Sche	3	•				
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persons described in section 4958(c)(3)(B)  7 Other salanes and wages  8 Person plan accruals and contributions (include section 401(k) and 403(b) employer contributions)  Other employee benefits  10 Payroll taxes  11 Fees for services (non-employees)  a Management  b Legal  c Accounting  d Lobbying  e Professional fundrasing 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 Sch 0, 15, 183.  2d Advertising and promotion  12 Advertising and promotion  13 Office expenses  13 Office expenses  15 Royaltes  6 Cocupancy  7 Travel  18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  Interest  11 Payments to affiliates  20 Depreciation, depletion, and amortization Insurance  10 persons in the 25c column (A) amount, list line 24e expenses on Schediel 0, amount, list line 24e expense 24e expenses 24e expenses 24e expenses 24e expens	0				]	
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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 Sch 0.) 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 19 Payments to affiliates 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on School, amount expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount, list line 24e expenses on School, amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on School, amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on School amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on School amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on School amo	4	•	23,310.			
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e All other expenses 441.  Total functional expenses. Add lines 1 through 24e 3,811,028.  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined	d	EQUIP. RENTAL & MAINT.				
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Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined	25	Total functional expenses. Add lines 1 through 24e				
reported in column (B) joint costs from a combined	26		-			
		educational campaign and fundraising solicitation.				
Check here if following SOP 98-2 (ASC 958-720)						

Га	rt X	Balance Sheet			العفار
		Check if Schedule O contains a response or note to any line in this F			(B)
			(A) Beginning of year		( <b>B</b> ) End of year
	ΤÌ	Cash - non-interest-bearing	1,714,491.	1	1,438,989.
	2	Savings and temporary cash investments	2,161,070.	2	3,151,416.
	3	Pledges and grants receivable, net	272327333	3	0,202,2200
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, director	····	<b>*</b>	\$ > \$ . \$ \$ \$
	"	trustees, key employees, and highest compensated employees Con	97.67	٠,   ,	
		Part II of Schedule L	* * * * * * * * * * * * * * * * * * *	5	
	6	Loans and other receivables from other disqualified persons (as defin	ned under	<u> </u>	. / \$ 1
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and co	optributing .	3 8kc	l ÿ. Mÿ" l
		employers and sponsoring organizations of section 501(c)(9) volunta	* In the state of	Ì	
		employees' beneficiary organizations (see instr) Complete Part II of S	' <u> </u>	6	/ 1000
Assets	7	Notes and loans receivable, net	SCITE	7	
Ass	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	· · · · · ·
	10a		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<b>.</b>	
	.00	basis Complete Part VI of Schedule D 10a			
	Ь	Less: accumulated depreciation 10b	***	10c	****
	11	Investments - publicly traded securties		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	42,935.	15	84 918
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,918,496.	16	84,918. 4,675,323.
	17	Accounts payable and accrued expenses		17	2/0/0/020
	18	Grants payable		18	
	19	Deferred revenue		_19_	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	, -	21	
s	22	Loans and other payables to current and former officers, directors, tr			·
ij		key employees, highest compensated employees, and disqualified pe	ustees, ersons.		`* }
Liabilities	ŀ	Complete Part II of Schedule L		22	
Ï	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third	d l		
	1	parties, and other liabilities not included on lines 17-24) Complete Pa	art X of		
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117 (ASC 958), check here ▶		,	3 A ( ) & 1 4 k
S		complete lines 27 through 29, and lines 33 and 34.			
ဋ	27	Unrestricted net assets	3,918,496.	27	4,675,323.
ala	28	Temporarily restricted net assets		28	
<u> </u>	29	Permanently restricted net assets		29	
들		Organizations that do not follow SFAS 117 (ASC 958), check here		Ž si	
Net Assets or Fund Balances	1	and complete lines 30 through 34.		\$.3 3.8	
ets	30	Capital stock or trust principal, or current funds		30	
ŠŠ	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et/	32	Retained earnings, endowment, accumulated income, or other funds		32	<u> </u>
Z	33	Total net assets or fund balances	3,918,496.	33	4,675,323.
	34	Total liabilities and net assets/fund balances	3,918,496.	34	4,675,323.

Form **990** (2016)

•	INFORMATION SYSTEMS AUDIT AND				
Forn	1 990 (2016) CONTROL ASSOCIATION INC GROUP	_94-	2919522	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
		1 1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,533	3,5	05.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,811	L,0	28.
<b>.</b> 3	Revenue less expenses. Subtract line 2 from line 1	3	722	2,4	77.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,918	3,4	96.
5	Net unrealized gains (losses) on investments	5			
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)	34	34,350		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	1 1			
	column (B))	10	4,675	5,3	<u>23.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			,99	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Scheduli	<b>9</b> O	<u> </u>		,
2a	, and a second a seco		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a	4 3 1		
	separate basis, consolidated basis, or both			8	. :
	Separate basis Consolidated basis Both consolidated and separate basis			v	
b	Were the organization's financial statements audited by an independent accountant?		<u>26</u>		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basıs,	\ \ \ \	4	<u>}</u>
	consolidated basis, or both		(g) by	3 <sub>2</sub> ,	ž,
	Separate basis Consolidated basis Both consolidated and separate basis		4 9	*	1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audıt,	* *	**	. %
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year lexible in Sch	edule O~		پاکوسی	

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

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Form 990 (2016)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

632012 11-11-16

Act and OMB Circular A-133?

## SCHEDULE C' (Form 990 or 990-EZ)

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Department of the Treasury Internal Revenue Service

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Information about Schedule C (Form 990 or 990-EZ) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

2016

Open to Public

Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B.
- Section 527 organizations Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	01(c)(4), (5), or (6) organiza				
Name of orga		TION SYSTEMS AUD		Emp	loyer identification number
Bank I A		ASSOCIATION INC		- 1 PAT	94-2919522
Part I-A	Complete if the org	ganization is exempt und	ter section 501(c)	or is a section 527 or	ganization.
2 Political	campaign activity expendi		cal campaign activities		3
3 Voluntee	er hours for political campa	ign activities		-	
Part I-B	Complete if the org	ganization is exempt und	der section 501(c)(	(3).	
1 Enter th	e amount of any excise tax	incurred by the organization un	der section 4955	▶\$	S
2 Enter th	e amount of any excise tax	incurred by organization manage	ers under section 4955		·
3 If the or	ganization incurred a section	on 4955 tax, did it file Form 4720	) for this year?		Yes No
4a Was a c	orrection made?		•		Yes No
b If "Yes,"	describe in Part IV	•			
Part I_C	Complete if the org	janization is exempt und	ler section 501(c),	except section 501(c	:)(3).
1 Enter th	e amount directly expende	d_by_the_filing.organization_for_se	ection 527-exempt func	tion activities	)
		nization's funds contributed to o			
	function activities				-
•		Add lines 1 and 2 Enter here	and on Form 1120-POL		·
line 17b		, , , , , , , , , , , , , , , , , , , ,	and 0111 01111 11201 02		•
	filing organization file Form	1120-POL for this year?		•	Yes No
		nployer identification number (E	IN) of all section 527 no		
		tion listed, enter the amount pa			
	-	omptly and directly delivered to			·
		additional space is needed, pro			
	(a) Name	(b) Address	<del></del>		(a) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
					-

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-16

INFORMATION SYSTEMS AUDIT AND 94-2919522 Page 2 Schedule C'(Form 990 or 990 EZ) 2016 CONTROL ASSOCIATION INC GROUP Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). rf the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, A Check expenses, and share of excess lobbying expenditures) B Check ▶ if the filing organization checked box A and "limited control" provisions apply. (b) Affiliated group (a) Filing **Limits on Lobbying Expenditures** organization's totals (The term "expenditures" means amounts paid or incurred.) totals 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) **b** Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0i Subtract line 1f from line 1c. If zero or less, enter -0-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.

Lobbying Expenditures During 4-Year Averaging Period										
Calendar year (or fiscal year beginning in)	(a	) 2013-		<b>(b)</b> 20	14	(c)	2015	(d) 2	016	(e) Total
2a Lobbying nontaxable amount										
b Lobbying ceiling amount (150% of line 2a, column(e))				7/0 parties ×				**************************************		
c Total lobbying expenditures										
d Grassroots nontaxable amount					:					
e Grassroots ceiling amount (150% of line 2d, column (e))			,		, (4) (		- 44			
f Grassroots lobbying expenditures										

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990 EZ) 2016 CONTROL ASSOCIATION INC GROUP 94-29195

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

of the	ch`"Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(6	a)	(1	b)
	lobbying activity.	Yes	No	Amo	ount
	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				
b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
		<b></b>			
	Mailings to members, legislators, or the public?	<u> </u>			
	Publications, or published or broadcast statements?	<del></del>			· · · · · · · · · · · · · · · · · · ·
	Grants to other organizations for lobbying purposes?	<b></b>			
_	Direct contact with legislators, their staffs, government officials, or a legislative body?	<del></del>	ļ		
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?		A		
	Total Add lines 1c through 1i	<b> </b>	ÎKA29	~ ~	<del></del>
	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	, v.	100000		·
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	×	\$38\$\$5.x		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u> </u>			¥ ¥.
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(	5), or sec	tion	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1_1_		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	<u></u>
	Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 50	he prior year	7 3		X
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members		1	- ,	
	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	ical	ŀ		
	expenses for which the section 527(f) tax was paid).		<u> </u>		
а	Current year		2a		
b	Carryover from last year		<u>2b</u>		
C	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	cess	λ.		
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	oolitical			
1	expenditure next year?		4		
5_	Taxable amount of lobbying and political expenditures (see instructions)		5		
Part	IV Supplemental Information				
	le the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated group ctions); and Part II-B, line 1. Also, complete this part for any additional information	o list); Part II-	A, lines 1 a	nd 2 (see	
5 Part	expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  IV Supplemental Information  le the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated group)		5	nd 2 (see	

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

Grants and Governments

d States , line 21 or 22.

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

	Ŋ	ion about schedule	(Form 990) and	ts instructions is a	• Information about Schedule I (Form 990) and its instructions is at www.re dow/formood	2	
Name of the organization INFORMATION CONTROL, ASSO	က င	S AUDIT AND N INC GROTTP	-				Employer identification number
Part I General Information on Grants and Assistance	and Assistance		  -				7766167-46
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the	amount of the grants	or assistance, th	e grantees' eligibility	for the grants or ass	stance, and the selecti	00
criteria used to award the grants or assistance?  Describe in Part IV the primaryation's princed use for monitoring the use of grant for the least of the second to the se	istance?	torse to consode source					X Yes
ᇤ	Domestic Organization	zations and Domestic	Governments.	Complete if the org	anization answered "Y	'es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization  or government  (if applies	(b) EIN		rr additional space is needed ctron (d) Amount of ible) cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
IT GOVERNANCE INSTITUTE 3701 ALGONQUIN ROAD, SUITE 1010 ROLLING MEADOWS, IL 60008	95-3080691 501 (C)(3)	501 (C)(3)	37,000.	.0			ANNUAL CHAPTER CONTRIBUTION
			-				
<ul> <li>Enter total number of section 501(c)(3) and government organizations listed in the line 1 table</li> <li>Enter total number of other organizations listed in the line 1 table</li> </ul>	ind government org s listed in the line 1	janizations listed in the table	line 1 table				
LHA For Paperwork Reduction Act Notice, see the Instructions for Form	, see the Instructi	ons for Form 990.					Schedule I (Form 990) (2016)

632101 11-01-16

INFORMATION SYSTEMS AUDIT AND

94-2919522

(Form 990) (2016) CONTROL ASSOCIATION INC GROUP
Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2016)

Part III »

Schedule I (Form 990) (2016) (f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) AWARENESS OF RESEARCH PROJECTS WITHIN ISACA THROUGH A BIMONTHLY NEWSLETTER WITH ITGI'S MISSION. ISACA CHAPTERS RECEIVE REGULAR UPDATES TO MAINTAIN AN PROCESS TO SUPPORT ISACA'S RESEARCH PROJECTS THROUGH ITGI AND IS FAMILIAR Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information EACH INDIVIDUAL CHAPTER INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) CHAPTERS ARE BOARD CHOOSES TO MAKE A CONTRIBUTION THROUGH THEIR REVIEW AND APPROVAL (d) Amount of non-cash assistance Ö THE ORGANIZATION'S PROCEDURES FOR MONITORING GRANTS IN THE U.S 15,000. (c) Amount of cash grant AFFILIATED WITH IT GOVERNANCE INSTITUTE (ITGI). 0 (b) Number of recipients TO GOVERNMENTS & ORGANIZATIONS: (a) Type of grant or assistance PART I, LINE SCHOLARSHIP 632102 11-01-16

Schedule I (Form 990)

## SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

6 Open to Public

OMB No 1545-0047

Inspection

INFORMATION SYSTEMS AUDIT AND Name of the organization CONTROL ASSOCIATION INC GROUP

Employer identification number 94-2919522

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ELEVATE THE VISIBILITY OF IT GOVERNANCE, SECURITY AND AUDIT
PROFESSIONALS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SECURITY, GOVERNANCE OF ENTERPRISE OF INFORMATION TECHNOLOGY (IT), AND
IT-RELATED RISK AND COMPLIANCE.
THE ISACA CHAPTERS SUPPORT AND ENHANCE RELATIONSHIPS AMONG THE FACULTY
AND STUDENT BODIES OF LOCAL COLLEGES AND UNIVERSITIES BY PROMOTING
STUDENT MEMBERSHIP IN ISACA, NETWORKING WITH FACULTY AND STUDENTS
INTERESTED IN LEARNING MORE ABOUT THE INFORMATION SYSTEMS AUDIT AND
SECURITY PROFESSIONS, AND ENCOURAGING COMPLIANCE WITH ISACA'S
FRAMEWORK, STANDARDS AND CODE OF PROFESSIONAL ETHICS.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
COMMUNITY IS ALSO PROMOTED THROUGH THE CHAPTER WEB SITE.
FORM 990, PART VI, SECTION A, LINE 2:
3 OF 28 CHAPTERS HAVE BOARD MEMBERS WITH FAMILY RELATIONSHIPS OR BUSINESS
RELATIONSHIPS.
FORM 990, PART VI, SECTION A, LINE 4:
MOST OF THE CHAPTERS DID NOT MAKE ANY CHANGES, HOWEVER, THE FOLLOWING
CHANGES DID OCCUR:

Name of the organization INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION INC GROUP

Employer identification number 94-2919522

CENTRAL OHIO CHAPTER:

REVISED BYLAWS WERE APPROVED BY THE BOARD AND OUR CHAPTERS MEMBERS IN MAY 2016.

FORM 990, PART VI, SECTION A, LINE 6:

INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) CHAPTERS MAINTAIN

A MEMBERSHIP ROSTER OF INDIVIDUALS; THERE IS NO CORPORATE MEMBERSHIP

CATEGORY. ANYONE INTERESTED IN THE PURPOSES AND OBJECTIVES OF THE

ASSOCIATION IS ELIGIBLE FOR MEMBERSHIP. ANYONE HOLDING MEMBERSHIP IN A

CHAPTER MUST ALSO BE A MEMBER OF THE INTERNATIONAL BODY.

ISACA CHAPTERS' MEMBERSHIP IS CHARACTERIZED BY DIVERSITY. THE MEMBERS LIVE

AND WORK IN 187 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 AT MIDDLE MANAGEMENT LEVELS OR SENIOR RANKS. THEY

WORK IN FINANCE AND BANKING, PUBLIC ACCOUNTING, HOSPITALITY, HEALTHCARE,

GOVERNMENT AND THE PUBLIC SECTOR, UTILITIES, MANUFACTURING, AND RETAIL.

ISACA CHAPTER MEMBERS EMBRACE THIS DIVERSITY AS PROVIDING A VAST LEARNING

GROUND WHERE THEY MAY DELVE INTO THE CHALLENGES AND OPPORTUNITIES FACED BY

COLLEAGUES IN OTHER COUNTRIES, POSITIONS OR INDUSTRIES.

ISACA CHAPTERS RECOGNIZE THAT THEIR MEMBERS CONSTITUTE AN EXTENSIVE AND

VARIED POOL OF EXPERTISE - EXPERTISE THE CHAPTERS COUNT ON TO HELP PROVIDE

SERVICES AND PRODUCTS THAT ENGENDER CREDIBILITY AND CAPABILITY IN THEIR

CONSTITUENTS. THE MORE MEMBERS, THE MORE EXPERTISE; THE MORE EXPERTISE, THE

BETTER THE ABILITY TO MEET CONSTITUENT NEEDS. ISACA CHAPTERS' MEMBERS ARE

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Schedule O (Form 990 or 990-EZ) (2016)

Schedule O (Form 990 or 99		Page 2
Ο,	INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION INC GROUP	Employer identification number 94-2919522
		34-2313366
THEIR MOST VAL	UABLE ASSET.	
FORM 990, PART	VI, SECTION A, LINE 7A:	
MEMBERS OF CHA	PTERS HAVE THE RIGHT TO ELECT OR APPOINT MEM	BERS OF THE
		DERIO OF THE
GOVERNING BODY	OF EACH CHAPTER.	
FORM 990, PART	VI, SECTION A, LINE 7B:	
GOVERNING BODY	DECISIONS SUBJECT TO APPROVAL	
0 OF 28 TSACA	CHAPTERS ANSWERED "NO" TO LINE 7B.	
O OF ZO IDACA	CIMITERS ANSWERED NO TO BINE 75.	
THE FOLLOWING	INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIA	ATION (ISACA)
CHAPTERS ANSWE	RED "YES" TO LINE 7B:	
ATLANTA CHAPTE	р.	
- <u> </u>		
CHANGES TO BYL	AWS ARE SUBJECT TO APPROVAL BY MEMBERS.	
CENTRAL MARYLA	ND CHAPTER:	
ALL CHAPTER GO	VERNANCE DECISIONS ARE SUBMITTED BY, VOTED U	PON, AND APPROVED
BY THE BOARD	WE ALERT THE MEMBERS VIA OUR BYLAW CHANGES	OP PMATI
	WE ABERT THE MEMBERS VIA OUR BILLAW CHANGES	OK EMAIL
ANNOUNCEMENTS.		
		<del></del>
CENTRAL OHIO C	HAPTER:	······································
MEMBERS VOTE O	N BYLAWS AMENDMENTS AND ISACA DIRECTORS AND	OFFICERS.
		<u></u>
CHARLOTTE CHAP	TER:	
MEMBERS ELECT	EXECUTIVE BOARD AT AGM.	- <del></del>
CHICAGO CHAPTE	R:	
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Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION INC GROUP	Employer identification number 94-2919522
SIGNIFICANT BYLAW CHANGES ARE VOTED ON BY THE CHAPTER MEMB	BERS.
DENVER CHAPTER:	
ISACA DENVER CHAPTER MEMBERS HAVE VOTING RIGHTS ON GOVERNA	NCE DECISIONS
INCLUDING BYLAWS AND BUDGET ITEMS OVER \$1,000.	
	<del></del>
DETROIT CHAPTER:	
MEMBERS MUST VOTE ON CHANGES TO THE BYLAWS.	
GREATER HARTFORD CHAPTER:	
MEMBERS HAVE VOTING RIGHTS TO APPROVE BY-LAW CHANGES AND E	ELECTION RESULTS.
GREATER HOUSTON CHAPTER:	
MEMBERSHIP VOTE ON THE BYLAWS.	
GREATER KANSAS CITY CHAPTER:	
CHANGES TO THE CHAPTER BYLAWS ARE VOTED ON BY THE MEMBERS.	
LOS ANGELES CHAPTER:	
TO AMEND THE CHAPTER BYLAWS, THE CHAPTER BOARD MUST APPROV	E ALL BYLAW
CHANGES AND FORWARD THEM TO THE MEMBERSHIP DIVISION OF THE	ASSOCIATION WITH
CHANGES INDICATED. THE ASSOCIATION MUST APPROVE ALL BYLAW	CHANGES PRIOR TO
THEM BEING SUBMITTED FOR A VOTE BY CHAPTER MEMBERSHIP. CH	IAPTER BYLAW
AMENDMENTS WILL BE APPROVED, AT ANY CHAPTER MEETING, BY A	TWO-THIRDS (2/3)
VOTE, PROVIDED THAT THE AMENDMENT HAS BEEN SUBMITTED IN WR	ITING AT THE
PREVIOUS MEETING, OR HAS BEEN MAILED OR E-MAILED TO THE EN	TIRE CHAPTER
MEMBERSHIP AT LEAST TEN (10) DAYS PRIOR TO THE MEETING AT	WHICH IT WILL BE
CONSIDERED. THE MEMBERSHIP DIVISION OF THE ASSOCIATION WI	LL BE ADVISED

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Schedule O (Form 990 or 990-EZ) (2016)

The chapter amender of the organization of the bylaws.  That the bylaw amendments have been approved, and will be sent a copy of the approved version of the bylaws. If dissolution of the chapter becomes inevitable, these bylaws must be rescinded by a two-thirds (2/3) vote of the chapter membership after ten (10) days' notice has been mailed to each member.  Minnesota Chapter:  The elected board as chosen from the chapter's membership during its annual meeting is charged with making and managing all governance decisions on behalf of the chapter and its members.  National capital area chapter:  Membership vote on the bylaws.  New bengland chapter:  Membership vote on the bylaws and officers.  New jersey chapter:  Members approve the budget at the agm.  New york metro chapter:  Elections, and non-budgeted expenditures over 20k.	Schedule O (Form 990 or 990-EZ) (2016)	Page :
THE APPROVED VERSION OF THE BYLAWS. IF DISSOLUTION OF THE CHAPTER BECOMES INEVITABLE, THESE BYLAWS MUST BE RESCINDED BY A TWO-THIRDS (2/3) VOTE OF THE CHAPTER MEMBERSHIP AFTER TEN (10) DAYS' NOTICE HAS BEEN MAILED TO EACH MEMBER.  MINNESOTA CHAPTER: THE ELECTED BOARD AS CHOSEN FROM THE CHAPTER'S MEMBERSHIP DURING ITS ANNUAL MEETING IS CHARGED WITH MAKING AND MANAGING ALL GOVERNANCE DECISIONS ON BEHALF OF THE CHAPTER AND ITS MEMBERS.  NATIONAL CAPITAL AREA CHAPTER: MEMBERSHIP VOTE ON THE BYLAWS.  NEW ENGLAND CHAPTER: MEMBERSHIP VOTE ON THE BYLAWS AND OFFICERS.  NEW JERSEY CHAPTER: MEMBERS APPROVE THE BUDGET AT THE AGM.  NEW YORK METRO CHAPTER:	Name of the organization INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION INC GROUP	Employer identification number 94-2919522
THE APPROVED VERSION OF THE BYLAWS. IF DISSOLUTION OF THE CHAPTER BECOMES INEVITABLE, THESE BYLAWS MUST BE RESCINDED BY A TWO-THIRDS (2/3) VOTE OF THE CHAPTER MEMBERSHIP AFTER TEN (10) DAYS' NOTICE HAS BEEN MAILED TO EACH MEMBER.  MINNESOTA CHAPTER: THE ELECTED BOARD AS CHOSEN FROM THE CHAPTER'S MEMBERSHIP DURING ITS ANNUAL MEETING IS CHARGED WITH MAKING AND MANAGING ALL GOVERNANCE DECISIONS ON BEHALF OF THE CHAPTER AND ITS MEMBERS.  NATIONAL CAPITAL AREA CHAPTER: MEMBERSHIP VOTE ON THE BYLAWS.  NEW ENGLAND CHAPTER: MEMBERSHIP VOTE ON THE BYLAWS AND OFFICERS.  NEW JERSEY CHAPTER: MEMBERS APPROVE THE BUDGET AT THE AGM.  NEW YORK METRO CHAPTER:	THAT THE BYLAW AMENDMENTS HAVE BEEN APPROVED. AND WILL BE S	SENT A COPY OF
INEVITABLE, THESE BYLAWS MUST BE RESCINDED BY A TWO-THIRDS (2/3) VOTE OF THE CHAPTER MEMBERSHIP AFTER TEN (10) DAYS' NOTICE HAS BEEN MAILED TO EACH MEMBER.  MINNESOTA CHAPTER: THE ELECTED BOARD AS CHOSEN FROM THE CHAPTER'S MEMBERSHIP DURING ITS ANNUAL MEETING IS CHARGED WITH MAKING AND MANAGING ALL GOVERNANCE DECISIONS ON BEHALF OF THE CHAPTER AND ITS MEMBERS.  NATIONAL CAPITAL AREA CHAPTER: MEMBERSHIP VOTE ON THE BYLAWS.  NEW ENGLAND CHAPTER: MEMBERSHIP VOTE ON THE BYLAWS AND OFFICERS.  NEW JERSEY CHAPTER: MEMBERS APPROVE THE BUDGET AT THE AGM.  NEW YORK METRO CHAPTER:		
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MINNESOTA CHAPTER:  THE ELECTED BOARD AS CHOSEN FROM THE CHAPTER'S MEMBERSHIP DURING ITS ANNUAL MEETING IS CHARGED WITH MAKING AND MANAGING ALL GOVERNANCE DECISIONS ON BEHALF OF THE CHAPTER AND ITS MEMBERS.  NATIONAL CAPITAL AREA CHAPTER:  MEMBERSHIP VOTE ON THE BYLAWS.  NEW ENGLAND CHAPTER:  MEMBERSHIP VOTE ON THE BYLAWS AND OFFICERS.  NEW JERSEY CHAPTER:  MEMBERS APPROVE THE BUDGET AT THE AGM.	THE CHAPTER MEMBERSHIP AFTER TEN (10) DAYS' NOTICE HAS BEEN	N MAILED TO EACH
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THE ELECTED BOARD AS CHOSEN FROM THE CHAPTER'S MEMBERSHIP DURING ITS ANNUAL MEETING IS CHARGED WITH MAKING AND MANAGING ALL GOVERNANCE DECISIONS ON BEHALF OF THE CHAPTER AND ITS MEMBERS.  NATIONAL CAPITAL AREA CHAPTER:  MEMBERSHIP VOTE ON THE BYLAWS.  NEW ENGLAND CHAPTER:  MEMBERSHIP VOTE ON THE BYLAWS AND OFFICERS.  NEW JERSEY CHAPTER:  MEMBERS APPROVE THE BUDGET AT THE AGM.		
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NATIONAL CAPITAL AREA CHAPTER:  MEMBERSHIP VOTE ON THE BYLAWS.  NEW ENGLAND CHAPTER:  MEMBERSHIP VOTE ON THE BYLAWS AND OFFICERS.  NEW JERSEY CHAPTER:  MEMBERS APPROVE THE BUDGET AT THE AGM.  NEW YORK METRO CHAPTER:	MEETING IS CHARGED WITH MAKING AND MANAGING ALL GOVERNANCE	DECISIONS ON
NATIONAL CAPITAL AREA CHAPTER:  MEMBERSHIP VOTE ON THE BYLAWS.  NEW ENGLAND CHAPTER:  MEMBERSHIP VOTE ON THE BYLAWS AND OFFICERS.  NEW JERSEY CHAPTER:  MEMBERS APPROVE THE BUDGET AT THE AGM.  NEW YORK METRO CHAPTER:	BEHALF OF THE CHAPTER AND ITS MEMBERS.	
MEMBERSHIP VOTE ON THE BYLAWS.  NEW ENGLAND CHAPTER:  MEMBERSHIP VOTE ON THE BYLAWS AND OFFICERS.  NEW JERSEY CHAPTER:  MEMBERS APPROVE THE BUDGET AT THE AGM.  NEW YORK METRO CHAPTER:		
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NEW ENGLAND CHAPTER:  MEMBERSHIP VOTE ON THE BYLAWS AND OFFICERS.  NEW JERSEY CHAPTER:  MEMBERS APPROVE THE BUDGET AT THE AGM.  NEW YORK METRO CHAPTER:		<del></del>
MEMBERSHIP VOTE ON THE BYLAWS AND OFFICERS.  NEW JERSEY CHAPTER:  MEMBERS APPROVE THE BUDGET AT THE AGM.  NEW YORK METRO CHAPTER:	MEMBERSHIP VOTE ON THE BILAWS.	
MEMBERSHIP VOTE ON THE BYLAWS AND OFFICERS.  NEW JERSEY CHAPTER:  MEMBERS APPROVE THE BUDGET AT THE AGM.  NEW YORK METRO CHAPTER:		
NEW JERSEY CHAPTER:  MEMBERS APPROVE THE BUDGET AT THE AGM.  NEW YORK METRO CHAPTER:	NEW ENGLAND CHAPTER:	<del></del>
MEMBERS APPROVE THE BUDGET AT THE AGM.  NEW YORK METRO CHAPTER:	MEMBERSHIP VOTE ON THE BYLAWS AND OFFICERS.	
MEMBERS APPROVE THE BUDGET AT THE AGM.  NEW YORK METRO CHAPTER:		
NEW YORK METRO CHAPTER:	NEW JERSEY CHAPTER:	
	MEMBERS APPROVE THE BUDGET AT THE AGM.	
ELECTIONS, AND NON-BUDGETED EXPENDITURES OVER 20K.	NEW YORK METRO CHAPTER:	
	ELECTIONS, AND NON-BUDGETED EXPENDITURES OVER 20K.	
NORTH TEXAS CHAPTER:	NORTH TEXAS CHAPTER:	
MEMBERSHIP VOTE ON THE BYLAWS.		
FIBRIDANDIII VOIE ON THE BIBAND.	HINDINDITT VOID ON THE DIDAMS.	
DULI ADEL DULA GUADMED.		

ELECTION OF CHAPTER OFFICERS AND CHANGES TO BYLAWS.

Schedule O (Form 990 or 990-EZ) (2016)

Employer identification number 94-2919522

Schedule O (Form 990 or 990-EZ) (2016)

### PHOENIX CHAPTER:

MEMBERS HAVE THE FOLLOWING VOTING RIGHTS PER CHAPTER BYLAWS: BYLAW CHANGES

- AT SUCH MEETING OF THE BOARD, THE PROPOSED CHANGE TO THE BYLAWS SHALL BE

CONSIDERED AND VOTED UPON BY THE MEMBERS PRESENT. IF AT LEAST TWO-THIRDS

(2/3) OF THE BOARD VOTE IN FAVOR OF SUCH CHANGE, THE APPROVED AMENDMENT,

REPEAL OR ADDITION SHALL BE RECOMMENDED TO THE MEMBERSHIP. THESE BOARD

RECOMMENDED CHANGES SHALL BE SUBMITTED IN WRITING AT THE PREVIOUS REGULAR

CHAPTER MEETING OR BE MAILED TO THE ENTIRE CHAPTER MEMBERSHIP AT LEAST TEN

(10) DAYS PRIOR TO THE MEETING AT WHICH IT WILL BE CONSIDERED. AT THE

CHAPTER MEETING, THE BYLAWS WILL BE AMENDED BY A TWO THIRDS (2/3) VOTE.

DISSOLUTION - TO AFFECT DISSOLUTION OF THE CHAPTER, THESE BYLAWS MUST BE

RESCINDED BY A TWO-THIRDS (2/3) VOTE OF THE MEMBERSHIP AFTER TEN (10) DAYS'

NOTICE HAS BEEN MAILED TO EACH MEMBER.

### PITTSBURGH CHAPTER:

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

### PUGET SOUND CHAPTER:

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#### ARTICLE X. DISSOLUTION

TO EFFECT DISSOLUTION OF THE CHAPTER, THESE BYLAWS MUST BE RESCINDED BY A
TWO-THIRDS (2/3) VOTE OF THE CHAPTER MEMBERSHIP AFTER TEN (10) DAYS NOTICE
HAS BEEN MAILED TO EACH MEMBER. IN THE EVENT OF DISSOLUTION, THE CHAPTER
SHALL NOTIFY THE CHIEF EXECUTIVE OFFICER OF THE ASSOCIATION, IN WRITING,
INDICATING THE REASON(S) FOR DISSOLUTION AND SHALL RETURN THE CHAPTER
CHARTER AND ANY OTHER CHAPTER OR ASSOCIATION DOCUMENTS TO INTERNATIONAL
HEADQUARTERS. ALL NET ASSETS SHALL GO TO A WELFARE, EDUCATION OR CIVIC

Schedule O' (Form 990 or 990-EZ) (2016) Name of the organization INFORMATION SYSTEMS AUDIT AND **Employer identification number** CONTROL ASSOCIATION INC GROUP 94-2919522 PROJECT DESIGNATED BY THE CHAPTER MEMBERSHIP, PURSUANT TO SECTION 501\_(C) (6) OF THE US INTERNAL REVENUE CODE WITH THE APPROVAL OF THE ASSOCIATION'S INTERNATIONAL PRESIDENT AND CHIEF EXECUTIVE OFFICER. ARTICLE XII. AMENDMENT OF CHAPTER BYLAWS THE CHAPTER SHALL FORWARD ALL BYLAWS CHANGES TO THE ASSOCIATION, WITH CHANGES INDICATED, AS THE ASSOCIATION MEMBERSHIP BOARD MUST GIVE APPROVAL TO ALL BYLAWS CHANGES PRIOR TO SUBMITTING FOR VOTE BY THE CHAPTER MEMBERSHIP. THE CHAPTER BOARD SHALL CONDUCT A PERIODIC, IDEALLY ANNUAL, COMPARISON OF THE CHAPTER PRACTICES TO THE BYLAWS. THE CHAPTER BOARD MUST ENSURE THE COMPLIANCE OF THE BYLAWS WITH THE ASSOCIATION'S BYLAWS AND APPLICABLE COUNTRY REQUIREMENTS. THESE BYLAWS MAY BE AMENDED AT ANY REGULAR MEETING BY A TWO-THIRDS-(-2/3) VOTE PROVIDED THAT THE AMENDMENT HAS BEEN SUBMITTED IN WRITING AT THE PREVIOUS REGULAR MEETING, OR HAS BEEN MAILED OR EMAILED TO THE ENTIRE CHAPTER MEMBERSHIP AT LEAST TEN (10) DAYS' PRIOR TO THE MEETING AT WHICH IT WILL BE CONSIDERED. SAN FRANCISCO CHAPTER: CHANGES TO BYLAWS OR DISSOLUTION OF THE CHAPTER BY RESCINDING THE BYLAWS ARE SUBJECT TO APPROVAL BY MEMBERS. ISACA INTERNATIONAL ASSOCIATION MEMBERSHIP BOARD MUST APPROVE ALL CHANGES TO BYLAWS PRIOR TO SUBMITTING THEM FOR APPROVAL BY CHAPTER MEMBERSHIP. SC MIDLANDS CHAPTER:

SUCH CHANGES BY THE BOARD AND ALSO ON DISSOLUTION OF THE CHAPTER. CHAPTER

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Schedule O (Form 990 or 990-EZ) (2016)

THE MEMBERSHIP DOES VOTE ON ANY CHAPTER BYLAW CHANGES AFTER APPROVAL OF

Schedule O (Form 990 or 990-EZ) (2016) Name of the organization INFORMATION SYSTEMS AUDIT AND **Employer identification number** CONTROL ASSOCIATION INC GROUP 94-2919522 BYLAW AMENDMENTS WILL BE APPROVED, AT ANY CHAPTER MEETING, BY A TWO-THIRDS (2/3) VOTE. IF DISSOLUTION OF THE CHAPTER BECOMES INEVITABLE, THESE BYLAWS MUST BE RESCINDED BY A TWO-THIRDS (2/3) VOTE OF THE CHAPTER MEMBERSHIP AFTER TEN (10) DAYS' NOTICE HAS BEEN MAILED TO EACH MEMBER. THE CHAPTER MEMBERSHIP DOES NOT VOTE ON THE ANNUAL BUDGET, THIS IS THE RESPONSIBILITY OF THE CHAPTER BOARD. SILICON VALLEY CHAPTER: MEMBERS SHOULD APPROVE EXPENDITURES OUTSIDE OR EXCEEDING DOLLAR LIMITS DESCRIBED IN THE CURRENT BYLAWS OF THE APPROVED BUDGET. SOUTH FLORIDA CHAPTER: ELECTION OF CHAPTER OFFICERS AND CHANGES TO BYLAWS. VIRGINIA CHAPTER: THE CHAPTER HOLDS AN ANNUAL MEETING TO ELECT NEW MEMBERS OF THE BOARD OF DIRECTORS. WE THEN CONDUCT A VOTE OF THE MEMBERSHIP TO CONFIRM THE NEW BOARD OF DIRECTORS AS A WHOLE. WEST FLORIDA CHAPTER: CHANGES ARE SUGGESTED AND VOTED ON BY THE BOARD DURING OUR MONTHLY MEETINGS. WILLAMETTE VALLEY CHAPTER: ELECTION OF BOARD AND CHANGES TO BYLAWS ARE APPROVED BY MEMBERSHIP AT ANNUAL MEETING.

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

Schedule O (Form 990 or 990-EZ) (2016) Name of the organization INFORMATION SYSTEMS AUDIT AND Employer identification number CONTROL ASSOCIATION INC GROUP 94-2919522 THE 2016 FORM 990 FOR INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) CHAPTERS WAS PREPARED BY COHNREZNICK LLP (COHNREZNICK), BASED UPON INFORMATION PROVIDED BY ISACA AND ISACA CHAPTERS. THIS DOCUMENT SUMMARIZES THE REVIEW POINTS AND AVAILABILITY ASSOCIATED WITH THE RETURNS. THE DATA FOR THE RETURN WERE COMPILED BASED ON INFORMATION PREPARED FOR 2016, AS PROVIDED TO ISACA INTERNATIONAL HEADQUARTERS BY ISACA CHAPTERS. THIS INFORMATION WAS SUBMITTED TO COHNREZNICK FOR PREPARATION OF THE RETURNS. IN ADDITION TO THE FINANCIAL INFORMATION RECEIVED, THE NARRATIVE EXPLANATIONS OF PROGRAM ACCOMPLISHMENTS AND POLICIES PROVIDED BY ISACA CHAPTERS WERE COORDINATED WITH ISACA INFORMATION BY THE APPROPRIATE STAFF WITHIN THE MEMBERSHIP AREA. COHNREZNICK HAD AN OPPORTUNITY TO RAISE QUESTIONS ABOUT GOVERNANCE AND OTHER ISSUES, AND REQUEST ADDITIONAL INFORMATION AS NEEDED. UPON COMPLETION OF THE RETURN, SEVERAL LAYERS OF REVIEW WERE CONDUCTED: INITIAL REVIEW OF RETURN: THE INITIAL REVIEW OF THE COMPLETED RETURN WAS COMPLETED BY THE RESPECTIVE STAFF WITHIN THE FINANCE DEPARTMENT. SENIOR MANAGEMENT REVIEW: FOLLOWING THE INITIAL REVIEW, APPLICABLE MEMBERS OF THE MANAGEMENT TEAM WERE PROVIDED A COPY OF THE RETURN FOR REVIEW. AS THE RETURN REPRESENTS A GROUP RETURN FOR ALL OF THE ISACA CHAPTERS WITHIN THE UNITED STATES, THE FINAL REVIEW IS NOT REVIEWED BY ALL US CHAPTER BOARD MEMBERS. IT IS IMPORTANT TO NOTE THAT THE INFORMATION

PROVIDED BY EACH CHAPTER TO COMPLETE THE RETURN IS ATTESTED TO BY THE

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Schedule O (Form 990 or 990-EZ) (2016)  Name of the organization INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION INC GROUP	Page 2 Employer identification number 94-2919522
NEW YORK METRO CHAPTER	
NORTH TEXAS CHAPTER	
PHILADELPHIA CHAPTER	
PHOENIX CHAPTER	
PITTSBURGH CHAPTER	
PUGET SOUND CHAPTER	
SAN FRANCISCO CHAPTER	
SC MIDLANDS CHAPTER	
SILICON VALLEY CHAPTER	
SOUTH FLORIDA CHAPTER	
VIRGINIA CHAPTER	· · · · · · · · · · · · · · · · · · ·
WEST FLORIDA CHAPTER	
WILLAMETTE VALLEY CHAPTER	
FORM 990, PART VI, LINE 10A	
THE MAJORITY OF THE CHAPTERS HAVE THE SAME POLICIES AND PR	OCEDURES,
HOWEVER, SEVERAL HAVE MINOR DIFFERENCES.	
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FORM 990, PART X AND PART XI	
THE BEGINNING BALANCE SHEET FOR THE CURRENT YEAR DOES NOT	AGREE WITH
THE ENDING BALANCE SHEET FROM THE PRIOR YEAR'S FORM 990. T	
DIFFERENCE ARISES BECAUSE THE CHAPTERS WITH OVER \$50,000 I	
RECEIPTS VARY FROM YEAR TO YEAR. THE CHAPTERS INCLUDED IN	
RETURN FOR THE YEAR ENDED DECEMBER 31, 2016 ARE NOT THE SA	ME CHAPTERS
INCLUDED IN THE PRIOR YEAR TAX RETURN.	