DLN: 93493319105129 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 D Employer identification number B Check if applicable FINRA INVESTOR EDUCATION FOUNDATION ☐ Address change 20-0863779 % JENNIFER P MITCHELL ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite 1735 K STREET NW (202) 728-8949 □ Application pending City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC $\,$ 200061506 $\,$ G Gross receipts \$ 5,300,865 Name and address of principal officer H(a) Is this a group return for GERALDINE M WALSH □Yes ☑No subordinates? 1735 K STREET NW H(b) Are all subordinates WASHINGTON, DC 200061506 ☐ Yes ☐No included? Tax-exempt status ☐ 501(c)(3) **У** 501(c)(4) **(**Insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW FINRAFOUNDATION ORG L Year of formation 2004 M State of legal domicile DE Summary 1 Briefly describe the organization's mission or most significant activities THE MISSION IS TO EMPOWER UNDERSERVED AMERICANS WITH THE KNOWLEDGE, SKILLS AND TOOLS TO MAKE SOUND FINANCIAL **DECISIONS THROUGHOUT LIFE** Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 4 Number of independent voting members of the governing body (Part VI, line 1b) 0 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 7 Total number of volunteers (estimate if necessary) . . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 . 7a b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** 81,673 1,134,746 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 9,301,819 1,020,006 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 9,383,492 2,154,752 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3). 403,994 319,178 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 0 Expenses 0 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 2,882,421 3,661,889 3,286,415 3,981,067 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -1,826,315 19 Revenue less expenses Subtract line 18 from line 12 . 6,097,077 Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 80,001,624 75,542,347 318,500 21 Total liabilities (Part X, line 26) . 219,561 79,782,063 75,223,847 22 Net assets or fund balances Subtract line 21 from line 20 . Signature Block 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 2019-11-14 Signature of officer Sign Here ROBERT A RENNER VICE PRESIDENT Type or print name and title Date Print/Type preparer's name Preparer's signature PTIN Check | If P01268401 Paid self-employed Firm's name FRNST & YOUNG US LLP Firm's EIN ▶ **Preparer** Use Only Firm's address ▶ 221 E 4TH STREET SUITE 2900 Phone no (513) 612-1400 CINCINNATI, OH 45202 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y

Form	990 (2018)					Page 2
Pa	nt III Statemen	t of Program Serv	ice Accomplis	hments		
	Check If Sch	edule O contains a res	ponse or note to a	any line in this Part III .		🗹
1		organization's mission		•		
	MISSION IS TO EMPO DUGHOUT LIFE	OWER UNDERSERVED	AMERICANS WITH	THE KNOWLEDGE, SKILL	S AND TOOLS TO MAKE SOUND	FINANCIAL DECISIONS
	Did the organization	n undertake anv signifi	cant program serv	vices during the year whic	th were not listed on	
_	_	or 990-EZ?		- •		□ yes ✓ No
	•	nese new services on S				
3	•			changes in how it conduct	s, any program	
	_		-			☐ Yes ☑ No
	If "Yes." describe th	nese changes on Sched	lule O			
4	Section 501(c)(3) a		tions are required	to report the amount of g	rgest program services, as meas grants and allocations to others,	
4a	(Code) (Expenses \$	1.429.244	including grants of \$) (Revenue \$)
	See Additional Data	, (=::p =:::=== +	_,,		, (,
4b	(Code) (Expenses \$	957,537	including grants of \$	174,574) (Revenue \$)
	See Additional Data					
4c	(Code) (Expenses \$	679,389	including grants of \$) (Revenue \$)
	See Additional Data					
4d	Other program serv	vices (Describe in Sche	dule O)			
	(Expenses \$	575,005 ır	cluding grants of	\$ 132,249	9)(Revenue\$)
4e	Total program se	rvice expenses 🕨	3,641,1	75		

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Pa	tIV 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)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (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? If "Yes," complete Schedule C, Part I	3		No
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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? If "Yes," complete Schedule D, Part 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? If "Yes," complete Schedule D, Part II 🕏	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	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? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 2	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 📆	11b	Yes	
	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? If "Yes," complete Schedule D, Part VIII 2	11c		No
	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? If "Yes," complete Schedule D, Part IX 🕏	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	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)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section $170(b)(1)(A)(II)$? If "Yes," complete Schedule E	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? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
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? If "Yes," complete Schedule F, Parts II and IV	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? If "Yes," complete Schedule F, Parts III and IV	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? If "Yes," complete Schedule G, Part 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,			

18

19

20a

20b

21

22

Yes

Yes

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Νo

Νo

No

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

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

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

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

19

21

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

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

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

rm	990 (2018)			Page
Par	Checklist of Required Schedules (continued)			
			Yes	No
	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>	23	Yes	
а	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
)	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
3	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? If "Yes," complete Schedule L, Part I	25a		No
)	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
	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? If "Yes," complete Schedule L, Part III	27		No
	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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
	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>	28c		No
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
ı	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
	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? If "Yes," complete Schedule R, Part VI	37		No
	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	38	Yes	
ı	Statements Regarding Other IRS Filings and Tax Compliance			
_	Check if Schedule O contains a response or note to any line in this Part V			旦
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 13 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Enter the number of Forms $W_{-}U_{-}$ included in line 13 Enter $U_{-}U_{-}$ it not applicable 1.1h 1.	. ,		

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ırt \	Governance, Management, and Disclosure For each "Yes" response to lines 2 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched Check if Schedule O contains a response or note to any line in this Part VI	lule O	See instructi	ons	•		lines ✓	
ect	ion A. Governing Body and Management							
						Yes	No	
E	nter the number of voting members of the governing body at the end of the tax year	1a		8				
	f there are material differences in voting rights among members of the governing							

Se **1**a similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2

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?	7 b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	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
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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		
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?			
а	The organization's CEO, Executive Director, or top management official	15a		No
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		
	ction C. Disclosure	100		
<u> </u>	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s			
10	only) available for public inspection. Indicate how you made these available. Check all that apply			
10	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 ►JENNIFER P MITCHELL 1735 K STREET NW WASHINGTON, DC 200061506 (202) 728-8949			

 \checkmark

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the
- organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest

compensated employees, and former such persons Lack this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours	Position than o	on (do ne bo	(C) o no ox, u n of or/t) t cha unle: ficer trust	eck moss pers and a ee)	ore son	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) ROBERT W COOK CHAIRMAN	1 0	х						0	2,358,157	522,215
(2) JAYNE W BARNARD BOARD MEMBER	59 0 1 0	х						0	0	0
(3) MARI J BUECHNER BOARD MEMBER - AS OF 2/13/18	1 0	Х						0	0	0
(4) CAMILLE M BUSETTE BOARD MEMBER	0 0	х						О	0	0
(5) T GRANT CALLERY BOARD MEMBER	10	х						0	0	0
(6) LAURA FISHER BOARD MEMBER - AS OF 2/13/18	10	х						0	0	0
(7) JOHN W THIEL BOARD MEMBER - AS OF 2/13/18	1 0	х						0	20,000	0
(8) ELISSE B WALTER BOARD MEMBER	3 0 5 0	Х						0	91,530	0
(9) GERALDINE M WALSH PRESIDENT	48 0 12 0			x				0	521,247	103,321
(10) EILEEN M FAMIGLIETTI TREASURER	6 0 54 0			х				0	390,808	76,820
(11) JENNIFER P MITCHELL CORPORATE SECRETARY	3 0 57 0			x				0	329,399	81,213
(12) MARCIA E ASQUITH FMR CORPORATE SECRETARY	0 0						x	0	750,633	149,415
										Form 990 (2018)

Form 990 (2018) Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated

hours per week (list any hours			n off	ficer	and a		compensation from the organization (W-	compensation from related organizations (W-	amount of other compensation from the
for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	from related	organization and related organizations

1b Sub-Total				>			
c Total from continuation sheets to Pa	art VII , Section	Α		▶			
d Total (add lines 1b and 1c)				▶	0	4,461,774	932,984

1b Sub-Total											
c Total from continuation sheets to Part VII, Section A											
d Total (add lines 1b and 1c)						▶		0	4,461,774	932,984	

1b Sub-Total					▶ _		,	
c Total from continuation sheets to Pa	art VII , Section	Α			▶			
d Total (add lines 1b and 1c)					▶	0	4,461,774	932,984
3 T-t-1	leads and broads a	4 - 41	. 1	 L		 	+100 000	

b Sub-Total										
c Total from continuation sheets to Pa	rt VII , Section	Α				▶ [
d Total (add lines 1b and 1c)						▶		0	4,461,774	932,984
Total number of individuals (including of reportable compensation from the o			e liste	ed al	bove	e) who	rece	eived more than	\$100,000	

1b 9	ub-Total						•				
c T	otal from continuation sheets to Pa	art VII , Section	Α				▶[
d٦	otal (add lines 1b and 1c)						•		0	4,461,774	932,984
2	Total number of individuals (including			e liste	ed al	bove	e) who	rece	eived more than \$	100,000	

c Total from continuation sheets to Part VII, Section A ▶			
d Total (add lines 1b and 1c)	4,461,774		932,984
Total number of individuals (including but not limited to those listed above) who received more than \$100 of reportable compensation from the organization ► 0	0,000		
	_	Yes	No

3

4

5

Description of services

SEE SCHEDULE O

Yes

Yes

Nο

500,000

275,000

215,000

215,000

145,000

Form 990 (2018)

(C)

Compensation

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such

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

(A)

Name and business address

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

from the organization Report compensation for the calendar year ending with or within the organization's tax year

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

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

line 1a? If "Yes," complete Schedule J for such individual .

Section B. Independent Contractors

AMERICAN LIBRARY ASSOCIATION,

ASSOCIATION FOR FINANCIAL COUNSELIN,

NATIONAL CENTER FOR VICTIMS OF CRIM,

compensation from the organization ▶ 12

50 EAST HURON STREET CHICAGO, IL 60611

321 WEST 13TH STREET NEW YORK, NY 10014 AARP FOUNDATION,

601 EAST STREET NW WASHINGTON, DC 20049

2000 M STREET NW WASHINGTON, DC 20036

79 S STATE STREET WESTERVILLE, OH 43081 APPLIED RESEARCH CONSULTING.

3

5

Part	VIII Statement of Revenue					rage 3
	Check if Schedule O contains a response o	r note to any li	ne in this Part VIII		<u> </u>	<u> </u>
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
(A	1a Federated campaigns 1a			revenue		312 - 314
ributions, Gifts, Grants Other Similar Amounts	b Membership dues 1b					
<u> </u>	c Fundraising events 1c					
Ę, Ā	d Related organizations	772,946				
nia G	e Government grants (contributions)					
Sin	f All other contributions, gifts, grants, and similar amounts not included					
uti her	and similar amounts not included above	361,800				
	g Noncash contributions included in lines 1a - 1f \$					
Contributions, Gifts, Grants and Other Similar Amounts	h Total. Add lines 1a-1f	. •	1,134,746			
		Business 0				
Service Revenue	2a					
æ	b					
MCe	с ———					
Ser	d					
ranı	f All other program service revenue					
Program			0			
_	3 Investment income (including dividends, interes	st and other			1	
	sımılar amounts)	▶]	903,609			903,609
	4 Income from investment of tax-exempt bond pr 5 Royalties	roceeds ► •			1	
	·	ı) Personal			1	
	6a Gross rents	,				
	b Less rental expenses					
	c Rental income or (loss)	0				
	d Net rental income or (loss)	· •	C			
		(II) Other				
	7a Gross amount from sales of 3,262,510					
	assets other than inventory					
	b Less cost or other basis and 3,146,113					
	sales expenses					
	C Gain or (loss) 116,39/	•	116,397	7		116,397
	8a Gross income from fundraising events		•			,
ne	(not including \$ of contributions reported on line 1c)					
.ve⊓	See Part IV, line 18 a	0				
Re	b Less direct expenses b	0	_			
Other Revenue	c Net income or (loss) from fundraising events 9a Gross income from gaming activities	· · •	(<u>'</u>		
ō	See Part IV, line 19					
	a h loss direct evenesses	0				
	b Less direct expenses b c Net income or (loss) from gaming activities .		C			
	10aGross sales of inventory, less					
	returns and allowances	0				
	b Less cost of goods sold b	0				
	C Net income or (loss) from sales of inventory .	. •	C			
	Miscellaneous Revenue Bus	siness Code				
	ь					
	с					
	d All other revenue					
	e Total. Add lines 11a-11d	. •	C			
	12 Total revenue. See Instructions	· · •	2,154,752	2		1,020,006
			·			Form 990 (2018)

orn	n 990 (2018)				Page 10
	art IX Statement of Functional Expenses ion 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	ınızatıons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX .	<u> </u>		<u> \square</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	306,823	306,823		
2	Grants and other assistance to domestic individuals See Part IV, line 22	12,355	12,355		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees)				
а	Management	137		137	
b	Legal	0			
c	Accounting	50,865		50,865	
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			_
f	Investment management fees	127,128		127,128	
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,499,117	2,498,455	662	
12	Advertising and promotion	59,304	59,304		
13	Office expenses	410,426	350,781	59,645	
14	Information technology	62,005	62,005		
15	Royalties	0			
16	Occupancy	110,083	40,720	69,363	
	Travel	91,027	69,775	21,252	
	Payments of travel or entertainment expenses for any federal, state, or local public officials •	0		•	
19	Conferences, conventions, and meetings	158,698	150,118	8,580	-
20	Interest	0			
	Payments to affiliates	0			
	Depreciation, depletion, and amortization	0			
	Insurance .	0			
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 DUES/MEMBERSHIP FEE	51,555	50,355	1,200	
	2 DOLS/MEMBERSHIF TEE	52,555	00,000	2,255	
i	PUBLICATIONS/PRINTING	40,984	40,484	500	
,	C TAXES	560		560	
	d				
,	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,981,067	3,641,175	339,892	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	Check here ► ☐ If following SOP 98-2 (ASC 958-720)				

Page **11**

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2.542

318.500

75.131.685

75,223,847

75,542,347

Form **990** (2018)

92,162

75.542.347

315.958

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0 22

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0

29.664

219.561

79.686.435

79,782,063

80,001,624

95,628

0 29

80.001.624

189.897

15

16

17

20

21

23

24

25

26

27

28

30

31 32

33

34

63.643

1 Cash-non-interest-bearing	731,651	1	689,299
2 Savings and temporary cash investments	0	2	0
3 Pledges and grants receivable, net	0	3	0
4 Accounts receivable, net	1,430	4	611,870
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
6 Loans and other receivables from other disqualified persons (as defined under		ı	l

section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets 0 Notes and loans receivable, net . Inventories for sale or use . 8 57.701 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 10a basis Complete Part VI of Schedule D b Less accumulated depreciation 10b n 10c 51,514,288 46,417,125 11 11 Investments—publicly traded securities . 27.696.554 12 27,760,410 12 Investments—other securities See Part IV, line 11 . 0 13 13 Investments—program-related See Part IV, line 11 0 14 14 Intangible assets

Liabilities **Fund Balances** Assets or Net

15

16

17

18

19

20

21

22

23

24

26

27

28

29

30

31

32

33

34

Other assets See Part IV, line 11 . . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Total liabilities. Add lines 17 through 25 .

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Total assets.Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ 🗹 and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Form 990 (2018)

3a

3b

No

Form 990 (2018)

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

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

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

Audit Act and OMB Circular A-133?

Additional Data

Software Version: **EIN:** 20-0863779

Software ID:

Name: FINRA INVESTOR EDUCATION FOUNDATION

Form 990 (2018)

Form 990, Part III, Line 4a:

PROTECT CONSUMERS FROM FINANCIAL FRAUD - SEE SCHEDULE O

Form 990, Part III, Line 4b: FOSTER SUSTAINABLE FINANCIAL EDUCATION - SEE SCHEDULE O

Form 990, Part III, Line 4c: ADVANCE MILITARY FINANCIAL READINESS - SEE SCHEDULE O

SCHEDULE D

Supplemental Financial Statements

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

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

OMB No 1545-0047

Open to Public Inspection

DLN: 93493319105129

Department of the Treasury Internal Revenue Service

(Form 990)

	ne of the organization A INVESTOR EDUCATION FOUNDATION		Employer identification number
-			20-0863779
Ł	t I Organizations Maintaining Donor Adv		
	Complete if the organization answered "Ye	es" on Form 990, Part IV, line 6 (a) Donor advised funds	
	Total number at end of year	(a) Donor advised funds	(b) Funds and other accounts
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
	Aggregate value of grants from (duffing year) Aggregate value at end of year		
	Did the organization inform all donors and donor advisor organization's property, subject to the organization's e		n donor advised funds are the
	Did the organization inform all grantees, donors, and d charitable purposes and not for the benefit of the dono private benefit?		
3	t III Conservation Easements. Complete if t	he organization answered "Yes	" on Form 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the orga	anization (check all that apply)	
	Preservation of land for public use (e g , recreation	on or education) 🔲 Preserva	ation of an historically important land area
	Protection of natural habitat	☐ Preserva	ation of a certified historic structure
	Preservation of open space		
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	ı qualified conservation contribution	n in the form of a <u>conservation</u> Held at the End of the Year
	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified histor	ic structure included in (a)	2c
	Number of conservation easements included in (c) acquistructure listed in the National Register	ured after 7/25/06, and not on a hi	istoric 2d
	Number of conservation easements modified, transferred tax year ▶	ed, released, extinguished, or term	ninated by the organization during the
	Number of states where property subject to conservation	on easement is located ▶	
	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold	the periodic monitoring, inspection,	, handling of violations,
	Staff and volunteer hours devoted to monitoring, inspec	ecting, handling of violations, and e	
	Amount of expenses incurred in monitoring, inspecting \$ \begin{align*}	, handling of violations, and enforci	ing conservation easements during the year
			f section 170(h)(4)(B)(i)
	▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of servation easements in its revenue e footnote to the organization's fina	f section 170(h)(4)(B)(i) Yes No e and expense statement, and
Iri	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easements. Organizations Maintaining Collections Complete if the organization answered "Yes) above satisfy the requirements of servation easements in its revenue e footnote to the organization's fina nts s of Art, Historical Treasures es" on Form 990, Part IV, line 8	f section 170(h)(4)(B)(i) Yes No e and expense statement, and ancial statements that describes s, or Other Similar Assets. 8.
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemed TIII Organizations Maintaining Collections) above satisfy the requirements of servation easements in its revenue e footnote to the organization's finants of Art, Historical Treasures es" on Form 990, Part IV, line 8 16 (ASC 958), not to report in its rerpublic exhibition, education, or reservant in the servant in the	f section 170(h)(4)(B)(i) Yes No e and expense statement, and ancial statements that describes s, or Other Similar Assets. 8. evenue statement and balance sheet works of search in furtherance of public service,
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement of the organizations Maintaining Collections Complete if the organization answered "You fit the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for) above satisfy the requirements of servation easements in its revenue e footnote to the organization's finants of Art, Historical Treasures es" on Form 990, Part IV, line 8 16 (ASC 958), not to report in its republic exhibition, education, or recical statements that describes the 16 (ASC 958), to report in its rever	f section 170(h)(4)(B)(i) Yes No e and expense statement, and ancial statements that describes s, or Other Similar Assets. 8. evenue statement and balance sheet works of esearch in furtherance of public service, ese items nue statement and balance sheet works of art,
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement of the organization. Complete if the organization answered "Your If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final if the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put) above satisfy the requirements of servation easements in its revenue e footnote to the organization's finants of Art, Historical Treasures es" on Form 990, Part IV, line 8 16 (ASC 958), not to report in its republic exhibition, education, or recical statements that describes the 16 (ASC 958), to report in its rever	revenue statement and balance sheet works of esearch in furtherance of public service, provide the infurtherance of public service, provide the
(Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement. Organizations Maintaining Collections Complete if the organization answered "You art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final fit the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items Revenue included on Form 990, Part VIII, line 1) above satisfy the requirements of servation easements in its revenue e footnote to the organization's finants of Art, Historical Treasures es" on Form 990, Part IV, line 8 16 (ASC 958), not to report in its republic exhibition, education, or recical statements that describes the 16 (ASC 958), to report in its rever	f section 170(h)(4)(B)(I) Yes No e and expense statement, and ancial statements that describes s, or Other Similar Assets. 8. evenue statement and balance sheet works of esearch in furtherance of public service, ese items nue statement and balance sheet works of art,
, (i	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement. Organizations Maintaining Collections Complete if the organization answered "Your If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its fina If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items) above satisfy the requirements of servation easements in its revenue e footnote to the organization's finants of Art, Historical Treasures es" on Form 990, Part IV, line \$16 (ASC 958), not to report in its republic exhibition, education, or resocial statements that describes the 16 (ASC 958), to report in its reversible exhibition, education, or researched the control of the same and the control of the same and the control of the same and the control of the contr	f section 170(h)(4)(B)(i) Yes No and expense statement, and ancial statements that describes s, or Other Similar Assets. 8. revenue statement and balance sheet works of search in furtherance of public service, see items nue statement and balance sheet works of art, rich in furtherance of public service, provide the \$\$\\$ \\$\$\$\$ \$
· (i	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement organization's accounting for conservation easement organizations. Complete if the organization answered "Your If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finate organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets held for put following amounts relating to these items) above satisfy the requirements of servation easements in its revenue e footnote to the organization's finants of Art, Historical Treasures es" on Form 990, Part IV, line \$16 (ASC 958), not to report in its republic exhibition, education, or resocial statements that describes the 16 (ASC 958), to report in its reversible exhibition, education, or researched the control of the same and the control of the same and the control of the same and the control of the contr	f section 170(h)(4)(B)(i) Yes No and expense statement, and ancial statements that describes s, or Other Similar Assets. 8. revenue statement and balance sheet works of search in furtherance of public service, see items nue statement and balance sheet works of art, rich in furtherance of public service, provide the \$\$\begin{array}{c} \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$

Par	t IIII	Organizations Ma	aintaining Col	lections o	f Art, H	istori	cal Tr	eas	ures, or	Other	Simila	r Assets ((contın	ued)
3		the organization's acqu (check all that apply)	uisition, accessior	n, and other	records,	check a	any of	the fo	ollowing t	hat are a	significa	ant use of it	s colle	ction
а		Public exhibition				d		Loar	or excha	ange prog	rams			
b		Scholarly research				e		Othe	er					
С		Preservation for future	generations											
4	Provid Part X	de a description of the c	organization's coll	lections and	explain h	now the	y furth	er th	ie organiz	ation's ex	empt p	urpose in		
5	Durin	g the year, did the orga s to be sold to raise fun									ıılar	□ Y	es	□ No
Pa	rt IV	Escrow and Custo Complete if the org X, line 21.			on For	m 990	, Part	IV, I	ine 9, oi	reporte	ed an ar	mount on	Form	990, Part
1a		organization an agent, led on Form 990, Part X		an or other II	ntermedı	ary for	contrib	oution	ns or othe	er assets	not	☐ Y	es	□ No
b	If "Ye	s," explain the arrange	ment in Part XIII	and comple	te the fol	lowing	table					Amount	:	
С	Begin	nıng balance								1c				
d	Addıtı	ons during the year								1d				
е	Dıstrıl	butions during the year	•							1e				
f	Endin	g balance								1f				
2 a	Did th	ne organization include	an amount on Fo	rm 990, Part	t X, line 2	21, for	escrow	or c	ustodial a	ccount lia	bility? .	🗆 Y	es	□ No
b	If "Ye	s," explain the arranger	ment ın Part XIII	Check here	If the ex	planatı	on has	beer	provided	d in Part)	KIII	🗆		
Pā	rt V	Endowment Fund	is. Complete ıf	the organi	zation a	nswer	ed "Ye	es" o	n Form	990, Par	t IV, lır	ne 10.		
_	_			(a)Current		19 (d)	rior year	$\overline{}$	(c)Two ye	ears back	(d)Thre	e years back	(e) Fo	ur years back
	-	ing of year balance .			95,628		100	,000		100.000				
		outions	1.1		1,533			628		100,000				
		estment earnings, gain	•		5,000									
			•		3,000			,000						
	and pro	expenditures for facilitie ograms	? S											
		strative expenses .						_						
g	End of	year balance			92,161		95	,628		100,000				
2		de the estimated percer	=	ent year end	balance	(line 1g	g, colur	nn (a	a)) held a	s				
а		designated or quasi-er	ndowment >											
b		anent endowment 🟲												
С		orarily restricted endow		000 %	.0.4									
3а	Are th	ercentages on lines 2a, nere endowment funds i	•			on that	are he	eld ar	nd admini	stered fo	r the		г	
	-	ization by irelated organizations		_								Гэ	Ba(i)	Yes No
		elated organizations						• •					a(ii)	No
Ь		s" on 3a(II), are the rela		s listed as re	equired o	n Sche	dule R					. 🗕	3b	
4	Descr	ibe in Part XIII the inte	nded uses of the	organization	n's endow	ment f	unds							<u></u>
Pa	rt VI	Land, Buildings, a Complete if the org			on For	m 990	. Part	IV. I	ine 11a	See Foi	m 990	. Part X. lı	ne 10	
	Descri	ption of property	(a) Cost or oth (investme	er basis	(b) Cost					umulated o				ok value
1a	Land													
b	Building	gs												
С	Leaseh	old improvements												
d	Equipm	nent												
е	Other													
Tat	م ۸۵۵	lines 12 through 1e /Co	lump (d) must se	aual Form OC	20 Part	/ colum	nn (P)	line	10(c)					

Part VII	Investments—Other Securities. Complete if th	e org	anızatıon ansv	vered "Yes" or	Form 990, Pa	rt IV, line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category	(b) Book value	C	(c) Method of v	
(1) Financia	(including name of security)			Cos	t or end-of-year	market value
(2) Closely-I (3) Other	held equity interests					
(A) POOLED (B)	INVESTMENT FUND		27,760,410		F	
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Part VIII	n (b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related.		27,760,410			
	Complete if the organization answered 'Yes' on F (a) Description of investment		990, Part IV, lı (b) Book value		orm 990, Part :	
(1)	(1, 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2		(2, 200)		t or end-of-year	
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9) ————						
Total. (Column	on (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answered	• 'Yes'	on Form 990. Pa	art IV. line 11d	See Form 990. P	art X. line 15
	(a) Description					(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete If the organization a	nswei	red 'Yes' on Fo	rm 990, Part	▶ IV. line 11e or	11f.
1.	See Form 990, Part X, line 25. (a) Description of liability			ook value		
(1) Federal			(-7-	0		
DUE TO RELA	ATED ORGANIZATION			2,542		
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 25)		>	2,542		All a k a sa a sa a sa a sa a sa a sa a s
	or uncertain tax positions In Part XIII, provide the text of s liability for uncertain tax positions under FIN 48 (ASC 7					

Part XI

2

b

C

Part XII

5

1

2

c

d

3

4

b

5

Part XIII

See Additional Data Table

Schedule D (Form 990) 2018

Page 4

189,870

127,128

2,154,752

6,775,712

2,921,773

3,853,939

127,128

3.981.067

Schedule D (Form 990) 2018

2,027,624

а	Net unrealized gains (losses) on investments .
b	Donated services and use of facilities
С	Recoveries of prior year grants
d	Other (Describe in Part XIII)
е	Add lines 2a through 2d
3	Subtract line 2e from line 1
4	American maked an Farm 000 Dark VIII lose 13

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Amounts included on Form 990, Part VIII, line 12, but not on line 1

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

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

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

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Supplemental Information

Add lines 2a through 2d . .

Return Reference

Add lines **4a** and **4b**

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

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

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

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

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

4a 4b

> 2a 2b

2c

2d

4a

4b

Explanation

2a

2b

2c 2d

127,128

2,971,223

-49,450

127,128

-2,781,353

2.971.223

4c 5 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

2e

3

4c

5

2e

3

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	nation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID: Software Version:

EIN: 20-0863779

Name: FINRA INVESTOR EDUCATION FOUNDATION

Supplemental Information

Return Reference

Explanation

ASC740 FOOTNOTE THE FINRA INVESTOR EDUCATION FOUNDATION (THE FOUNDATION) IS A TAX-EXEMPT O RGANIZATION UNDER SECTION 501(C)(4)OF THE INTERNAL REVENUE CODE FOR YEARS ENDED DECEMBER 31, 2015 THROUGH DECEMBER 31, 2018, WHICH REPRESENT THE PERIODS MANAGEMENT CONSIDERS TO BE OPEN FOR EXAMINATION BY TAXING AUTHORITIES, MANAGEMENT DID NOT IDENTIFY THE EXISTENCE OF ANY UNCERTAIN TAX POSITIONS UNRELATED BUSINESS INCOME UNRELATED BUSINESS INCOME ACTIVITIES ARE TAXED AT NORMAL CORPORATE RATES TO THE EXTENT THAT THEY GENERATE TAXABLE NET INCOME SUCH UNRELATED BUSINESS INCOME MAY BE GENERATED BY CERTAIN ACTIVITIES WITHIN THE FOUNDATI ON'S LIMITED PARTNERSHIP INVESTMENT AS OF DECEMBER 31, 2017, THE FOUNDATION FULLY REDEEME D ITS INTEREST IN THE LIMITED PARTNERSHIP SCHEDULE D, PART XII, LINE 2D AMOUNTS INCLUDED ON LINE 1 BUT NOT ON FORM 990, PART IX, LINE 25 RELATE TO REFUNDS OF PRIOR YEAR'S UNUSED G

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART V, LINE 4	IN 2016, THE FINANCIAL INDUSTRY REGULATORY AUTHORITY, INC (FINRA) CONTRIBUTED A ONE-TIME DONOR-RESTRICTED CONTRIBUTION OF \$0 1 MILLION TO THE FOUNDATION THE DONOR-RESTRICTED CONTRIBUTION FUNDED THE KETCHUM PRIZE FUND, NAMED FOR FORMER FINRA CHAIRMAN AND CHIEF EXECUTIVE OFFICER AND FOUNDATION CHAIRMAN RICHARD GENERAL TO AWARD AN ANNUAL PRIZE IN HONOR OF EXEMPLARY CONTRIBUTIONS TO THE FIELD OF INVESTOR PROTECTION AND FINANCIAL CAPABILITY IN THE UNITED STATES

Cupplemental Information

f the organics www.irs. Activities zation ma	Attach to Attach to Actach to Actac	Outside the University of the Post of States o	ine 14b, 1	Employer ider 20-0863779 organization a	OMB No 1545-0047 2018 Open to Public Inspection Intification number answered "Yes" to
Activities	► Attach to a gov/Form990 for in a gov/Form990 for	o Form 990. Instructions and the latest in	te if the	Employer ider 20-0863779 organization a	Open to Public Inspection ntification number
Activities	s Outside the U	nstructions and the latest in	te if the	Employer ider 20-0863779 organization a	Open to Public Inspection ntification number
Activities	s Outside the U	Jnited States. Comple	te if the	Employer ider 20-0863779 organization a	Inspection
zation ma	intain records to	·		20-0863779 organization a	
zation ma	intain records to	·		organization a	answered "Yes" to
zation ma	intain records to	·		organization a	answered "Yes" to
		substantiate the amount	<i>.</i>		
bility for t	L		of its gr	rants and	
	ne grants or assis	stance, and the selection	criteria	used	
					☐ Yes ☐ No
V the org	janization's proce	dures for monitoring the	use of it	ts grants and ot	ther assistance
rt I, line 3	table can be dupli	cated if additional space is	needed)	
Number of fices in the region			program spe	n sérvice, describe ecific type of	a (f) Total expenditures for and investments in region
C	0	Investments			27,760,410
					27,760,410
	rt I, line 3 Number of fices in the region	rt I, line 3 table can be dupli Number of ices in the region (c) Number of employees, agents, and independent contractors in region 0 0 0	rt I, line 3 table can be duplicated if additional space is Number of ices in the region (c) Number of employees, agents, and independent contractors in region 0 0 0 0 0 0 0	rt I, line 3 table can be duplicated if additional space is needed. Number of ices in the region (c) Number of employees, agents, and independent contractors in region 0 0 1 0 0 0 0 0 0 0 0 0 0	region the region and independent contractors in region (by type) (e.g., fundraising, program service, describe specific type of service(s) in region 0

(3)							
(4)							
	•		•	•	•	•	

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

(16)

(17) (18) Page 3

Schedule F (Form 990) 2018

Part III can be duplicated if additional space is needed.											
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)				
(1)											
(2)											
(3)											

(4) (5)

(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
(12)				
(13)				
(14)				

(7)				
(8)				
(9)				
(10)				
(11)				
(12)				
(13)				
(14)				
(15)				

Sched	dule F (Form 990) 2018		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)	□Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	L les	E NO
		✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	✓ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☑ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the		
U	organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)	☐Yes	☑ No

scnedule F (Forn	n 990) 2018	Page
Pro am me	nounts of investments vs.	uired by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method expenditures per region); Part II, line 1 (accounting method); Part III (accounting nn (c) (estimated number of recipients), as applicable. Also complete this part to provide
Re	eturnReference	Explanation
•		
•	_	

Schedule F (Form 990) 2018

DLN: 93493319105129 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasurv Internal Revenue Service Name of the organization Employer identification number FINRA INVESTOR EDUCATION FOUNDATION 20-0863779 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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 (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (1) See Additional Data (2) (5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

ichedule I (Form 990) 2018 Part III Grants and Other Ass	istance to Domestic Indiv	/iduals. Complete if the orga	anization answered "Yes"	on Form 990. Part IV. line 22	Page 2		
	ed if additional space is need	ded	(d) Amount of	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance		
(1) 2018 KETCHUM PRIZE FOR INVES PROTECTION		1 10,000		COST	GIFT		
2)							
3)							
4)							
5)							
6)							
7)							
Part IV Supplemental I	nformation. Provide the	e information required in	Part I, line 2; Part III,	column (b); and any other	additional information.		
Return Reference	Explanation						
	LAUNCH A SUSTAINABLE PR LIBRARIES IN OKLAHOMA - FINANCIAL EDUCATION MOI FAMILIES, SENIOR CITIZEN: AND STATE PARTNERS, PRO THEIR FINANCIAL FUNDAME INVESTING@YOUR LIBRARY CAPABILITY OF IOWA'S LIBF DEVELOPMENT, CAPACITY B LIBRARIANS, TEACHERS, AN IMPROVE THEIR FINANCIAL AND ESTATE PLANNING TH INTO ALL PARTS OF THE ST. FINRA FOUNDATION'S NATI DISABILITY INSTITUTE (ND: DISABILITY TYPE AND SOCI IMPLEMENTING FINANCIAL THROUGH INTERACTION TI RESEARCH, USED ITS EXPEI BEHAVIOR, DISCLOSURE UN IMPACT CONSUMERS' WILLI SOUND INVESTMENT DECIS USING A NATIONALLY REPR STATE DATA, TO INVESTIGA DELINQUENT-DEBT DECISIC RELATE TO FAMILIES' CHAR DECISIONS TO LEARN MOR SKILLS AND TOOLS TO MAK	COGRAM TO PROVIDE WORKI (73-1053431) SMART INVES DE TO LIBRARIES ACROSS T S, YOUNG ADULTS, AND LOV MPTS PARTICIPANTS TO MA INTALS WHILE POSITIONING I IOWA STATE UNIVERSITY RARIANS AND OTHER PUBLIC ULIDING, AND INCENTIVIZE ND OTHER MUNICIPAL AND C SKILLS AND KNOWLEDGE T E PROJECT BLENDS FACE-TO ATE NATIONAL DISABILITY ONAL FINANCIAL CAPABILIT I) EXAMINED THE IMPACT OF OECONOMIC AND DEMOGRA EDUCATION PROGRAMS FOR HE NEW YORK UNIVERSITY, RIMENTAL ONLINE SAVING F NDERSTANDING, AND PERCE USONS URBAN INSTITUTE - (ESENTATIVE CREDIT BUREA ATE WHICH BILLS FAMILIES ONS THAT MINIMIZE FINANC ACTERISTICS AND WHETHER E ABOUT THE OTHER WAYS E SOUND DECISIONS THROR	PLACE FINANCIÀL WELLN ETING@YOUR LIBRARY F HE STATE, GIVING PRIM W-INCOME HOUSEHOLDS KE CONCRETE CHANGES THEM TO BEGIN INVES EXTENSION IS WORKING EMPLOYEES THE PROJ ED GAME-BASED LEARNII COUNTY EMPLOYEES) FOI THE LEARNING ADDRESS O-FACE AND ONLINE LEA INSTITUTE - (20-420583 Y STUDY, INCLUDING SI F DISABILITY ON FINANC PHIC CHARACTERISTICS IN PARTNERSHIP WITH T PLATFORM TO STUDY THE PTION OF MAKING INFO E OF FUNDS, UNDERSTA 52-0880375) DELINQUE U DATABASE, ALONG WI DECIDE TO STOP PAYING IAL HARM OVER TIME U R CONSUMERS WITH BET THE FOUNDATION IS FU UGHOUT LIFE THROUGH	IESŚ SERVICES TARGETING LOW RIENDS OF LIBRARIES IN OKLA ARY ATTENTION TO MEETING THE THIS FINANCIAL FITNESS SERVICES TO THEIR PERSONAL FINANCE IF THE FINANCE IS IN PARTNERSHIP WITH THE STEET COMBINES ELEMENTS OF WORLD IN THE SERVICE FINANCIAL PLANNING, CREDING WHILE LEVERAGING THE SES FINANCIAL CAPABILITY OF A CAPACITY NOI ALSO STUDIES OF THE FINDINGS PROVIDE INFORMED THE FINDING PROVIDE INFORMED THE UNIVERSITY OF SOUTHERN SEFFECTS OF INTERACTIVE ONLE REFECTS OF INTERACTIVE ONLE PRODUCTION OF INVESTMENT PRODUCTION OF INVESTMENT PRODUCTION OF INVESTMENT PRODUCTION OF INTERACTIVE ONLE PRODUCTION OF INVESTMENT PRODUCTION OF INVESTMENT PRODUCTION OF INVESTMENT PRODUCTION OF INTERACTIVE ONLE PRODUCTION OF INTERACTIVE ONLE PRODUCTION OF INTERACTIVE ONLE PRODUCTION OF INVESTMENT PRODUCTION OF INTERACTIVE ONLE PRODUCTION ONLE PRODUCTI	Dregon IS COLLABORATING WITH EMPLOYERS TO V- TO MODERATE-INCOME EMPLOYEES FRIENDS OF HOMA (FOLIO) IS EXPANDING A SUCCESSFUL HE NEEDS OF MILITARY PERSONNEL AND THEIR LIES, DELIVERED IN COLLABORATION WITH LOCAL PRACTICES AND HELPS THEM GAIN CONTROL OF TOWN STATE UNIVERSITY - (42-6004224) SMART THE LIBRARY OF IOWA TO BUILD THE FINANCIAL FORKPLACE FINANCIAL EDUCATION, PROFESSIONAL FOR STATE WELL-POSITIONED TO HELP OTHERS OF THEY ARE WELL-POSITIONED TO HELP OTHERS OF THEY ARE WELL-POSITIONED TO HELP OTHERS OF THEY ARE WELL-POSITIONED TO HELP OTHERS OF THE BUREAU OF LABOR STATISTICS, THE NATIONAL IED HOW FINANCIAL CAPABILITY VARIES BY RMATION CRITICAL FOR DEVELOPING AND (13-5562308) TRANSFORMING DISCLOSURE CALIFORNIA'S CENTER FOR ECONOMIC AND SOCIAL LINE DISCLOSURES ON CONSUMERS' INVESTMENT AS EXAMINED HOW INTERACTIVE DISCLOSURES CONSEQUENCES OVER TIME RESEARCHERS ARE MATIONAL FINANCIAL CAPABILITY STUDY STATE-BY-STRESS, AND WHETHER FAMILES MAKE WITH THE KNOWLEDGE, SERVICES, PLEASE REFER TO SCHEDULE O		
ORM 990, SCHEDULE I, LINE 2	DESCRIPTION OF ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANTS FOLLOWING APPROVAL OF A GRANT APPLICATION BY THE BOARD OF DIRECTORS, THE FOUNDATION EXECUTES A GRANT AGREEMENT WITH THE APPLICANT THIS AGREEMENT SPECIFIES THE TERMS AND CONDITIONS OF THE GRANT, AS WELL AS THE REPORTING AND PAYMENT SCHEDULE NARRATIVE AND FINANCIAL PROGRESS REPORTS AND ALL DELIVERABLES ARE REVIEWED BY THE FOUNDATION TO ENSURE QUALITY AND COMPLIANCE WITH THE GRANT AGREEMENT IN ADDITION TO PROGRESS REPORTS, GRANTEES ARE REQUIRED TO COMPLETE A FINAL NARRATIVE AND FINANCIAL REPORT DETAILING PROJECT OUTCOMES AND ACCOUNTING FOR THE USE OF FUNDS						

Additional Data

IDAHO PO BOX 190123 BOISE, ID 83719 CATHOLIC CHARITIES OF

OREGON

2740 SE POWELL BLVD PORTLAND, OR 97202

Software ID:

93-0386801

Software Version: EIN: 20-0863779

Name: FINRA INVESTOR EDUCATION FOUNDATION

Form 990,Schedule I, Part	II, Grants and	Other Assistance to	o Domestic Organiza	tions and Domest	ic Governments.	
(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	Γ

organization or government		ıf applıcable	grant	cash assistance	(book, FMV, appraisal, other)
CATHOLIC CHARITIES OF	82-0524367	501(C)(3)	20,000		

501(C)(3)

20,000

(g) Description of non-cash assistance

(h) Purpose of grant or assistance

SCHEDULE I, PART IV

SCHEDULE I, PART IV

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 73-1053431 501(C)(3) 45.770 FRIENDS OF LIBRARIES IN SCHEDULE I. PART IV OKLAHOMA

PO BOX 702585 TULSA. OK 74170

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

AMES, IA 50011

IOWA STATE UNIVERSITY 42-6004224 501(C)(3) 59.739 ISCHEDULE I. PART IV 505 MORRILL ROAD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 20-4205838 501(C)(3) 50.000 SCHEDULE I. PART IV NATIONAL DISABILITY INSTITUTE

1667 K STREET NW WASHINGTON, DC 20006

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

105 EAST 17TH ST NEW YORK, NY 10003

NEW YORK UNIVERSITY 13-5562308 501(C)(3) 30.349 ISCHEDULE I. PART IV

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

URBAN INSTITUTE 52-0880375 501(C)(3) 51,900 SCHEDULE I, PART IV 500 LENFANT PLAZA SW

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

WASHINGTON, DC 20024

efil	e GRAPHIC pr	rint - DO NOT PROCESS As Filed Data -	DLN: 9349	331	9105	129	
Schedule J		Compensation Information	ОМЕ	3 No	1545-(047	
(For	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highe	est				
		Compensated Employees ► Complete if the organization answered "Yes" on Form 990, Part IV, I	ine 23.	2018			
_	► Attach to Form 990.						
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/Form990</u> for instructions and the latest informa			o Pul ectio		
	me of the organiza	ACTION FOUNDATION	mployer identification	n nu	mber		
LIINI	RA INVESTOR EDUCA		0-0863779				
Pa	rt I Questi	ons Regarding Compensation					
			F		Yes	No	
1a		opiate box(es) if the organization provided any of the following to or for a person listed of Section A, line 1a Complete Part III to provide any relevant information regarding these					
		s or charter travel Housing allowance or residence for pe					
	_	r companions \square Payments for business use of persona					
		inification and gross-up payments Health or social club dues or initiation					
	LI Discretion	nary spending account \square Personal services (e g , maid, chauffe	ur, cher)				
b		oxes in line 1a are checked, did the organization follow a written policy regarding paymet all of the expenses described above? If "No," complete Part III to explain	nt or reimbursement	1b			
2		ation require substantiation prior to reimbursing or allowing expenses incurred by all ees, officers, including the CEO/Executive Director, regarding the items checked in line 1	-3	2			
	directors, truste	ees, officers, including the CEO/Executive Director, regarding the items checked in line 1	.ar				
3		If any, of the following the filing organization used to establish the compensation of the					
		CEO/Executive Director Check all that apply Do not check any boxes for methods ed organization to establish compensation of the CEO/Executive Director, but explain in	Part III				
	Componer	Western committee					
		eation committee					
		of other organizations Deficient compensation survey of study Approval by the board or compensation	on committee				
4	During the year	r, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filir					
	related organiza	ation					
а		rance payment or change-of-control payment?		4a		No	
b	•	or receive payment from, a supplemental nonqualified retirement plan?	_	4b	Yes		
С		or receive payment from, an equity-based compensation arrangement? of lines 4a-c, list the persons and provide the applicable amounts for each item in Part I	-	4c		No_	
	ii ies to any c	or lines for each term in rate applicable amounts for each term in rate a	••				
	Only 501(c)(3	3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5		ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any contingent on the revenues of					
а	The organization	n ²		5a		No	
b	Any related orga			5b		No	
_	-	e 5a or 5b, describe in Part III					
6		ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any contingent on the net earnings of					
a	The organization		_	6a		No	
b	Any related orga	lanization? e 6a or 6b, describe in Part III	-	6b		No_	
7	•	•					
7	payments not d	ted on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed described in lines 5 and 6? If "Yes," describe in Part III		7		No	
8		unts reported on Form 990, Part VII, paid or accured pursuant to a contract that was nitial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," desc	cribe	8		No	
9	If "Yes" on line 3 53 4958-6(c)?	8, did the organization also follow the rebuttable presumption procedure described in Re	egulations section	9			
For I	Danarwark Badı	uction Act Notice, see the Instructions for Form 990. Cat. No. 500	053T Schedule 1 (Form	990)	2018	

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 (i) Base compensation	of W-2 and/or 1099-MIS (ii) Bonus & incentive compensation	C compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990			
1 ROBERT W COOK CHAIRMAN	(i)	0	0	0	0	0	0	0			
	(ii)	981,342	1,350,000	26,815	520,268	1,947	2,880,372				
2 GERALDINE M WALSH PRESIDENT	(i)	0	0	0	0	0	0	0			
	(ii)	292,101	191,000	38,146	83,441	19,880	624,568				
3 EILEEN M FAMIGLIETTI TREASURER	(i)	0	0	0	0	0	0	0			
	(ii)	269,401	119,300	2,107	30,660	46,160	467,628				
4 JENNIFER P MITCHELL CORPORATE SECRETARY	(i)	0	0	0	0	0	0	0			
	(ii)	200,996	121,600	6,803	36,500	44,713	410,612				
5 MARCIA E ASQUITH FMR CORPORATE SECRETARY	(i)	0	0	0	0	0	0	0			
	(ii)	340,953	370,000	39,680	115,437	33,978	900,048				
								1/5 000) 2010			

Page 3

Schedule J (Form 990) 2018

THOSE NOT PARTICIPATING IN THE CLOSED NON-QUALIFIED DEFINED BENEFIT PLAN IT IS A FINRA FUNDED PLAN WITH A THREE YEAR VESTING CYCLE WITH ANNUAL VESTING BEGINNING AT AGE 62 NO PARTICIPANTS IN THE SUPPLEMENTAL NON-QUALIFIED DEFINED CONTRIBUTION PLAN HAD A VESTING EVENT OR RECEIVED A PAYOUT DURING TAX YEAR 2018 DECREASES IN ACTUARIAL VALUE OF CERTAIN EMPLOYEES' BENEFIT PLANS ARE REPORTED BELOW THESE IAMOUNTS ARE EXCLUDED FROM SCHEDULE J. COLUMN C IN ORDER TO AVOID DISTORTION OF TOTAL COMPENSATION PARTICIPANTS IN THE FOUNDATION'S EMPLOYEE RETIREMENT PLAN WHO HAD A DECREASE IN ACTUARIAL VALUE IN 2018 INCLUDE MARCIA E ASQUITH - (\$62,142) EILEEN M FAMIGLIETTI -(\$32,258) JENNIFER PIORKO-MITCHELL - (\$36,540) GERALDINE M WALSH - (\$47,546)

2018 Schedule 1

efile GRAPH	IIC print -	DO NOT PROCESS	As Filed Data -		DLN:	93493319105129			
SCHEDUL	ΕO	Cumplamani	hal lufa was atta	to Form 000 or 0	00 57	OMB No 1545-0047			
(Form 990 or 990- EZ)		Supplement Complete to pro Form 990 c	ons on	2018					
Department of the T	Freasury	► Go to <u>v</u>		Open to Public Inspection					
Name Betherore		UNDATION			Employer identi	fication number			
FINKA INVESTOR	EDUCATION FO	UNDATION			20-0863779				
Return Reference	e O, Suppl	O, Supplemental Information Explanation							
FORM 990, PART I, LINES 4 & 6	INDEPEND FORM 990, FOUNDATI NEITHER C COMPENS	ENT VOTING MEMBER PART VII, SECTION A, ON'S PARENT ONE BOCONSIDERED INDEPENATED FOR THEIR WOF	S AND SERVE ON A LINE 1A, THREE BO, DARD MEMBER RECI IDENT NOR COUNTE RK AS MEMBERS OF	DIRECTORS, ACTIVE ON DEC VOLUNTEER BASIS AS DISCI ARD MEMBERS RECEIVED CO EIVES COMPENSATION AS AN D AS A VOLUNTEER THE OTI THE BOARD OF FINRA AND A RECTORS IS RESPONSIBLE FO	OSED IN LINES (DMPENSATION FI I OFFICER OF FIN HER TWO BOARD RE CONSIDERED	(1), (7) AND (8) OF ROM FINRA, THE NRA AND IS D MEMBERS ARE D INDEPENDENT			

Return Reference	Explanation
FORM 990, PART III, LINE 4	THE FOUNDATION HELPS AMERICANS BUILD FINANCIAL CAPABILITY, INVEST FOR LIFE GOALS, AND GUAR D AGAINST FRAUD THE FOUNDATIONS RESEARCH, MOREOVER, FURTHERS DIVERSE EFFORTS TO ADDRESS THE NEEDS OF INVESTORS, MILITARY SERVICE MEMBERS, AND LOWER-INCOME WORKING AMERICANS AND T HEIR FAMILIES MUCH OF THIS WORK IS ACCOMPLISHED IN PARTNERSHIP WITH ORGANIZATIONS THAT SHA ARE A DEEP COMMITMENT TO THE FOUNDATION'S MISSION THE FOUNDATION EMPOWERS ITS GRANTEES AN D PROGRAMMING PARTNERS TO REACH PEOPLE WHERE THEY LIVE, WORK AND LEARN IT FOCUSES ON BUIL DING CAPACITY AND NURTURING SUPPORTIVE NETWORKS THAT STAND READY AND WELL EQUIPPED TO GUID E AMERICANS THROUGH LIFE'S FINANCIAL DECISIONS AND CHALLENGES 4A) PROTECT CONSUMERS FROM FINANCIAL FRAUD (2018 ALLOCATION \$1,429,244) THE FOUNDATION EDUCATES AMERICANS ABOUT FINA NCIAL FRAUD, HOW TO AVOID AND REPORT IT, AND THE STEPS TO TAKE IF VICTIMIZED THROUGH RESE ARCH (ON FRAUD SUSCEPTIBILITY AND OTHER CRITICALLY IMPORTANT TOPICS), EDUCATION, AND OUTRE ACH, THE FOUNDATION INCREASES FRAUD PREVENTION AND AWARENESS, EMPOWERS CONSUMERS, AND TRAINS LAW ENFORCEMENT TO RECOGNIZE AND TAKE ACTION AGAINST FINANCIAL FRAUD NONPROFIT ORGANIZ ATIONS AND ACADEMIC INSTITUTIONS THAT HAVE ENTERED INTO PARTNERSHIP AGREEMENTS WITH THE FO UNDATION AS PART OF ITS INVESTOR PROTECTION CAMPAIGN INCLUDE THE FOLLOWING. AARP FOUNDATION, ALLIANCE FOR RETIRED AMERICANS, COMMONWEALTH, COUNCIL OF BETTER BUSINESS BUREAUS AND THE BBB INSTITUTE, FIRST NATIONS DEVELOPMENT INSTITUTE, NATIONAL CENTER FOR VICTIMS OF CRIME, NATIONAL TELEMARKETING VICTIM CALL CENTER, NATIONAL WHITE COLLAR CRIME CENTER, AND STANF ORD UNIVERSITY (THE STANFORD CENTER ON LONGEVITY) 4B) FOSTER SUSTAINABLE FINANCIAL EDUCATION (2018 ALLOCATION - \$957,537) THE FOUNDATION SUPPORTS AND MANAGES PERSONAL FINANCIAL PROPERS ON THE FORD COMMUNITY PROVIDE WORKPLACE FINANCIAL WELLESS SERVICES FOR LOWER-INCOME EMPLOYERS IN ALL SECTORS OF THE ECONOMY MAKE FINANCIAL WELLNESS A SEAMLESS PART OF THE WORKDAY THROUGH PROFESSIONAL DANDING FINANCIAL WELLNESS A SEAMLESS

990	Schedule	Ο,	Supplemental	Information

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Return Reference	Explanation
FORM 990, PART III, LINE 4	IBRARIES TO HELP PATRONS, YOUNG AND ADULT, LEARN ABOUT MONEY AND ACHIEVE FINANCIAL GOALS THIS SUPPORT HAS ENCOMPASSED THE DEVELOPMENT OF MODEL FINANCIAL EDUCATION PROGRAMS AND EXH IBITS AT LIBRARIES, COLLECTION DEVELOPMENT, ASSISTANCE FOR LIBRARIES HELPING FAMILIES RECO VER FINANCIALLY FROM MAJOR NATURAL DISASTERS, THE PROVISION OF JUST-IN-TIME INFORMATION MA TERIALS, AND GRANT FUNDING THE FOUNDATION ALSO HOSTS A FULL PLATFORM OF ONLINE STAFF DEVE LOPMENT COURSES CREATED BY AND FOR LIBRARY PROFESSIONALS 4(2) ADVANCE MILITARY FINANCIAL R EADINESS (2018 ALLOCATION \$679,389) THE FOUNDATION'S MILITARY FINANCIAL READINESS PROJECT DELIVERS FREE, HIGH-QUALITY, UNBIASED INFORMATION AND TOOLS TO MILITARY SERVICE MEMBERS AND THEIR FAMILIES THROUGH TRAINING, EDUCATION, AND OUTREACH, THE FOUNDATION INCREASES PERS ONAL FINANCIAL EXPERTISE AND SERVICES IN MILITARY COMMUNITIES, IMPROVES THE CREDIT MANAGEM ENT OF SERVICE MEMBERS AND THEIR SPOUSES, AND PROVIDES OUTREACH SERVICES TO THE MILITARY C OMMUNITY NONPROFIT ORGANIZATIONS THAT HAVE ENTERED INTO PARTINERSHIP AGREEMENTS WITH THE F OUNDATION AS PART OF THIS PROJECT INCLUDE THE FOLLOWING ASSOCIATION FOR FINANCIAL COUNSEL ING AND PLANNING EDUCATION, CONSUMER FEDERATION OF AMERICA, AND THE MILITARY FAMILY ADVISOR BY NETWORK 4D) TRACK AND COMMUNICATE FINANCIAL CAPABILITY (2018 ALLOCATION \$575,005) THE FOUNDATION CONDUCTS THE NATIONAL FINANCIAL CAPABILITY STUDY (NFCS), A LARGE-SCALE, MULTI-Y EAR PROJECT THAT ADVANCES COMPREHENSIVE UNDERSTANDING OF THE FINANCIAL CAPABILITY AND EVALUA TES HOW THESE INDICATORS VARY OVER TIME WITH UNDERLYING DEMOGRAPHIC, BEHAVIORAL, ATTITUDIN AL, AND FINANCIAL LITERACY CHARACTERISTICS THE NETGS, IN TURN, INSPIRES ADDITIONAL STUDIES ON MAJOR FINANCIAL LITERACY CHARACTERISTICS THE NETGS, IN TURN, INSPIRES ADDITIONAL STUDIES ON MAJOR FINANCIAL LITERACY CHARACTERISTICS THE NETGS, IN TURN, INSPIRES ADDITIONAL STUDIES ON FINANCIAL FREEDING IN COMMUNITIES NATIONAL THE FOUNDATION ERSEARCH GRANTS AS IDENTIFIED ON SCHED ULE, I THE FOUNDATION FINANCIAL FREEDIN

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Reference	Explanation
FORM 990,	LINE 6 - THE FINANCIAL INDUSTRY REGULATORY AUTHORITY, INC. (FINRA) IS THE SOLE MEMBER OF THE
PART VI,	FOUNDATION LINE 7A - FINRA, AS SOLE MEMBER, ELECTS ALL MEMBERS OF THE GOVERNING BODY LINE 7B - THE
LINES 6, 7A	BYLAWS OF THE CORPORATION MAY BE AMENDED BY THE SOLE MEMBER, FINRA THE CERTIFICATE OF
AND 7B	NCORPORATION OF THE CORPORATION MAY BE AMENDED OR REPEALED IN WHOLE OR IN PART ONLY WITH THE
	AFFIRMATIVE APPROVAL OF THE MEMBER. FINRA

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Return Explanation

Ttororonoo	
FORM 990,	THE FORM 990 WAS REVIEWED BY SENIOR MANAGEMENT AT VARIOUS STEPS THROUGHOUT THE PREPARATION
PART VI,	CYCLE THE FOUNDATION BOARD REVIEWED THE FINAL VERSION ON OCTOBER 3, 2019
LINE 11B	

Return Reference	Explanation								
FORM 990, PART VI	EMPLOYMENT RULES AND POLICIES THE FOUNDATION DOES NOT HAVE ANY EMPLOYEES ALL SERVICES ARE PROVIDED BY EMPLOYEES OF FINRA THE FOUNDATION DOES NOT PAY FOR THEIR SERVICES AS SUCH, THOSE INDIVIDUALS ARE SUBJECT TO THE EMPLOYMENT RULES AND POLICIES OF FINRA FORM 990, PART VI, LINE 12C THE FOUNDATION HAS A WRITTEN CONFLICT OF INTEREST POLICY THAT GOVERNS THE PROFESSIONAL AND ETHICAL CONDUCT OF BOARD MEMBERS, OFFICERS AND STAFF AMONG OTHER THINGS, MEMBERS, OFFICERS, AND STAFF ARE PROHIBITED FROM DERIVING ANY PERSONAL PROFIT OR GAIN, DIRECTLY OR INDIRECTLY, BY REASON OF THEIR SERVICE TO THE FOUNDATION MOREOVER, THE POLICY EXPRESSLY PROHIBITS SELF-DEALING THE WRITTEN CONFLICT OF INTEREST POLICY REQUIRES BOARD MEMBERS AND OFFICERS TO MAKE INITIAL DISCLOSURE OF INTERESTS THAT COULD GIVE RISE TO CONFLICTS AS WELL AS ANNUAL DISCLOSURE BY THE SAME BOARD MEMBERS AND OFFICERS ADDITIONALLY, THE WRITTEN POLICY CONTAINS AN ONGOING OBLIGATION OF BOARD MEMBERS, OFFICERS AND STAFF TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST AS THEY ARISE THE ORGANIZATION'S OFFICERS AND STAFF ARE EMPLOYEES OF FINRA, AND, AS SUCH, ARE ALSO REQUIRED TO CERTIFY ANNUALLY AS TO THEIR COMPLIANCE WITH FINRA'S WRITTEN CONFLICT OF INTEREST POLICY FOR FURTHER INFORMATION REGARDING FINRA'S WRITTEN CONFLICT OF INTEREST POLICY, PLEASE REFER TO THE 2018 RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX - FORM 990 FOR THE FOUNDATION'S PARENT ORGANIZATION, THE FINANCIAL INDUSTRY REGULATORY AUTHORITY, INC								

Return Reference	Explanation
FORM 990, PART VI, LINES 15A AND 15B	THE FOUNDATION DOES NOT HAVE ANY EMPLOYEES ALL SERVICES ARE PROVIDED BY EMPLOYEES OF FINRA THE FOUNDATION DOES NOT COMPENSATE THESE EMPLOYEES OF FINRA FOR THEIR SERVICE THE PRESIDENT OF THE FOUNDATION SERVES AS THE LEAD OFFICER DIRECTING THE ACTIVITIES OF THE ORGANIZATION IN DETERMINING SPECIFIC SALARY AND INCENTIVE COMPENSATION LEVELS FOR OFFICERS AND KEY EMPLOYEES OF FINRA, FINRA MANAGEMENT AND THE MANAGEMENT COMPENSATION COMMITTEE (THE "COMMITTEE") OF THE FINRA BOARD OF GOVERNORS CONSIDER 1) OPERATIONAL RESULTS 2) STRATEGIC INITIATIVES 3) FINANCIAL HEALTH/RESULTS 4) INDIVIDUAL PERFORMANCE 5) COMPETITIVE COMPENSATION LEVELS AS PREPARED BY MERCER, INC., A THIRD-PARTY COMPENSATION CONSULTANT THE COMMITTEE'S MINUTES OF THE MARCH 7, 2018 MEETING WERE REVIEWED AND APPROVED AS ACCURATE AND COMPLETE THE FULL BOARD FURTHER APPROVED THE 2017 INCENTIVE COMPENSATION OF THE CEO AT ITS MEETING ON MARCH 8, 2018 FOR FURTHER INFORMATION REGARDING THE COMPENSATION OF OFFICERS, PLEASE REFER TO THE 2018 RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX - FORM 990 FOR THE FOUNDATION'S PARENT ORGANIZATION, THE FINANCIAL INDUSTRY REGULATORY AUTHORITY, INC

Return Explanation

Reference	
FORM 990,	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND AUDITED FINANCIAL STATEMENTS AVAILABLE UPON
DADT \/I	DECHEST

PART VI, IREQUEST LINE 19

FUTURE

Return

Reference	
FORM 990,	AMERICAN LIBRARY ASSOCIATION - DEVELOPED AND CONDUCTED A COMPREHENSIVE FINANCIAL EDUCATION
PART VII,	INITIATIVE SERVING U.S. LIBRARIES ASSOCIATION FOR FINANCIAL COUNSELING AND PLANNING EDUCATION -
SECTION B	DEVELOPED AND MANAGED TRAINING AND CERTIFICATION PROGRAM FOR THE FOUNDATION MILITARY SPOUSE
	FELLOWSHIP PROGRAM, CREATED AND DELIVERED CONTENT FOR MILITARY FINANCIAL COUNSELOR CONTINUING
	EDUCATION PROGRAM APPLIED RESEARCH & CONSULTING - PROVIDED RESEARCH SERVICES FOR THE NATIONAL
	FINANCIAL CAPABILITY STUDY AS WELL AS CONSULTING SERVICES REGARDING STRATEGIC PLANNING AARP
	FOUNDATION - CONDUCTED PROACTIVE PEER COUNSELING TO VULNERABLE CONSUMERS AND VICTIMS OF
	FINANCIAL FRAUD NATIONAL CENTER FOR VICTIMS OF CRIME - DESIGNED, DEVELOPED AND IMPLEMENTED PLAN

Explanation

TO HELP ASSIST VICTIMS OF FINANCIAL FRAUD AND COUNSEL THEM ON HOW TO AVOID BECOMING TARGETS IN THE

990 Schedule O, Supplemental Information

Return

Refe	rence	· ·
FORM PART	,	OTHER CHANGES IN NET ASSETS OR FUND BALANCES PRIMARILY RELATE TO CONTRIBUTED SERVICES \$2,971,223, INVESTMENT EXPENSES \$127,128, AND THE REVERSAL OF GRANT EXPENSES RELATING TO PRIOR PERIODS
LINE 9		(\$49,450)

Explanation

Return Explanation
Reference

FORM 990 DESCRIPTION PARTNERSHIP SUPPORT/CONSULTING TOTAL FEES 2499117
PART IX
LINE 11G

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Related Organizations and Unrelated Partnerships

Related Organizations and Onleated Farthersin

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20-0863779

2018
Open to Public

DLN: 93493319105129

OMB No 1545-0047

Inspection
Employer identification number

Internal Revenue Service
Name of the organization

FINRA INVESTOR EDUCATION FOUNDATION

(Form 990)

Department of the Treasury

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

► Attach to Form 990.

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

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) (c) (d) (e) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) 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. (b) (c) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1) FINANCIAL IND REGULATORY AUTHORITY INC REGULATORY DE 501(C)(6) N/A NA No 1735 K STREET NW WASHINGTON, DC 20006 53-0088710 (2) FINRA REGULATION INC DE REGULATORY 501(C)(6) N/A **FINRA** No 1735 K STREET NW WASHINGTON, DC 20006 52-1959501 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2018

(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(relate unrelated, excluded fror tax under sections 512 514)	m total income	(g) Share of end-of-year assets	(I Disprop alloca	rtionate	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	ral or aging ner?	owner	ntage
.) HIGHVISTA II LP		INVESTMENT	DE	NA	N/A	0	0		No	0		No	0 %	, о
CLARENDON ST STON, MA 02116 0125223														
Identification of Related Organ because it had one or more related						ızatıon ans	wered "Ye	s" on I	orm s	990, Part I\	/, lın	e 34		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		Direc	(d) Direct controlling entity (e) Type of entity (C corp, S co		of entity Share of total, S corp, Income		(g) re of end year assets	d-of- Perd	(h) ercentage wnership		(I Section (13) cor enti	512 ntro
													165	
												I	i i	1

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		Yes	No								
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		No								
c Gift, grant, or capital contribution from related organization(s)	1c	Yes									
d Loans or loan guarantees to or for related organization(s)	1d		No								
e Loans or loan guarantees by related organization(s)	1e		No								
f Dividends from related organization(s)	1 f		No								
g Sale of assets to related organization(s)	1 g		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)	1 j		No								
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)	11		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)	10	Yes									

k Le	ase of facilities, equipment, or other assets from related organization(s)	1k		No
l Per	rformance of services or membership or fundraising solicitations for related organization(s)	11		No
m Per	rformance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sha	arıng of facılıtıes, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sh	naring of paid employees with related organization(s)	10	Yes	
p Re	embursement paid to related organization(s) for expenses	1р	Yes	
q Re	embursement paid by related organization(s) for expenses	1q		No
i				
r Otl	her transfer of cash or property to related organization(s)	1r		No
s Ot	her transfer of cash or property from related organization(s)	1s	Yes	

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

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

																			
(a) Name, address, and EIN of entity	(b) Primary activity		(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)			(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations? (f) Share of total income			(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or x managing partner?		(k) Percentage ownership	
İ			514)	Yes	No	ļ ,		Yes	No		Yes	No							
Schedule R (Form 990) 2018)) 2018							

