

For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form **990** (2017)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:

TO INCREASE THE VALUE AND PROMOTE THE INTEGRITY OF THE CPA PROFESSION, CONTRIBUTE TO THE SUCCESS OF OUR MEMBERS, AND STRENGTHEN CLIENT, EMPLOYER, PUBLIC AND GOVERNMENT TRUST IN CALCPA MEMBER ADVICE, WORK, PRODUCTS, AND OPINIONS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data




















4b (Code) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	No
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> 	3	No
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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i> 	5 Yes	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 	8	No
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? <i>If "Yes," complete Schedule D, Part IV</i> 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> 	11d Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions) 	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> 	19	No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	Yes	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	Yes	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	34	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	67	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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?	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	Yes	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	91	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b	Enter the number of voting members included in line 1a, above, who are independent	91	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
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	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
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	Yes
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
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	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	No
	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	No
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	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed: CA

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records.
 ▶NATALIE QUAN 1710 GILBRETH ROAD BURLINGAME, CA 94010 (650) 522-3021

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

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

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[illegible]

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 22

Section B. Independent Contractors

(A)	(B)	(C)
Name and business address	Description of services	Compensation
F2 DESIGN LLC	INTERIOR DESIGN	125,932
PO BOX 3256 BOSTON, MA 022413256		

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Part VIII **Statement of Revenue**

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

Contributions, Gifts, Grants
and Other Similar Amounts

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a Federated campaigns . . .	1a				
b Membership dues . . .	1b				
c Fundraising events . . .	1c	204,640			
d Related organizations	1d				
e Government grants (contributions)	1e				
f All other contributions, gifts, grants, and similar amounts not included above	1f	136,691			
g Noncash contributions included in lines 1a-1f \$ _____					
h Total. Add lines 1a-1f ▶		341,331			

Program Service Revenue

	Business Code				
2a MEMBERSHIP DUES	900099	8,836,805	8,836,805		
b PEER REVIEW FEES	900099	1,280,188	1,280,188		
c RENTAL INCOME FROM AFFILIATES	532000	1,174,389	1,174,389		
d PUBLICATIONS	541800	557,676	375	557,301	
e NON-QUALIFIED SPONSORSHIPS	900099	256,400		256,400	
f All other program service revenue		167,798	167,798		
g Total. Add lines 2a-2f ▶		12,273,256			

Other Revenue

3 Investment income (including dividends, interest, and other similar amounts) ▶		273,433			273,433
4 Income from investment of tax-exempt bond proceeds ▶					
5 Royalties ▶		27,464			27,464
6a Gross rents	(i) Real	(ii) Personal			
	246,547				
b Less rental expenses	143,002				
c Rental income or (loss)	103,545				
d Net rental income or (loss) ▶		103,545			103,545
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	818,658	62,441			
b Less cost or other basis and sales expenses	776,850	10,707			
c Gain or (loss)	41,808	51,734			
d Net gain or (loss) ▶		93,542			93,542
8a Gross income from fundraising events (not including \$ 204,640 of contributions reported on line 1c) See Part IV, line 18 a		480,522			
b Less direct expenses b		450,341			
c Net income or (loss) from fundraising events ▶		30,181			30,181
9a Gross income from gaming activities See Part IV, line 19 a		3,769			
b Less direct expenses b		231			
c Net income or (loss) from gaming activities ▶		3,538			3,538
10a Gross sales of inventory, less returns and allowances a					
b Less cost of goods sold b					
c Net income or (loss) from sales of inventory ▶					
Miscellaneous Revenue	Business Code				
11a AFFILIATIONS FEES	900099	653,563			653,563
b AFFINITY PROGRAM	900999	116,505			116,505
c MAILING LISTS	900999	3,710		3,710	
d All other revenue					
e Total. Add lines 11a-11d ▶		773,778			
12 Total revenue. See Instructions ▶		13,920,068	11,459,555	817,411	1,301,771

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	365,124			
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	748,476			
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.	4,456,935			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	245,038			
9 Other employee benefits.	775,054			
10 Payroll taxes.	445,385			
11 Fees for services (non-employees):				
a Management.				
b Legal.	12,977			
c Accounting.	111,500			
d Lobbying.	80,000			
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	16,813			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	549,448			
12 Advertising and promotion.	195,295			
13 Office expenses.	655,750			
14 Information technology.	565,833			
15 Royalties.				
16 Occupancy.	1,402,377			
17 Travel.	208,070			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	1,530,989			
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	943,717			
23 Insurance.	137,176			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a PRINTING/PUBLICATION	533,178			
b LOSS ON SUBLEASE	509,633			
c FREE COURSE FOR MEMBERS	397,311			
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e.	14,886,079			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		18,095	1	27,819
	2	Savings and temporary cash investments		4,211,947	2	2,145,827
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		176,782	4	158,617
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		947,936	9	874,704
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	21,028,539		
	b	Less: accumulated depreciation	10b	2,053,984		
				20,079,016	10c	18,974,555
	11	Investments—publicly traded securities		5,252,074	11	5,547,579
	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		2,586,071	15	2,011,513	
16	Total assets. Add lines 1 through 15 (must equal line 34)		33,271,921	16	29,740,614	
Liabilities	17	Accounts payable and accrued expenses		2,264,200	17	1,416,993
	18	Grants payable			18	
	19	Deferred revenue		6,250,024	19	5,427,450
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			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 Schedule D		2,652,592	25	1,800,259
	26	Total liabilities. Add lines 17 through 25		11,166,816	26	8,644,702
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		22,105,105	27	21,095,912
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
33	Total net assets or fund balances		22,105,105	33	21,095,912	
34	Total liabilities and net assets/fund balances		33,271,921	34	29,740,614	

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	13,920,068
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,886,079
3	Revenue less expenses Subtract line 2 from line 1	3	-966,011
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	22,105,105
5	Net unrealized gains (losses) on investments	5	19,318
6	Donated services and use of facilities	6	-62,500
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	21,095,912

Part XII Financial Statements and ReportingCheck 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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:
Software Version:
EIN: 94-1056137
Name: CALIFORNIA SOCIETY OF CERTIFIED
PUBLIC ACCOUNTANTS

Form 990 (2017)

Form 990, Part III, Line 4a:

MEMBERSHIP SERVICES AND CHAPTER PROGRAMS - CALCPA REPRESENTS AND PROVIDES SERVICES TO CPAS AND FINANCE PROFESSIONALS IN CALIFORNIA STATEWIDE COMMITTEES AND LEADERSHIP GROUPS COLLABORATE ON PROJECTS THAT INCREASE MEMBERS' TECHNICAL KNOWLEDGE, ENHANCE THE PROFESSION'S IMAGE, INFLUENCE REGULATION AND LEGISLATION, ATTRACT THE BEST AND THE BRIGHTEST TO THE PROFESSION, AND STUDY THE CPA'S ROLE IN LOCAL, NATIONAL, AND GLOBAL ECONOMIES CALCPA HAS MORE THAN 40,000 MEMBERS WITH 14 CHAPTERS THROUGHOUT THE STATE, EACH OF WHICH HOSTS LOCAL AND CHAPTER-WIDE MEMBER GROUPS THAT MEET REGULARLY TO EXCHANGE PROFESSIONAL KNOWLEDGE, EARN LOW-COST CPE AND CONNECT WITH THEIR PEERS THE CHAPTERS HELD ABOUT 650 MEETINGS AND EVENTS FOR THIS FISCAL YEAR AND OVER 30 FUNDRAISING EVENTS NET PROCEEDS FROM THESE FUNDRAISING EVENTS WERE TRANSFERRED TO THE CALCPA INSTITUTE TO BENEFIT THE CHAPTERS' SCHOLARSHIP FUNDS

Form 990, Part III, Line 4b:

COMMUNICATIONS - CALCPA COMMUNICATIONS INCLUDE PRINT AND ELECTRONIC PUBLICATIONS DESIGNED TO KEEP MEMBERS INFORMED. CALCPA PRODUCED 10 ISSUES OF ITS CALIFORNIA CPA MAGAZINE (PRINT AND DIGITAL) AND ONE ISSUE OF TBRG (TECHNOLOGY & BUSINESS RESOURCE GUIDE). CALCPA ALSO PRODUCED MORE THAN 1,000 DIFFERENT EMAILS THAT INCLUDE CHAPTER BULLETINS AND DAILY CLIPS THAT PROVIDES LINKS TO NEWS RELATED TO CALIFORNIA, BUSINESS, THE CPA PROFESSION, PERSONAL FINANCE, TECHNOLOGY, AND TAX. CALCPA'S WEBSITE IS A MEMBER-FOCUSED CLEARINGHOUSE FILLED WITH NEWS, INFORMATION, RESOURCES AND EVENT LISTINGS FOR CALIFORNIA CPAS. OUR MEDIA AND PUBLIC RELATIONS EFFORTS PROMOTE THE INTEGRITY OF THE CPA PROFESSION AND POSITION OUR MEMBERS AS EXPERTS IN A DIVERSITY OF SUBJECT AREAS. AS OF THE END OF THIS FISCAL YEAR, LINKEDIN MEMBERSHIP WAS OVER 9,300, FACEBOOK LIKES ARE NEARLY 6,000, TWITTER FOLLOWERS ARE MORE THAN 9,000 AND CALCPA HAS MORE THAN 1,000 FOLLOWERS ON INSTAGRAM.

Form 990, Part III, Line 4c:

GOVERNMENT RELATIONS - CALCPA'S GOVERNMENT RELATIONS TEAM INCLUDES MEMBERS AND STAFF WHO WORK WITH LEGISLATORS AND REGULATORS IN SACRAMENTO TO MAKE SURE THE INTERESTS OF THE PUBLIC, BUSINESS AND THE CPA PROFESSION ARE BEING SERVED OUR GOVERNMENT RELATIONS TEAM ALSO KEEPS MEMBERS INFORMED OF BILLS AND REGULATIONS THAT COULD IMPACT THE WAY THEY PRACTICE THIS YEAR, MORE THAN 260 CALCPA MEMBERS ATTENDED CALCPA'S CPA DAY AT THE CAPITOL AND DISCUSSED WITH THE STATE LEGISLATORS THEIR CONCERNS WITH TAX ON SERVICES, THE BURDENS OF OVER REGULATION ON CALIFORNIA BUSINESSES, CALCPA'S SUCCESSFUL FINANCIAL LITERACY PROGRAM, AND THE EFFORTS OF THE CPA PROFESSION TO INVEST IN CALIFORNIA'S FUTURE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KATHRYN JOHNSON CHAIR	2 00 1 10	X		X				0	0	0
ANDREW MINTZER PAST CHAIR	1 00 1 10	X		X				0	0	0
LEWIS SHARPSTONE FIRST VICE CHAIR	1 00 0 10	X		X				0	0	0
LYNDA BOMAN VICE CHAIR (EFF 6/30/17)	1 00 0 10	X		X				0	0	0
MATTHEW MARTIN VICE CHAIR (EFF 6/30/17)	1 00 0 10	X		X				0	0	0
JOHN LACEY VICE CHAIR	1 00 0 10	X		X				0	0	0
JOLENE FRASER VICE CHAIR	1 00 0 10	X		X				0	0	0
AMINTAS MAJOR VICE CHAIR (THRU 6/30/17)	1 00 0 10	X		X				0	0	0
DANHIRA MILLAN VICE CHAIR (THRU 6/30/17)	1 00 0 10	X		X				0	0	0
ROBERT REYNOLDS TREASURER	1 00 0 10	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
OKORIE RAMSEY ED FDN PRESIDENT	1 10 1 00	X						0	0	0
CHARLES OSAKI ED FDN PRESIDENT (THRU 6/30/17)	1 00 1 10	X						0	0	0
CHARLOTTE WALL APPOINTED MEMBER	1 00 0 10	X						0	0	0
ASHLEY CASEY COUNCIL REP	1 00 0 10	X						0	0	0
LYNETTE ATCHLEY COUNCIL REP	1 00 0 10	X						0	0	0
PRESTON OSBOURN COUNCIL REP (EFF 6/30/17)	1 00 0 10	X						0	0	0
JEREMY DILLARD COUNCIL REP (EFF 6/30/17)	1 00 0 10	X						0	0	0
ERIN ROCHE COUNCIL REP (EFF 6/30/17)	1 00 0 10	X						0	0	0
PERRY FORSCHINO COUNCIL REP (THRU 6/30/17)	1 00 0 10	X						0	0	0
ALLISON PROCTOR COUNCIL REP (THRU 6/30/17)	1 00 0 10	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LORETTA DOON CEO	18 75 18 75			X				323,091	323,091	32,646
ANNA DILIG CONTROLLER/ACTING CFO (THRU 5/22/17)	18 75 18 75			X				105,253	105,253	16,732
NATALIE QUAN CFO (EFF 5/22/17)	18 75 18 75			X				58,448	58,448	6,398
JOHN ANGELO DIV DIR, STRATEGIC RELATIONS & EXEC DIR, INSTITUTE	31 50 6 00				X			206,304	36,406	39,077
MATTHEW KOONTZ DIVISION DIR, MEMBERSHIP MKTG & COMM	25 00 12 50				X			146,757	72,283	40,160
ARTHUR CHIN DIVISION DIR, EDUCATION FOUNDATION	18 75 18 75					X		128,185	128,185	56,776
LINDA MCCRONE DIR, TECHNICAL SVCS & PEER REVIEW	37 50 0 00					X		177,222	0	41,928
LISA MCTAGGART DIR, GOVERNANCE & PROPERTY MGMT	37 50 0 00					X		172,119	0	8,091
JASON FOX DIVISION DIR, GOVERNMENT RELATIONS	37 50 0 00					X		163,424	0	10,220
AUDREY CHING SR DIR BUSINESS & PROFESSIONAL DEVELOPMENT	18 75 18 75					X		78,435	78,435	20,650

SCHEDULE C
(Form 990 or 990-EZ)

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 www.irs.gov/form990.

OMB No 1545-0047

2017

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

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

Name of the organization CALIFORNIA SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS	Employer identification number 94-1056137
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$
- 3 Volunteer hours for political campaign activities (see instructions) ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)**(a)** Filing
organization's
totals**(b)** Affiliated
group totals

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)

b Total lobbying expenditures to influence a legislative body (direct lobbying)

c Total lobbying expenditures (add lines 1a and 1b)

d Other exempt purpose expenditures

e Total exempt purpose expenditures (add lines 1c and 1d)

f Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

g Grassroots nontaxable amount (enter 25% of line 1f)

h Subtract line 1g from line 1a If zero or less, enter -0-

i Subtract line 1f from line 1c If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

☐ Yes ☐ No**4-Year Averaging Period Under section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year 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))					
f Grassroots lobbying expenditures					

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

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

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		No
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		No
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		No

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	8,836,805
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	350,457
b	Carryover from last year	2b	
c	Total	2c	350,457
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	353,472
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	-3,015

Part IV Supplemental Information

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

Return Reference	Explanation
------------------	-------------

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As Filed Data -

DLN: 93493074007429

SCHEDULE D

(Form 990)

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.

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

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

CALIFORNIA SOCIETY OF CERTIFIED
PUBLIC ACCOUNTANTS

Employer identification number

94-1056137

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 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 funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

Part II

Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4

Number of states where property subject to conservation easement is located ►

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, 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 conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenue included on Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2017

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		6,510,209		6,510,209
b Buildings		10,365,303	238,215	10,127,088
c Leasehold improvements		144,975	133,123	11,852
d Equipment		4,008,052	1,682,646	2,325,406
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				18,974,555

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (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, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) DUE FROM AFFILIATES	849,987
(2) TRUST ASSETS - DEFERRED COMPENSATION	1,161,526
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	2,011,513

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
1. Federal income taxes	
DEFERRED LEASE COSTS	638,733
DEFERRED COMPENSATION LIABILITY	1,161,526
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	1,800,259

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

☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements	1	14,060,542
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	19,318
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	19,318
3	Subtract line 2e from line 1	3	14,041,224
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	16,813
b	Other (Describe in Part XIII)	4b	-137,969
c	Add lines 4a and 4b	4c	-121,156
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	13,920,068

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

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

1	Total expenses and losses per audited financial statements	1	15,069,735
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	62,500
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	137,969
e	Add lines 2a through 2d	2e	200,469
3	Subtract line 2e from line 1	3	14,869,266
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	16,813
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	16,813
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	14,886,079

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 94-1056137
Name: CALIFORNIA SOCIETY OF CERTIFIED
PUBLIC ACCOUNTANTS

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE SOCIETY IS EXEMPT FROM INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION 501(C)(6) AND RELATED CALIFORNIA CODE SECTIONS THE ORGANIZATION IS SUBJECT TO INCOME TAXES FROM ACTIVITIES UNRELATED TO ITS TAX-EXEMPT PURPOSES MANAGEMENT OF THE SOCIETY HAS EVALUATED ITS TAX POSITIONS AND RELATED INCOME TAX CONTINGENCIES MANAGEMENT DOES NOT BELIEVE THAT ANY MATERIAL UNCERTAIN TAX POSITIONS EXIST

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	RENTAL EXPENSES NETTED WITH REVENUE -143,002 AFFINITY PROGRAM SERVICES RECLASSIFIED TO EXPENSES 5,033

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES NETTED WITH REVENUE 143,002 AFFINITY PROGRAM SERVICES RECLASSIFIED TO EXPENSES -5,033

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d)
		SVSJ ABC NIGHT (event type)	FRESNO CHAPTER GOLF TOURNAMENT (event type)	38 (total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	41,020	35,460	608,682	685,162
	2 Less Contributions	18,850	13,860	171,930	204,640
	3 Gross income (line 1 minus line 2)	22,170	21,600	436,752	480,522
Direct Expenses	4 Cash prizes				
	5 Noncash prizes			4,082	4,082
	6 Rent/facility costs			16,965	16,965
	7 Food and beverages	16,889	15,994	352,302	385,185
	8 Entertainment			2,279	2,279
	9 Other direct expenses	3,170	5,276	33,384	41,830
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				450,341
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				30,181

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states?

☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

☐ Yes ☐ No

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers?	<input type="checkbox"/> Yes <input type="checkbox"/> No						
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	<input type="checkbox"/> Yes <input type="checkbox"/> No						
13 Indicate the percentage of gaming activity conducted in							
a The organization's facility	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 10%;">13a</td> <td style="width: 80%;"></td> <td style="width: 10%; text-align: right;">%</td> </tr> <tr> <td>13b</td> <td></td> <td style="text-align: right;">%</td> </tr> </table>	13a		%	13b		%
13a		%					
13b		%					
b An outside facility							
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records							
Name ►							
Address ►							
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	<input type="checkbox"/> Yes <input type="checkbox"/> No						
b If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$							
c If "Yes," enter name and address of the third party							
Name ►							
Address ►							
16 Gaming manager information							
Name ►							
Gaming manager compensation ► \$							
Description of services provided ►							
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor							
17 Mandatory distributions							
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?							
<input type="checkbox"/> Yes <input type="checkbox"/> No							
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$							

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Return Reference	Explanation
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Schedule I
(Form 990)

Department of the
Treasury
Internal Revenue Service

Name of the organization
CALIFORNIA SOCIETY OF CERTIFIED
PUBLIC ACCOUNTANTS

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

OMB No 1545-0047

2017

Open to Public
Inspection

Employer identification number
94-1056137

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CALCPA INSTITUTE 1710 GILBRETH ROAD BURLINGAME, CA 94010	20-0978565	501(C)(3)	354,624				SUPPORT FOR CALCPA INSTITUTE INCLUDES TRANSFERS OF NET PROCEEDS FROM FUNDRAISING EVENTS HELD BY CALCPA CHAPTERS TO BENEFIT THE SCHOLARSHIP FUNDS, AS WELL AS MONETARY CONTRIBUTION TO SUPPORT THE ADMINISTRATION OF CALCPA INSTITUTE
(2) CALIFORNIA CERTIFIED PUBLIC ACCOUNTANTS EDUCATION FOUNDATION 1710 GILBRETH ROAD BURLINGAME, CA 94010	94-6130841	501(C)(3)	10,000				GENERAL SUPPORT

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

3 Enter total number of other organizations listed in the line 1 table 0

Part III **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

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

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	VARIOUS CHAPTERS HAVE DIFFERENT ELIGIBILITY CRITERIA HOWEVER, MOST SCHOLARSHIP APPLICATION REQUIREMENT ARE THE SAME APPLICANTS MUST BE ENROLLED IN AN ACCOUNTING PROGRAM OR BUSINESS PROGRAM WITH EMPHASIS IN ACCOUNTING, DISCLOSE THEIR CUMULATIVE GPA, SUBMIT TRANSCRIPTS, AND SUBMIT AT LEAST ONE LETTER OF RECOMMENDATION FROM A PROFESSOR OR INSTRUCTOR

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

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

2017

Open to Public Inspection

Name of the organization CALIFORNIA SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS	Employer identification number 94-1056137
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Part I Questions Regarding Compensation

	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. <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input checked="" type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input checked="" type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input checked="" type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use										
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence										
<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees										
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)										
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	1b Yes										
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes										
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input checked="" type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee					
<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract										
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study										
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> 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: <table border="0"> <tr> <td>a Receive a severance payment or change-of-control payment?</td> <td>4a</td> <td>No</td> </tr> <tr> <td>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</td> <td>4b</td> <td>No</td> </tr> <tr> <td>c Participate in, or receive payment from, an equity-based compensation arrangement?</td> <td>4c</td> <td>No</td> </tr> </table> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	a Receive a severance payment or change-of-control payment?	4a	No	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No	c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No		
a Receive a severance payment or change-of-control payment?	4a	No									
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No									
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No									
Only 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 contingent on the revenues of: <table border="0"> <tr> <td>a The organization?</td> <td>5a</td> <td></td> </tr> <tr> <td>b Any related organization?</td> <td>5b</td> <td></td> </tr> </table> If "Yes," on line 5a or 5b, describe in Part III.	a The organization?	5a		b Any related organization?	5b						
a The organization?	5a										
b Any related organization?	5b										
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: <table border="0"> <tr> <td>a The organization?</td> <td>6a</td> <td></td> </tr> <tr> <td>b Any related organization?</td> <td>6b</td> <td></td> </tr> </table> If "Yes," on line 6a or 6b, describe in Part III.	a The organization?	6a		b Any related organization?	6b						
a The organization?	6a										
b Any related organization?	6b										
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7										
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial 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)?	9										

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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 are not 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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 LORETTA DOON CEO	(i)	243,513	70,000	9,578	15,591	732	339,414	0
	(ii)	243,513	70,000	9,578	15,591	732	339,414	0
2 ANNA DILIG CONTROLLER/ACTING CFO (THRU 5/22/17)	(i)	105,202	0	51	7,361	1,005	113,619	0
	(ii)	105,202	0	51	7,361	1,005	113,619	0
3 JOHN ANGELO DIV DIR, STRATEGIC RELATIONS & EXEC	(i)	206,217	0	87	13,390	20,383	240,077	0
	(ii)	36,391	0	15	2,363	2,941	41,710	0
4 MATTHEW KOONTZ DIVISION DIR, MEMBERSHIP MKTG & COMM	(i)	146,689	0	68	10,263	16,644	173,664	0
	(ii)	72,250	0	33	5,055	8,198	85,536	0
5 ARTHUR CHIN DIVISION DIR, EDUCATION FOUNDATION	(i)	122,496	5,638	51	7,834	20,554	156,573	0
	(ii)	122,496	5,638	51	7,834	20,554	156,573	0
6 LINDA MCCRONE DIR, TECHNICAL SVCS & PEER REVIEW	(i)	177,121	0	101	12,392	29,536	219,150	0
	(ii)	0	0	0	0	0	0	0
7 LISA MCTAGGART DIR, GOVERNANCE & PROPERTY MGMT	(i)	137,535	34,483	101	8,091	0	180,210	0
	(ii)	0	0	0	0	0	0	0
8 JASON FOX DIVISION DIR, GOVERNMENT RELATIONS	(i)	163,323	0	101	10,220	0	173,644	0
	(ii)	0	0	0	0	0	0	0
9 AUDREY CHING SR DIR BUSINESS & PROFESSIONAL DEVE	(i)	78,384	0	51	5,483	4,842	88,760	0
	(ii)	78,384	0	51	5,483	4,842	88,760	0

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	CALIFORNIA SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS COMPENSATED ITS CEO \$11,400 FOR CAR ALLOWANCE, \$5,400 FOR HEALTH CLUB MEMBERSHIP, \$1,825 FOR TAX AND FINANCIAL PLANNING, AND \$430 FOR COMPANION TRAVEL (TAX GROSS-UP) AS PART OF CEO'S CONTRACT. THE AMOUNTS WERE REPORTED AS TAXABLE BENEFITS ON THE CEO'S W-2.

Additional Data

Software ID:
Software Version:
EIN: 94-1056137
Name: CALIFORNIA SOCIETY OF CERTIFIED
PUBLIC ACCOUNTANTS

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1LORETTA DOON CEO	(i)	243,513	70,000	9,578	15,591	732	339,414	0
	(ii)	243,513	70,000	9,578	15,591	732	339,414	0
1ANNA DILIG CONTROLLER/ACTING CFO (THRU 5/22/17)	(i)	105,202	0	51	7,361	1,005	113,619	0
	(ii)	105,202	0	51	7,361	1,005	113,619	0
2JOHN ANGELO DIV DIR, STRATEGIC RELATIONS & EXEC	(i)	206,217	0	87	13,390	20,383	240,077	0
	(ii)	36,391	0	15	2,363	2,941	41,710	0
3MATTHEW KOONTZ DIVISION DIR, MEMBERSHIP MKTG & COMM	(i)	146,689	0	68	10,263	16,644	173,664	0
	(ii)	72,250	0	33	5,055	8,198	85,536	0
4ARTHUR CHIN DIVISION DIR, EDUCATION FOUNDATION	(i)	122,496	5,638	51	7,834	20,554	156,573	0
	(ii)	122,496	5,638	51	7,834	20,554	156,573	0
5LINDA MCCRONE DIR, TECHNICAL SVCS & PEER REVIEW	(i)	177,121	0	101	12,392	29,536	219,150	0
	(ii)	0	0	0	0	0	0	0
6LISA MCTAGGART DIR, GOVERNANCE & PROPERTY MGMT	(i)	137,535	34,483	101	8,091	0	180,210	0
	(ii)	0	0	0	0	0	0	0
7JASON FOX DIVISION DIR, GOVERNMENT RELATIONS	(i)	163,323	0	101	10,220	0	173,644	0
	(ii)	0	0	0	0	0	0	0
8AUDREY CHING SR DIR BUSINESS & PROFESSIONAL DEVE	(i)	78,384	0	51	5,483	4,842	88,760	0
	(ii)	78,384	0	51	5,483	4,842	88,760	0

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
~~Internal Revenue Service~~

Name of the organization
CALIFORNIA SOCIETY OF CERTIFIED
PUBLIC ACCOUNTANTS

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.

OMB No 1545-0047

2017

**Open to Public
Inspection**

Employer identification number

94-1056137

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE CALIFORNIA SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS (CALCPA) HAD OVER 40,000 MEMBERS AS OF APRIL 2018. MEMBERSHIP IN CALCPA CONSISTS OF FOUR CLASSES, NAMELY, CPA MEMBERS, STUDENT MEMBERS, CANDIDATE MEMBERS, AND ASSOCIATE MEMBERS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE CALCPA COUNCIL (COUNCIL) IS THE GOVERNING BODY OF CALCPA. THE COUNCIL IS COMPRISED OF (A) CHAPTER REPRESENTATIVES TO COUNCIL CONSISTING OF TWO MEMBERS PER CHAPTER PLUS ONE MEMBER FOR EVERY 1,000 ADDITIONAL MEMBERS AS OF THE MEMBERSHIP COUNT ON MAY 1 OF THE PRECEDING YEAR, ELECTED BY MEMBERS OF THE 14 CHAPTERS, (B) COUNCIL-AT-LARGE MEMBERS, OFFICERS, AND VICE CHAIRS ARE ELECTED BY THE MEMBERSHIP AS A WHOLE, (C) AND STATE COMMITTEE CHAIRS, SECTION CHAIRS, THE PRESIDENT OF THE BOARD OF TRUSTEES OF THE CALCPA EDUCATION FOUNDATION, THE IMMEDIATE PAST CHAIR, AND THE PRIOR TEN CHAIRS ARE VOTING COUNCIL MEMBERS BY VIRTUE OF THEIR POSITION, (D) ALL VOTING MEMBERS OF THE CALCPA BOARD OF DIRECTORS. FOR 2017-2018, THERE WERE 91 VOTING MEMBERS. THE COUNCIL'S RESPONSIBILITIES FOCUS ON STRATEGIC PLANNING, POLICY MAKING, AND THE ADOPTION OF A BUDGET ON BEHALF OF MEMBERSHIP.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	THE CALCPA COUNCIL (COUNCIL) IS THE GOVERNING BODY OF CALCPA THE CALCPA BOARD OF DIRECTOR S (BOARD) IS THE EXECUTIVE COMMITTEE OF COUNCIL AND IS COMPRISED OF 15 MEMBERS ELECTED BY COUNCIL THE BOARD REPRESENTS THE COUNCIL IN CARRYING OUT THE STRATEGIES AND POLICIES SET BY THE COUNCIL AND MEMBERSHIP THE COUNCIL DELEGATED THE OPERATING AUTHORITY TO THE BOARD

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FROM 990 IS PREPARED BY INDEPENDENT ACCOUNTANTS BASED ON INFORMATION PROVIDED BY CALCP A IT IS REVIEWED IN DETAIL BY THE CONTROLLER, AND A SECONDARY, HIGH-LEVEL REVIEW IS CONDU CTED BY THE CFO THE REVIEWED DRAFT IS CIRCULATED TO MEMBERS OF THE AUDIT COMMITTEE REQUES TING THEIR REVIEW, COMMENTS, AND QUESTIONS ALL THE QUESTIONS AND CONCERNS ARE ADDRESSED A ND RESULTING NOTIFICATIONS ARE MADE AS APPROPRIATE ONCE THE REVIEW PROCESS IS COMPLETED, THE FORM 990 IS PROVIDED TO ALL COUNCIL AND BOARD MEMBERS AND IS FILED WITH THE IRS ON OR BEFORE THE DUE DATE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	CALCPA ANNUALLY REQUIRES THAT ALL MEMBERS OF THE BOARD OF DIRECTORS READ THE CALCPA CONFLICT OF INTEREST POLICY AND SUBMIT A CONFLICT OF INTEREST DISCLOSURE STATEMENT THE DISCLOSURE STATEMENTS ARE REVIEWED UPON RECEIPT IF CONFLICTS ARE IDENTIFIED, THE CEO REVIEWS THE STATEMENT AND WILL REFER TO LEGAL COUNSEL IF NECESSARY IN ITS ANNUAL TRAINING OF INCOMING COUNCIL AND BOARD MEMBERS, CALCPA DISCUSSES WITH ITS LEADERS THAT THE ORGANIZATION IS GOVERNED BY CALIFORNIA CORPORATIONS CODE, AND THAT THEY HAVE A FIDUCIARY DUTY AS DIRECTORS OF CALCPA

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	<p>THE BOARD OF DIRECTORS DELEGATED RESPONSIBILITY TO REVIEW THE CEO'S GOALS, PERFORMANCE, AND COMPENSATION TO THE CEO GOALS AND OBJECTIVE COMMITTEE (COMMITTEE) THE COMMITTEE IS COMPOSED OF THE CHAIR, PAST CHAIR, FIRST VICE CHAIR, AND TREASURER ALL MEMBERS OF THE COMMITTEE DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE DETERMINATION OF THE CEO'S COMPENSATION IN ADDITION, AND DUE TO THE FACT THAT THE CURRENT CEO OVERSEES BOTH CALCPA AND THE EDUCATION FOUNDATION (FOUNDATION), THE PRESIDENT OF THE FOUNDATION IS INCLUDED AS A MEMBER OF THE CALCPA'S CEO GOALS AND OBJECTIVE COMMITTEE THIS COMMITTEE MEETS AND SETS OUT GOALS FOR THE CEO TO ACCOMPLISH THROUGHOUT THE YEAR AFTER THE END OF THE FISCAL YEAR, THE COMMITTEE PERFORMS THEIR DUE DILIGENCE REVIEW OF THE CEO'S GOALS AND PERFORMANCE, AS WELL AS THE COMPARABLE DATA, AND MAKES THE FINAL RECOMMENDATION ON THE CEO'S TOTAL COMPENSATION TO THE BOARD OF DIRECTORS, WHICH HAS THE FINAL APPROVAL COMPARABLE DATA INCLUDES FORM 990 OF OTHER STATE CPA SOCIETIES SIMILAR IN SIZE, AND A COMPENSATION SURVEY CONDUCTED BY THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES (ASAE) IN ADDITION, THIS YEAR, THE COMPENSATION COMMITTEE ENGAGED AN INDEPENDENT CONSULTANT TO REVIEW AND ANALYZE THE TOTAL COMPENSATION OF THE CEO THE OUTSIDE CONSULTING FIRM PROVIDED A REPORT WHICH CONSIDERED A NUMBER OF DIFFERENT VARIABLES IN ASSESSING COMPARABILITY, INCLUDING THE SIZE OF THE ORGANIZATIONS, THEIR GEOGRAPHIC LOCATIONS, NATURE OF SERVICES PROVIDED, AND LEVEL OF EXPERIENCE AND SPECIFIC RESPONSIBILITIES OF THE CEO IN ASSESSING THE REASONABLENESS OF THE CEO'S COMPENSATION, THE COMMITTEE TOOK INTO ACCOUNT SALARY AND ANY BONUS OR INCENTIVE PAYMENTS THE CEO DETERMINES THE SALARY OF THE CFO BASED ON HER ANNUAL PERFORMANCE REVIEW MEASURED AGAINST GOALS PRESET BY THE CEO</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC BY POSTING ON ITS WEBSITE (WWW.CALCPA.ORG), AND UPON REQUEST, FOR THE SAME PERIOD OF TIME SET FORTH IN SEC. 6104(D) THE CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VII, SECTION A	ALLOCATION OF HOURS LORETTA DOON 18 75 HOURS ARE ALLOCATED TO RELATED ENTITY (CA CPA EDUCATION FOUNDATION) JOHN ANGELO 6 HOURS ARE ALLOCATED TO RELATED ENTITY AS EXECUTIVE DIRECTOR (CALCPA INSTITUTE) AUDREY CHING 18 75 HOURS ARE ALLOCATED TO RELATED ENTITY (CA CPA EDUCATION FOUNDATION) ARTHUR CHIN 18 75 HOURS ARE ALLOCATED TO RELATED ENTITY (CA CPA EDUCATION FOUNDATION) MATTHEW KOONTZ 12 5 HOURS ARE ALLOCATED TO RELATED ENTITY (CA CPA EDUCATION FOUNDATION) ANNA DILIG 18 75 HOURS ARE ALLOCATED TO RELATED ENTITY (CA CPA EDUCATION FOUNDATION) NATALIE QUAN 18 75 HOURS ARE ALLOCATED TO RELATED ENTITY (CA CPA EDUCATION FOUNDATION) THE DIVISION DIRECTOR OF STRATEGIC RELATIONS IS A SHARED EMPLOYEE WITH THE RELATED ENTITY, CALCPA INSTITUTE 6 HOURS PER WEEK ARE ALLOCATED TO CALCPA INSTITUTE FOR HIS POSITION AS A EXECUTIVE DIRECTOR

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	PEER REVIEW TECHNICAL REVIEWERS 240,673 OUTSOURCED HR FUNCTION 156,000 PUBLIC RELATIONS 100,014 OTHER PROFESSIONAL FEES 52,761

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
CALIFORNIA SOCIETY OF CERTIFIED
PUBLIC ACCOUNTANTS

Employer identification number
94-1056137

Part I Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)CALIFORNIA CERTIFIED PUBLIC ACCOUNTANTS EDUCATION FOUNDATION 1710 GILBRETH ROAD BURLINGAME, CA 94010 94-6130841	PROVIDES CONTINUING EDUCATION TO CPAS AND FINANCIAL PROFESSIONALS	CA	501(C)(3)	LINE 10	N/A		No
(2)CALCPA INSTITUTE 1710 GILBRETH ROAD BURLINGAME, CA 94010 20-0978565	PROVIDES SCHOLARSHIPS TO ACCOUNTING STUDENTS AND PROMOTE FINANCIAL LITERACY	CA	501(C)(3)	LINE 12A, I	CALIFORNIA SOCIETY OF CPAS		No

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV 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.

(a) Name, address, and EIN of related organization	(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	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 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?

a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity

1a

No

b Gift, grant, or capital contribution to related organization(s)

1b

Yes

c Gift, grant, or capital contribution from related organization(s)

1c

No

d Loans or loan guarantees to or for related organization(s)

1d

Yes

e Loans or loan guarantees by related organization(s)

1e

No

f Dividends from related organization(s)

1f

No

g Sale of assets to related organization(s)

1g

No

h Purchase of assets from related organization(s)

1h

No

i Exchange of assets with related organization(s)

1i

No

j Lease of facilities, equipment, or other assets to related organization(s)

1j

Yes

k Lease of facilities, equipment, or other assets from related organization(s)

1k

No

l Performance of services or membership or fundraising solicitations for related organization(s)

1l

No

m Performance of services or membership or fundraising solicitations by related organization(s)

1m

No

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

1n

Yes

o Sharing of paid employees with related organization(s)

1o

Yes

p Reimbursement paid to related organization(s) for expenses

1p

No

q Reimbursement paid by related organization(s) for expenses

1q

Yes

r Other transfer of cash or property to related organization(s)

1r

Yes

s Other transfer of cash or property from related organization(s)

1s

Yes

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2017

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

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)