

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

Table with columns for question number, question text, and Yes/No response boxes. Rows include questions 33 through 45b regarding organizational activities, financials, and compliance.

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 46 No

Part VI Section 501(c)(3) organizations only
All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 47
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 48
49a Did the organization make any transfers to an exempt non-charitable related organization? 49a
b If "Yes," was the related organization a section 527 organization? 49b

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation (Forms W-2/1099-MISC), (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation.

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation.

d Total number of other independent contractors each receiving over \$100,000.

52 Did the organization complete Schedule A? NOTE. All Section 501(c)(3) organizations must attach a completed Schedule A Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here
Signature of officer: *****
Date: 2018-10-04
Frank Mudzinganyama Treasurer
Type or print name and title

Table for Preparer Information with columns: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's EIN, Firm's address, Phone no.

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Additional Data

Software ID: 17005074

Software Version: V1.0

EIN: 23-7406295

Name: Institute of Internal Auditors

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)	
28 None (Grants \$ 0) If this amount includes foreign grants, check here . . . <input type="checkbox"/>	28a	0

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV.

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Sharonda Toney Secretary	20	0	0	0
Cherlyn Seals Vice President	25	0	0	0
Doug Douglas Board Member	5	0	0	0
Glenn Russell Board Member	5	0	0	0
Jim Molzahn Board Member	5	0	0	0
Lesa Walton Board Member	5	0	0	0
Randy Horton Board Member	5	0	0	0
Rita Cowans Board Member	5	0	0	0
Catina Williams Board Member	5	0	0	0
Adrienne Evans Program Director	25	0	0	0
Frank Mudzinganyama Treasurer	25	0	0	0
Anne Forbus Board Member	5	0	0	0
Keith Dickey Board Member	5	0	0	0
Valerie Annang President	25	0	0	0

SCHEDULE O
(Form 990 or 990-EZ)**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.

2017**Open to Public Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization
Institute of Internal Auditors

Employer identification number

23-7406295

990 Schedule O, Supplemental Information

Return Reference	Explanation
Part I, line 8	Other Revenues , Amount Meeting/Seminar Income, \$54683 Scholarship/Advertising Revenue, \$2000 Allotment from IIA Headquarters, \$3779 Interest and Dividend Income, \$1

990 Schedule O, Supplemental Information

Return Reference	Explanation
Part I, line 16	Other Expenses , Amount Meeting/Seminar Expenses, \$53691 00 Conference Expenses, \$2032 00 Chapter Admin & Board Expenses, \$261 00 Postage, Stationary, Advertising, & Communication Expenses, \$37 00 Bank/Credit Card Fees, \$36 00 Travel Expenses, \$423 00 Leadership Conference, \$650 00 District Representative Support, \$488 00 District Advisor Support , \$339 00 Scholarship Award Fees, \$2000 00 Committee Expenses, \$818 00