Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service

2017
Open to Public Inspection

AI	or th	e 2017 calendar year, or tax year beginning and	ending		
B	Check if ipplicat	C Name of organization		D Employer identific	cation number
	Addre	₀ <u>Fina</u> ncial Services Roundtable			
	Name chan	pe Doing business as		36-0	753125
	initial _returr	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	·
	Final return	, 600 13th Street, NW	400	(202) 289-4322
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	22,845,334.
	Amer	ded Washington, DC 20005		H(a) Is this a group re	eturn
]Appli tion	F Name and address of principal officer Timothy Pawlenty		for subordinates	
	pend	^{ng} same as C above	,	H(b) Are all subordinates in	cluded? Yes No
	ax-ex	empt status 501(c)(3) _X 501(c) (6) ◀ (insert no.) 4947(a)(1) o	or 527	If "No," attach a	list (see instructions)
J	Nebs i	te:▶www.bpi.com	1	H(c) Group exemption	n number
		forganization: Corporation Trust X Association Other	∫ L Year	of formation: 1994 N	State of legal domicile: DC
Pá	art I	Summary	1		
ø	1	Briefly describe the organization's mission or most significant activities. Promo			
Activities & Governance		and financial services and encourages the	e deve	elopment of	sound
Ę	2	Check this box if the organization discontinued its operations or dispos	sed of more	e than 25% of its net as	
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	25
∞ ∞	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	25
es	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)		5	85
ž	6	Total number of volunteers (estimate if necessary)		6	0
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	640,717.
	b	Net unrelated business taxable income from Form 990-T, line 34		7b	578,236.
			<u> </u>	Prior Year	Current Year
ā	8	Contributions and grants (Part VIII, line 1h)		17,752.	200,000.
ĕ	9	Program service revenue (Part VIII, line 2g)		21,079,349.	21,908,143.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		42,509.	72,040.
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		224,050.	665,151.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		21,363,660.	22,845,334.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		20,000.	35,000.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>	13,149,826.	13,167,328.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	, L	0.	0.
Ϋ́		Total fundraising expenses (Part IX, column (D), line 25)	0.	- C 00	0 646 400
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	¬ ⊢	7,025,523.	8,616,190.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), (ne 25)	!	20,195,349.	21,818,518.
	19		& 등	1,168,311.	1,026,816.
ts or		ا مده د ما افا	이 L	ginning of Current Year	End of Year
Net Asset Fund Balai	20	Total labilities (Part X, line 16) Total liabilities (Part X, line 26)	E	19,443,610.	16,778,117.
nd A	21	T 1	= <u>-</u>	9,751,705.	5,640,048.
		Net assets or fund balances. Subtract line 21 from line 20 COCK Signature Block	<u> </u>	9,691,905.	11,138,069.
_	rt II		and statem	ante and to the heat of mu	knowledge and belief it is
		lities of perjury, I declare that I have examined this return, including accompanying schedules it, and complete. Decl <u>aration of preparer (ot</u> her than officer) is based on all information of wh			knowledge and beller, it is
1100,	COITE	t, and complete. Declaration of bregater (outer than officer) is based on all information of will	icii preparei	11 9	12018
Sigr		Signature of officer		Date	12010
Her		George Forsberg, Chief Financial Office	cer		
1101	•	Type or print name and title			
		Print/Type preparer's name Printarer's signature / / h		Date Check	PTIN
Paid		Nimala W Daines CD3	nec 1	1/07/18 If self-employed	P01315245
Prep	arer	Firm's name Rogers & Company PLLC	<u>1</u>	Firm's EIN	58-2676261
Use	Only	Firm's address 8300 Boone Boulevard, Suite 600			
		Vienna, VA 22182		Phone no. (70	3) 893-0300
May	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2017)

See Schedule O for Organization Mission Statement Continuation

Form 990 (2017)

Form 990 (2017) Financial Services Roundtable
Part IV Checklist of Required Schedules 36-0753125 Page 3

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Is the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 1 public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in during the tax year? If "Yes," complete Schedule C, Part II Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in during the tax year? If "Yes," complete Schedule C, Part III Is the organization as endering on 501(c)(4), 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, similar amounts as defined in Revenue Procedure 89.19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VI Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, perma endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule P, Pa			Yes	No
If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributor® Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates if public office? If "Yes," complete Schedule C, Part I Section 501(e)3 organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(6), 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part III 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 III Did the organization report an amount in Part X, line 21, for escrivor or outstodial 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 Did the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part V If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule Art V Did the organization report an amount for investments of the securities in Part X, line 10. Part X Did the organization report an amount for investments of the securities in Part X, line 10. Part X Did the organization report an amount for investments of the securities in Part X, line 10. Part X Did the organization report an amount for investmen	Г			
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1c and 8a? If "Yes," complete Schedule G, Part II		17	\dashv	
		18		Х
	⊢'	••	\dashv	
complete Schedule G. Part III	1	19	ļ	X

Form **990** (2017)

Form 990 (2017) Financial Services Roundtable Part IV | Checklist of Required Schedules (continued)

•			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
ь	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 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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
	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a		05-		
_	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
Ь	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	200		_
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member		i	
	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			'
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			37
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		$\frac{\mathbf{x}}{\mathbf{x}}$
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	$\overline{}$	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			Х
24	contributions? If "Yes," complete Schedule M	30	\dashv	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?// "Yes," complete	"		
-	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		ŀ	v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	_	x	
	Note. All Form 990 filers are required to complete Schedule O	38 <u> </u>		2017)

	Statements Regarding Other IRS Fillings and Tax Compliance			
•	Check if Schedule O contains a response or note to any line in this Part V			ᆛ
		50	Yes	No
		2 ∦		
		4	i	1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	-	<u> </u>	
0-	(gambling) winnings to prize winners?	1c	╀┻	├──
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	35		:
			<u> </u>	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	+	
3-	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
	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	\vdash
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30	 -	╁
74	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	76	 	
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	-		
5a		5a		X
b		5b	\vdash	х
С	Market and the second s	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	<u></u>	<u></u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	r? <u>7a</u>		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	$oxed{oxed}$	
¢	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c	igsquare	
d	If "Yes," indicate the number of Forms 8282 filed during the year	⊣ —	 	لـــــــــــــــــــــــــــــــــــــ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	₩	
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	┼	<u> </u>
h		? 7h	\vdash	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			-
9	Sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	8	\vdash	—
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter.	100		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	┑		
11	Section 501(c)(12) organizations. Enter:	7		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)]
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>	$\sqcup \hspace{-0.1cm} \sqcup$	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	$\sqcup \sqcup$	
_	Note. See the instructions for additional information the organization must report on Schedule O			<u> </u>
b	Enter the amount of reserves the organization is required to maintain by the states in which the			, 1
_	organization is licensed to issue qualified health plans 13b	-		, ,
	Enter the amount of reserves on hand		├─┤	X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
O	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990 ((2017)
		1 0111	JJU ((4017)

Form 990 (2017) Financial Services Roundtable 36-0753125 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 25	[1	
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	İ	ŀ	
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
_	officer, director, trustee, or key employee?	2		х
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		х
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	Х	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	<u> </u>		
	more members of the governing body?	7a	x	
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	<u> </u>		
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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)	<u> </u>		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	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	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	Х	
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			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
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)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a	Х	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	X	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶DC			
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) and 990-T (Section 501(c)(3)s only) are	ıvaılab	le	
	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	finan	cial	
	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.		_	
	Jeremy Newell - (202) 289-4322			
	600 13th Street, NW. Suite 400, Washington, DC 20005			

Form 990 (2017) 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

Check this box if neither the organization r	or any related	orga	anıza	ation	COL	mpe	nsa	ted any current officer,	director, or trustee.			
(A)	(B)	(C)						(D)	(E)	(F)		
Name and Title	Average	(do	Position to not check more than one					Reportable	Reportable	Estimated		
	hours per	box	box, unless person is both an officer and a director/trustee)					compensation	compensation	amount of		
	week	H-	Cor ar		I	J., 0 03	100,	from	from related	other .		
	(list any	recto						the	organizations	compensation		
	hours for related	9 o d	盟			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization		
	organizations	nste	記		<u>8</u>	ngdu		(44-2/1099-141130)		and related		
	below	l mag	tonal		ē,	year	_			organizations		
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former					
(1) Brian T. Moynihan	1.00											
Chairman		X	lacksquare	X	L	L	_	0.	0.	0.		
(2) Michael Tipsord	1.00		i							_		
Chairman-Elect		X		Х				0.	0.	0.		
(3) Ajaypal S. Banga	1.00	ļ								_		
Immediate-Past Chairman	1 00	X	<u> </u>	Х	_	L		0.	0.	0.		
(4) William H. Rogers, Jr. BITS Chairman	1.00	x		х				0.	0.	0.		
(5) Kessel Stelling	1.00	Ĥ	\vdash	1								
Treasurer	1.00	X		x				0.	0.	0.		
(6) Thomas J. McInerney	1.00	-			-	1	-	•				
Director		X						0.	0.	0.		
(7) Frederick H. Waddell	1.00											
Director		X						0.	0.	0.		
(8) Theodore A. Mathas	1.00								_	_		
Director		X	Ш					0.	0.	0.		
(9) Daryl G. Byrd	1.00				l					_		
Director		Х			L_			0.	0.	0.		
(10) Paul C. Reilly	1.00	.,			ŀ				0.	0		
Director	1 00	Х		_		<u> </u>		0.	<u>.</u>	0.		
(11) J. Eric Smith Director	1.00	х						0.	0.	0.		
(12) Stephen D. Steinour	1.00		-		-	 			0.			
Director	1.00	х						0.	0.	0.		
(13) Christopher B. Begy	1.00											
Director		Х						0.	0.	0.		
(14) John P. Barnes	1.00											
Director		X						0.	0.	0.		
(15) William Emerson	1.00											
Director		Х						0.	0.	<u> </u>		
(16) David I. McKay	1.00								_	_		
Director	1 00	X			<u>_</u>	<u> </u>		0.	0.	<u> </u>		
(17) Richard McKenney	1.00	х						0.	0.	0.		
Director		Δ		لبــا				<u> </u>	U•	<u> </u>		

` (A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average	(do	not c	Pos			one	Reportable	Reportable	E	ed	
	hours per	Бох	, unle	ss pe	rson i	is bot	h an	compensation	compensation	a	mount	of
	week	H	cer ar	o a d	recto	r/trus	tee)	from	from related		other	
	(list any	recto.						the	organizations		npensa	
	hours for related	<u>ē</u>	l g			ated		organization	(W-2/1099-MISC)	ı	rom th	
	organizations	nstee	trust		_ پو	gens		(W-2/1099-MISC)			ganızat ıd relat	
	below	nal 4	Pond		pto a	ig a	ا۔				anızatı	
	line)	Individual trustee or director	Institutional trustee	Officer	Key emptoyee	Highest compensated employee	Former			l ola	G, 112-GC	0110
(18) Robert L. Reynolds	1.00	╅	┢		Ť		٣					
Director		X			İ			0.	0.			0.
(19) Roger Crandall	1.00											
Director		X						0.	0.			0.
(20) Daniel J. Houston	1.00											
Director		X						0.	0.			0.
(21) Scott E. Powell	1.00											
Director		X						0.	0.			0.
(22) Margaret Keane	1.00											
Director		X						0.	0.			0.
(23) Kelly S. King	1.00]							_			_
Director		X	L					0.	0.			0.
(24) Walter White	1.00								_			
Director		Х						0.	0.			0.
(25) Thomas J. Wilson	1.00							_	_			_
Director	ļ <u></u>	X						0.	0.			0.
(26) Timothy Pawlenty	50.00]							_	_		
CEO	<u> </u>			X				3,862,364.	0.		8,8	
1b Sub-total							>	3,862,364.	0.		8,8	
c Total from continuation sheets to Part	VII, Section A						>	4,514,610.	0.		8,3	
d Total (add lines 1b and 1c)							<u> </u>	8,376,974.	0.	47	7,1	<u>79.</u>
2 Total number of individuals (including but	not limited to the	nose	liste	d at	oove	e) wr	o re	eceived more than \$100	,000 of reportable			24
compensation from the organization												31
									1	ſ	Yes	No
3 Did the organization list any former office			e, ke	y en	nplo	yee,	or I	highest compensated ei	mployee on		-	$\overline{\mathbf{x}}$.
line 1a? If "Yes," complete Schedule J for										3	\vdash	<u> </u>
4 For any individual listed on line 1a, is the	sum of reportab	le co	omp	ensa	ition	and	oth	her compensation from	the organization	-	😓 -	

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services

(A) Name and business address	(B) Description of services	(C)
	Description of services	Compensation
Barnett & Sivon, 2550 M Street, NW, 8th		
Floor, Washington, DC 20037	Consulting	521,973.
Gibson, Dunn & Crutcher LLP		
P.O Box 840723, Los Angeles, CA 90084	Consulting	241,124.
The Boston Consulting Group, Inc.		
P.O. Box 75200, Chicago, IL 60675	Consulting	225,000.
Spencer Stuart, 353 N. Clark Street, Suite		
2400, Chicago, IL 60654	Consulting	222,706.
Smith Free Group, 1401 K Street, NW, Suite		
1200, Washington, DC 20005	Consulting	132,000.
2 Total number of independent contractors (including but not limited to those liste	ed above) who received more than	

\$100,000 of compensation from the organization ► 7

See Part VII, Section A Continuation sheets

and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

rendered to the organization? If "Yes," complete Schedule J for such person

Form 990 (2017)

Financial Services Roundtable 36-0753125 Form 990 (2017) Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 Related or Unrelated Total revenue exempt function business revenue revenue 1 a Federated campaigns 1a 1b b Membership dues c Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e Contributions, and Other Sim All other contributions, gifts, grants, and 200,000 similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ 200,000 h Total. Add lines 1a-1f **Business Code** 2 a Membership dues 900099 17,224,225 17,224,225 Program Service Revenue b FinTech Ideas Festival 900099 1,611,335 1,611,335 Coalition income 900099 1,559,731 1,559,731. Meetings & conferences 900099 867,912 867,912. 900099 560,000. Corporate Social Responsibility 560,000 900099 84,940 84,940 f All other program service revenue 21,908,143 Total. Add lines 2a-2f Investment income (including dividends, interest, and 72,040. 72,040. other similar amounts) Income from investment of tax-exempt bond proceeds 18,833. 18,833. Royalties (i) Real (ii) Personal 6 a Gross rents b Less, rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c) See Part IV, line 18 Other b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities Þ 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a Net unrelated partnership income 518210 640,717 640,717 b Other income 900099 5,601 5,601 d All other revenue

e Total. Add lines 11a-11d

Total revenue. See instructions.

90.873.

640,717.

646,318.

21,913,744.

22,845,334.

Form 990 (2017) Financial Service Part IX Statement of Functional Expenses

Seci	ion 50 r(c)(5) and 50 r(c)(4) organizations must com	·		ompiete column (A)	
	Check if Schedule O contains a respor	nse or note to any line in t	this Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	35,000.			
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				L
5	Compensation of current officers, directors,				
	trustees, and key employees	6,830,634.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	4,244,355.			·
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	969,055.			
9	Other employee benefits	562,158.			
10	Payroll taxes	561,126.			
11	Fees for services (non-employees)		-		
а	Management				
b	Legal	226,774.	·		
С	Accounting	26,986.			
d	Lobbying	701,305.			
е	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 O.)	679,923.			
12	Advertising and promotion				
13	Office expenses	341,028.			
14	Information technology	160,652.			
15	Royalties				
16	Occupancy	1,364,284.			
17	Travel	192,989.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	- 0 - 5111 - 0.45			
19	Conferences, conventions, and meetings	2,711,845.			
20	Interest				
21	Payments to affiliates	205 000			
22	Depreciation, depletion, and amortization	395,089. 79,764.			
23	Other expanses Itemize expanses not severed	13,104.			
24	Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e, If line				'
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				,
_	Coalition expenditures	1,470,803.			
a b	Unrelated bus. inc. tax	264,748.			· -
C		202,7200			
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	21,818,518.			
<u> 26</u>	Joint costs. Complete this line only if the organization	=, = = = , = = =			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Pa	rt X	Balance Sheet			
•		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1			<u> </u>	I
	1	Cash - non-interest-bearing	9,827,397.	1	6,110,688.
	2	Savings and temporary cash investments	4,911,285.	2	4,950,850.
	3	Pledges and grants receivable, net	275 671	3	202 052
	4	Accounts receivable, net	275,671.	4	392,853.
	5	Loans and other receivables from current and former officers, directors,	\$ 1		
		trustees, key employees, and highest compensated employees Complete		 -	
	١.	Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under		l]
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			, [
10		employers and sponsoring organizations of section 501(c)(9) voluntary			
Assets	١,	employees' beneficiary organizations (see instr). Complete Part II of Sch L		7	
Ass	7	Notes and loans receivable, net		8	
	8	Inventories for sale or use Prepaid expenses and deferred charges	134,337.	9	59,988.
	9		131,337.	9	33,300.
	lua	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 3,323,872			ĺ
	١.	Less accumulated depreciation 10b 1,314,688		10c	2,009,184.
	11	Investments - publicly traded securities	2,015,2500	11	2,003,12010
	12	Investments - other securities See Part IV, line 11	205,182.	12	810,999.
	13	Investments · program-related See Part IV, line 11		13	020,000
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	1,740,548.	15	2,443,555.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	19,443,610.	16	16,778,117.
	17	Accounts payable and accrued expenses	4,258,733.	17	2,589,138.
	18	Grants payable		18	
	19	Deferred revenue	2,821,330.	19	18,038.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors, trustees,			
		key employees, highest compensated employees, and disqualified persons			
Liabilities	ļ	Complete Part II of Schedule L		22	
_	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			
		parties, and other liabilities not included on lines 17-24) Complete Part X of	2 671 642		3,032,872.
		Schedule D	2,671,642. 9,751,705.	25	5,640,048.
_	26	Total liabilities. Add lines 17 through 25	3,731,703.	26	3,040,040.
		Organizations that follow SFAS 117 (ASC 958), check here			
čě	27	complete lines 27 through 29, and lines 33 and 34.	9,691,905.	27	11,138,069.
lan	27 28	Unrestricted net assets	5,051,505.	28	11,130,003.
1 Ba	29	Temporarily restricted net assets Permanently restricted net assets		29	
בו	25	Organizations that do not follow SFAS 117 (ASC 958), check here		25	
r F		and complete lines 30 through 34.			
ts c	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	······································	32	
ž	33	Total net assets or fund balances	9,691,905.	33	11,138,069.
	34	Total liabilities and net assets/fund balances	19,443,610.	34	16,778,117.
			•		

Form **990** (2017)

	990 (2017) Financial Services Roundtable	36-	07531	<u> 25</u>	Pag	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					X
		i I				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	22,			
2	Total expenses (must equal Part IX, column (A), line 25)	2	21,			
3	Revenue less expenses Subtract line 2 from line 1	3				16.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				05.
5	Net unrealized gains (losses) on investments	5		112	, 6	35.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9		306	,7	13.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	11,	138	, 0	69.
Pai	rt XIII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
1	Accounting method used to prepare the Form 990		_ Г	+	es	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				لـــــا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		Li	2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	i on a				ı
	separate basis, consolidated basis, or both					Ì
	Separate basis Consolidated basis Both consolidated and separate basis		<u> </u>			<u> </u>
ь	Were the organization's financial statements audited by an independent accountant?		<u> </u>	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,				
	consolidated basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	ngle Auc	irt	[_	
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red aud	lit 🗀	T	T	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3ь		
			Fo	orm 9	90 (2017)

732012 11-28-17

SCHEDULE C (Form 990 or 990-EZ)

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. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Section 501(c)(4), (5), or (6) organizations Complete Part III.

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

Nar	ne of organization	•		Empl	loyer identification number
	Financi	al Services Roun	dtable		36-0753125
Pi	art I-A Complete if the or	ganization is exempt und	er section 501(c)	or is a section 527 o	rganization.
1 2 3	Provide a description of the organic Political campaign activity expendic Volunteer hours for political campa	tures	al campaign activities	ın Part IV ▶\$	
Pá	art I-B Complete if the org	ganization is exempt und	er section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization und	ler section 4955	▶ \$	
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	_	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
48	Was a correction made?				Yes No
	o If "Yes," describe in Part IV.				
Pá	art I-C Complete if the org	ganization is exempt und	er section 501(c),	except section 501	(c)(3).
1	Enter the amount directly expende	d by the filing organization for sec	ction 527 exempt func	tion activities > \$	
2	Enter the amount of the filing organ	nization's funds contributed to oth	ner organizations for se		
	exempt function activities			▶\$	
3	Total exempt function expenditures	s. Add lines 1 and 2 Enter here a	nd on Form 1120-POL	,	
	line 17b	4400 001 (▶\$	
4 5	Enter the names, addresses and er made payments For each organiza contributions received that were pr	mployer identification number (Elf ation listed, enter the amount paid comptly and directly delivered to a	from the filing organizes separate political org	zation's funds Also enter th anization, such as a separa	ne amount of political
	political action committee (PAC) If	additional space is needed, provi	de information in Part	1V.	
	(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) 2017

Part II-A Complete if the org					election under
section 501(h)).	_				
A Check ► L if the filing organization	ation belongs to an aff	filiated group (and list i	n Part IV each affiliated	group member's na	me, address, EIN,
expenses, and sha	are of excess lobbying	expenditures).			
B Check ▶ ☐ If the filing organize	ation checked box A a	ind "limited control" pr	ovisions apply		
	its on Lobbying Expe	enditures unts paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to inf	luence public opinion	(grass roots lobbying)			
b Total lobbying expenditures to infi				•	
c Total lobbying expenditures (add	-	e, (ee.,e.,e,			
d Other exempt purpose expenditui	•				
e Total exempt purpose expenditure		d)			
f Lobbying nontaxable amount Ent	·	•	th columns	, ,	
If the amount on line 1e, column (a)		obying nontaxable am			· · · · · · · · · · · · · · · · · · ·
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,00		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,5		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17		00 plus 5% of the exce			
Over \$17,000,000	\$1,000,		σος στοι φτιμοσιμοσο	•	ì
0.000,000	1 41,000,				
g Grassroots nontaxable amount (er	nter 25% of line 10			-	<u> </u>
h Subtract line 1g from line 1a If zer	· · · · · · · · · · · · · · · · · · ·		ļ		-
i Subtract line 1f from line 1c If zero					
j If there is an amount other than ze	•	line 1. did the organiz	ration file Form 4720		
reporting section 4911 tax for this		and the did and organia			Yes No
	4-Year Av hat made a section 5 See the separ	ate instructions for li	have to complete all ones 2a through 2f.)	of the five columns	
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
4 Crossveets labely und avmanditures					

Schedule C (Form 990 or 990-EZ) 2017 Financial Services Roundtable 36-075312 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(t)
	e 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 Volunteers?				,
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6).	on 501(c)	(5), or se	ection	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from t	ne prior veai	? 3		X
1 2	answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	cal	1	17,224	, 225.
2	Current year		2a	5.031	,824.
	Carryover from last year			<5,683	
c			2c		,777.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		,255.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5	<5,806	,032.
Par	t IV Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group	list), Part II	A, lines 1 a	nd 2 (see	
	actions), and Part II-B, line 1 Also, complete this part for any additional information cm 990, Schedule C, Part III-B, Line 2b				
Thi	s line represents the cumulative excess of amounts	commu	nicat	ed as	
nor	ndeductible to dues paying members over lobbying ex	pendit	ures.		
			_		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 **Open to Public** Inspection

Name of the organization

Financial Services Roundtable

Employer identification number 36-0753125

Schedule D (Form 990) 2017

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts.Complete if the			
	organization answered "Yes" on Form 990, Part IV, Iir	ne 6	·			
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)		,			
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fu	nds			
	are the organization's property, subject to the organization's	_	Yes No			
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be used	only			
	for charitable purposes and not for the benefit of the donor of		•			
	impermissible private benefit?		Yes No			
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, Part I	/, line 7.			
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)				
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a historical	y important land area			
	Protection of natural habitat	Preservation of a certified h	nistoric structure			
	Preservation of open space		•			
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a c	onservation easement on the last			
	day of the tax year.		Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c			
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structure				
	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the orga	nization during the tax			
	year ▶					
4	Number of states where property subject to conservation ea	sement is located >				
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements i	t holds?	Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conservat	ion easements during the year			
						
7	Amount of expenses incurred in monitoring, inspecting, hand	iling of violations, and enforcing conservation e	asements during the year			
	▶ \$					
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)(B)(ı)			
	and section 170(h)(4)(B)(ii)?		└── Yes └── No			
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense state	ment, and balance sheet, and			
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for					
Б-	conservation easements					
Pai	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.					
	Complete if the organization answered "Yes" on Form					
1a	If the organization elected, as permitted under SFAS 116 (AS	•	· ·			
	historical treasures, or other similar assets held for public exh		f public service, provide, in Part XIII,			
	the text of the footnote to its financial statements that descri					
Ь	If the organization elected, as permitted under SFAS 116 (AS					
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of public se	ervice, provide the following amounts			
	relating to these items.					
	(i) Revenue included on Form 990, Part VIII, line 1		► \$ ► \$			
_	(ii) Assets included in Form 990, Part X		▶ \$			
2	If the organization received or held works of art, historical tre		provide			
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items				
а	Revenue included on Form 990, Part VIII, line 1		\$			
b	Assets included in Form 990, Part X		▶ \$			

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		al Service							53125	
Pa	rt III Organizations Maintaining (Collections of A	rt, His	torical Tr	easures,	or Oth	<u>er Simil</u>	ar Asse	ts(continu	ied)
3,	Using the organization's acquisition, access	ion, and other record	ds, ched	ck any of the	following th	at are a s	ignificant	use of its	collection	items
	(check all that apply)									
а	Public exhibition	(, <u> </u>	Loan or exc	hange prog	rams				
b	Scholarly research	•	• 🗀	Other						
С	Preservation for future generations								_	
4	Provide a description of the organization's c	ollections and expla	ın how t	hey further t	he organizat	tion's exe	mpt purp	ose in Pai	t XIII	
5	During the year, did the organization solicit of	or receive donations	of art, h	nstorical trea	sures, or oth	ner sımıla	r assets	_	_	
	to be sold to raise funds rather than to be m	aintained as part of	the orga	anization's co	ollection?				Yes	□ No
Pa	rt IV Escrow and Custodial Arran	igements. Compl	ete ıf th	e organizatio	n answered	"Yes" on	Form 990	D, Part IV,	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	lian or other interme	diary for	contribution	ns or other a	ssets not	included		_	
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or c	ustodial acc	ount liabi	lity?		」Yes	U No
	If "Yes," explain the arrangement in Part XIII									<u> </u>
Pa	rt V Endowment Funds. Complete	if the organization ar	nswered	l "Yes" on Fo	orm 990, Par	t IV, line	10			
		(a) Current year	(b) [Prior year	(c) Two yea	rs back	(d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions		ļ							
С	Net investment earnings, gains, and losses		ļ						ļ	
d	Grants or scholarships		ļ							
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g										
2										
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	•								
За	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	nd administ	ered for ti	he organiz	zation		
	by								$\overline{}$	es No
	(i) unrelated organizations								3a(i)	_
	(ii) related organizations								3a(ii)	
_	If "Yes" on line 3a(ii), are the related organiza								3b	
4	Describe in Part XIII the intended uses of the		owment	funds.						
Fai	t VI Land, Buildings, and Equipm		0.0-4.0	V 1) - 00	0 D-4 V	h 40			
	Complete if the organization answere			1						
	Description of property	(a) Cost or o		1 ''	or other		ccumulate	ia	(d) Book v	/alue
		basis (investr	nent)	Dasis	(other)	uer	preciation			
	Land			-						
	Buildings	<u> </u>		2 15	6,572.		333,8	/ 1	1 622	731
	Leasehold improvements				$\frac{6,372}{7,300}$.		180,8		$\frac{1,622}{386}$, /31. , 453.
d	Equipment			00	7,300.	ļ -	200,00	= / •	300	, 433.
	Other		V ==!	<u> </u>	0-1	_		_	2,009	101
iotal	. Add lines 1a through 1e (Column (d) must e	quai ror <u>m 9</u> 90, Part	x, colui	חח (ש), Ilne 1	UC)				4,003	<u>, 104 </u>

Schedule Q (Form 990) 2017 Financial S	ervices Rou	ndtable	36-0753125 _{Page}
Part VII Investments - Other Securities.	5 000 P-+ W	lung 14h Cap Farry 000 Bart V l	
Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value		Cost or end-of-year market value
(1) Financial derivatives	(0) 20011 14:00	(e) member of releases	- Talabar year marrier value
(2) Closely-held equity interests			
(3) Other			
(A)			· · · · · · · · · · · · · · · · · · ·
(B)			
(C)			
(D)			
(E)			,-
(F)			·-
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶			•
Part VIII Investments - Program Related.		•	
Complete if the organization answered "Yes"	on Form 990. Part IV.	line 11c See Form 990. Part X. lii	ne 13.
(a) Description of investment	(b) Book value		Cost or end-of-year market value
(1)			•
(2)	***		
(3)			
(4)			
(5)			,
(6)			
(7)			
(8)	 		
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			•
Part IX Other Assets.		· -	
Complete if the organization answered "Yes"		ine 11d See Form 990, Part X, Iii	
	Description		(b) Book value
(1) Deposits			219,525
(2) Assets held under deferred	d compensat	ion plan	725,452
(3) Prepaid pension asset			1,498,578
(5)			
(6)			
(7)			
(8)			
(9)		· · · · · · · · · · · · · · · · · · ·	2 443 555
otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.	9 15)		▶ 2,443,555
	F 000 B+ 0/ I	44 446 O	us V. Ivo - OS
Complete if the organization answered "Yes" ((a) Description of liability	on Form 990, Part IV, I	(b) Book value	irt X, line 25
<u>' </u>		203,267.	·
(1) Federal income taxes (2) Refundable advances		211,723.	
(3) Deferred rent		1,830,949.	
(4) Deferred compensation lial	hilities	725,452.	
INI PETETTEM COMPENSACTOR TTAI	U	143,4341	

1. (a) Description of liability	(b) Book value	•
(1) Federal income taxes	203,267.	
(2) Refundable advances	211,723.	
(3) Deferred rent	1,830,949.	
(4) Deferred compensation liabili	ties 725,452.	•
(5) State income tax payable	61,481.	•
(6)		
		•
(8)		·
(9)		•
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 3,032,872.	·

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

24

732054 10-09-17

Schedule D (Form 990) 2017

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Open to Public

OMB No 1545-0047

Inspection

▶ Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Employer identification number	36-0753125

Financial	Services	Roundtable					36-0753125
Part I General Information on Grants and Assistance	and Assistance						
1 Does the organization maintain records to substantiate the amount	to substantiate th	e amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	i
critena used to award the grants or assistance?	istance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for moni	toring the use of grant	funds in the United	d States			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Domestic Organ	izations and Domesti	c Governments. C	omplete if the org	anization answered "	res" on Form 990, Part	t IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	\$5,000. Part II car	be duplicated if addit	ional space is need	ded.			
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Americans for Tax Reform			i				Research and publication
722 12th Street NW, 4th Floor Washington, DC 20005	52-1403587	501(c)(4)	35,000.	0	n/a	n/a	on how best to reform America's tax code.
	and government or	፬	ns listed in the line 1 table				0
3 Enter total number of other organizations listed in the line 1 table	is listed in the line						1.
LHA For Paperwork Reduction Act Notice, see the Instructions for	e, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2017)

Page 2 (f) Description of noncash assistance 36-0753125 (e) Method of valuation (book, FMV, appraisal, other) Part IV | Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b), and any other additional information Roundtable management attend monthly meetings with other stakeholders to attended policy forums with senior members of congress they've hosted to 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 Roundtable management also (d) Amount of non-cash assistance (c) Amount of cash grant Financial Services Roundtable monitor progress and share its perspective. (b) Number of recipients (a) Type of grant or assistance discuss these issues. Part I, Line 2: Schedule I (Form 990) (2017) Part III

Schedule I (Form 990) (2017)

SCHEDULE J (Form 990)

Part I

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Questions Regarding Compensation

Financial Services Roundtable

Employer identification number 36-0753125

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			1
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			l
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III			
	X Compensation committee X Written employment contract			
	Independent compensation consultant			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			'
	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			'
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		1	
	contingent on the revenues of		<u>—</u> l	
а	The organization?	5a		
þ	Any related organization?	5b		
	If "Yes" on line 5a or 5b, describe in Part III			1
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of.			نـــ
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	ļ	-
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	ınıtıal contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958.6(c)?	a l		

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

Schedule J (Form 990) 2017

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2017

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of	W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)·(J)(B)	ın column (B) reported as deferred on prior Form 990
(1) Timothy Pawlenty	Θ	1,810,558.	2,050,000.	1,806.	37,800.	1,078.	3,901,242.	0
СЕО	(ii)	ı		0	0	0	0	0
(2) John Dalton	Ξ	443,644.	360,000.	0	37,800.	0	841,444.	0
President, HPC	(ii)					0	0	0
	(i)	429,652.	390,00	2,77	37,800.	29,223.	889,447.	0
President, BITS	(ii)			0	1	0	0	0
(4) Eric Hoplin	Θ	329,72	240,00	378.	37,80	2,506.	610,41	0
Executive Director, FSR	(ii)			0		0		0
(5) Eric Selk	(i)	218,94	15,00	96	32,979.	6,725.	274,61	0
Executive Director, Hope Now	(ii)			0	0	0	0	0
(6) Ed Demarco	(i)	233,834.	75,00	210.	0	4,438.	313,482.	0
President, HPC	(ii)				0	0	0	0
(7) Paul Leonard	Ξ	355,832.	70,00	2,772.	37,800.	36,346.	502,75	0
VP of Government Affairs	(ii)			0		0	0	0
(8) Kevin Foster	(:)	293,068.	85,000.	996	37,800.	9,730.	426,564.	0
VP and Sr. Counsel	(ii)			0	0	0		0
(9) Anthony Cimino	Ξ	270,698.	150,00	336.	36,600.	8,183.	465,817.	0
VP of Government Affairs	(ii)			0.		0	ı	0
(10) Francis Creighton	(i)	107,709.	163,62	0	27,570.	0	298,904.	0
EVP of Government Affairs	(iı)					0	0	0
(11) Jason Kratovil	(i)	244,104.	30,000.	378.	36,594.	18,407.	329,483.	0
VP of Government Affairs ,	(ii)	0	0 •	0.	0	0	0	0
	Ξ							
	(1)							
	Ξ							
	(ii)							
	(i)							
	(ii)							
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 Open to Public Inspection

► Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Financial Services Roundtable

Employer identification number 36-0753125

Form 990, Part I, Line 1, Description of Organization Mission: banking and financial policies and practices. Form 990, Part VI, Section A, line 6: The Roundtable's membership is reserved for for-profit companies delivering integrated financial services within the United States. The Roundtable's Nominating Committee, comprised of representatives of the membership, has the authority to nominate Board members for election. Form 990, Part VI, Section A, line 7a: The Roundtable's directors are elected by the membership. Form 990, Part VI, Section A, line 7b: Any amendments to the Roundtable's Bylaws are required to be approved by the membership. Form 990, Part VI, Section B, line 11b: The 990 is prepared by the Roundtable's outside auditors. It is then reviewed by the CFO and the CEO and a draft is circulated to the Board of Directors prior to filing. Form 990, Part VI, Section B, Line 12c: The conflict of interest policy is distributed to directors, officers, executive employees, and key employees for self-disclosure. It must be signed and returned to the organization, where it is kept on file.

Individuals are required to report any conflicts to the Board, which will

Book to tax (K-1)

Total to Form 990, Part XI, Line 9

-41,674.

306,713.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990.

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OMB No 1545-0047

Go to www.irs.gov/Form990 for instructions and the latest information.

Services Roundtable

Financial

Name of the organization Department of the Treasury Internal Revenue Service

Employer identification number 36-0753125 Open to Public Inspection

Schedule R (Form 990) 2017 N (g) Section 512(b)(13) controlled entity? Direct controlling Yes × Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. ε Direct controlling Roundable inancial ervices End-of-year assets <u>e</u> status (if section Public charity 501(c)(3)) Total income Exempt Code ਉ section Political Action Committee District of Columbia 527 Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or Legal domicile (state or foreign country) foreign country) Primary activity Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. 53-0242039, 600 13th Street, NW, Suite 400, Name, address, and EIN (if applicable) Financial Services Roundtable PAC Name, address, and EIN of related organization of disregarded entity DC 20005 Washington, Part I Part II

Page 2

Schedule R (Form 990) 2017 Financial Services Roundtable

Schedule R (Form 990) 2017 Financial Services Roundtable

Part III] Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year

(a)	(q)	(0)	(P)	9)	(e)	((6)	ε	_	8	9	(E)	.
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entry	Predominant income (related, unrelated, excluded from tax under sections 512-514)		Share of total income	Share of end-of-year assets	Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	General or Percentage managing ownership partner?	age hip
fTLD Registry Services LLC - 45-4083790, 1120 Connecticut i Avenue, NW, Washington, DC 20036	Operate financial services TLDs to promote		n/a	Unrelated	TO TO	647,491.	940,656			N/A	×	33.33	33 %
									<u> </u>				
Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year	ganizations Taxable a	is a Corpo g the tax y	ration or Trust. Co	omplete if the	e organization	answered "Yes	" on Form 990	Part IV, I	ne 34, b	ecause it had	one or	more relate	_B
(a) Name, address, and EIN of related organization	N. c.	Primis	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp., S corp, or trust)		(f) Share of total income	end sy	Share of Pe end-of-year or assets	(h) Percentage ownership	Sect Sect Confinential Sect Co	No.
													1
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732162 09-11-17	See Part VII	for	Continuations	33					ļ	Schedu	le R (Fo	Schedule R (Form 990) 2017	14

See Part VII for Continuations

Schedule R (Form 990) 2017 Financial Services Roundtable

Tarty I maisdeanns with related of gameanous, complete in the organization answered they only only, line of, 500, or 50		ŀ	
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	Yes	_	ş
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ed in Parts II-IV?	\dashv	ا_
Receipt of (i) interest, (ii) annutties, (iii) royalties, or (iv) rent from a controlled entity	19	-	×
Gift, grant, or capital contribution to related organization(s)	-tp	H	×
Gift grant, or capital contribution from related organization(s)	2		×
l pans or loan quarantees to or for related organization(s)	10		×
		ť	×
Loans or loan guarantees by related organization(s)	9	+	- ا
	1=	1	×
	91	Ë	×
	무	<u> </u>	×
	Ę		×
Lease of facilities, equipment, or other assets to related organization(s)	[1]		×
(-)	100	1	\neg *
Lease of identifies, equipment, of outer assets from related organization (s) Deformance of exercises or membership or fundament relations for related exercises (s)	¥ 7	+	: ×
renormance of services of members up of minaraising solicitations for related organization(s)	= 1.	+	; ,
m Performance of services or membership or fundraising solicitations by related organization(s)	+	+	4
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1 V	┥	-
Sharing of paid employees with related organization(s)	10		×
		<u>i</u>	٦
Reimbursement paid to related organization(s) for expenses	4	<u>'</u>	×
Reimbursement paid by related organization(s) for expenses	X 10 X	×	
		\vdash	
Other transfer of cash or property to related organization(s)	-		×
Other transfer of cash or property from related organization(s)	15	. 1	×
If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	ed relationships and transaction thresholds		
(a) (b) (c) (c) Amount involved type (a·s)	(d) Method of determining amount involved		
34	Schedule R (Form 990	990) 2	<u>8</u>
34		chedule R (Form	Schedule R (Form 990) 2017

Schedule R (Form 990) 2017 Financial Services Roundtable

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

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

	(4)		Common parameters	6)	[3]	3	9	9	13
(a)	· ·	<u>.</u>	6		6)	<u> </u>	3	3	(X)
Name, address, and EIN	Primary activity	Legal domicile	(related, unrelated, 501(c)(3)	Share of	Share of	Oispropor- tionate	amount in box 20	General or managing	Percentage
6		country)	excluded from tax under sections 512-514)	-	assets	Apr No	of Schedule K-1 (Form 1065)	yes NO	diusiauno
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Schedule R (Form 990) 2017

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Part \		plemental Ir										
	Provi	de additional inf	ormation for res	pons	es to questions	on Schedule R See	instruct	ions				
Part	III,	Identif	ication	of	Related	Organizat	ions	Tax	able	as	Partner	rship:
			·									
Name	of R	elated O	rganizat	ioı	n:							
											•	
TTLD	Regi	stry Ser	vices LL	<u>C</u>								
Prim	ary A	ctivity:	Operate	f:	inancial	services	TLDs	to	promo	ote	safety	and
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