DLN: 93493204005120 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 01-01-2019 , and ending 12-31-2019 C Name of organization D Employer identification number B Check if applicable INFORMATION SYSTEMS AUDIT AND ☐ Address change CONTROL ASSOCIATION INC 23-7067291 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1700 EAST GOLF ROAD SUITE 400 ☐ Amended return (847) 253-1545 ☐ Application pending City or town, state or province, country, and ZIP or foreign postal code SCHAUMBURG, IL $\,$ 60173 $\,$ G Gross receipts \$ 78,512,097 Name and address of principal officer H(a) Is this a group return for DAVID A SAMUELSON □Yes ☑No subordinates? 1700 EAST GOLF ROAD SUITE 400 H(b) Are all subordinates CHAUMBURG, IL 60173 ☐ Yes ☐No included? Tax-exempt status 501(c)(3) ✓ 4947(a)(1) or If "No," attach a list (see instructions) 501(c) (6) ◀ (insert no) **H(c)** Group exemption number ▶ Website: ► WWW ISACA ORG L Year of formation 1969 **M** State of legal domicile IL K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities THE PRIMARY PURPOSE OF THE ASSOCIATION IS TO HELP PEOPLE AND ORGANIZATIONS (SEE SCHEDULE O) REALIZE THE POSITIVE POTENTIAL OF TECHNOLOGY 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) 5 218 Total number of individuals employed in calendar year 2019 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . . 981 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 669,690 b Net unrelated business taxable income from Form 990-T, line 39 7b 46,111 **Prior Year Current Year** 24,093,530 25,463,267 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . 29,480,528 32,053,309 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 2,987,101 990,639 7,949,517 9,832,020 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 68,339,235 64,510,676 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). 542,550 996,866 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 28,875,183 32,998,251 Expenses **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) . 37,518,480 34,181,125 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 66,936,213 68,176,242 19 Revenue less expenses Subtract line 18 from line 12 . -2,425,537 162,993 Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 99,820,655 122,658,745 48,920,926 21 Total liabilities (Part X, line 26) . 33,488,857 22 Net assets or fund balances Subtract line 21 from line 20 . 73.737.819 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 2020-07-21 Signature of officer Sign Here ROBERT A MICEK TREASURER & CFO Type or print name and title Print/Type preparer's name Preparer's signature Date Check | If 2020-07-21 P01273422 Paid self-employed Firm's name COHNREZNICK LLP Firm's EIN ▶ 22-1478099 Preparer Use Only Firm's address ► 4 BECKER FARM ROAD Phone no (973) 228-3500 ROSELAND, NJ 07068 ☑ 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 (2019) Cat No 11282Y

Form	990 (2019)				Page 2
Pa		t of Program Service Acc	omplishments note to any line in this Part III		🔽
1		organization's mission	The to any time in time i are in 1		
SEE :	SCHEDULE O				
2	Did the organization	ı undertake any sıgnıfıcant prog	gram services during the year which v	vere not listed on	
	the prior Form 990 o	or 990-EZ? ese new services on Schedule			☐ Yes ☑ No
3			gnificant changes in how it conducts, a	any program	
-	services?	ese changes on Schedule O			☐ Yes ☑ No
4	Describe the organiz Section 501(c)(3) ai	zation's program service accom	iplishments for each of its three large required to report the amount of gra ervice reported		
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data				
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data				
4c	(Code See Additional Data) (Expenses \$	including grants of \$) (Revenue \$)
	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	THAT ENABLES INNOV, PUBLICATIONS AND AG JOURNAL IS ISACA'S O ENHANCE THE PROFICI GUIDANCE FROM EXPE ISSUED BY ISACA INCLUSERS, TO PROVIDE TI ISACA MONTHLY E-NEV BOOKSTORE OFFERS A NEW SELECTIONS ARE EXPAND THE PLATFORN THAN 100,000 LISTENS PROVIDED TRANSLATIO OTHER RESEARCH PUB PORTUGUESE, SPANISI PRESCRIPTIVE OR SUGPENSAND AND AND AND AND AND AND AND AND AND	ATION THROUGH TECHNOLOGY TH ADDITION INFICIAL MAGAZINE ISSUED BIMON IENCY AND COMPETITIVE ADVANTA RIENCED GLOBAL AUTHORS IT IS JUDE @ISACA, A BIWEEKLY ELECTR HEM CASE STUDIES, INFORMATION WSLETTER, THE NEXUS CYBER NEV SELECTION OF PEER-REVIEWED PI ADDED REGULARLY, TO ENSURE TI MS AND LANGUAGES IN WHICH ITS IN 2019 AND EXPANDED TO BE FEONS OF 175 ITEMS AND PUBLICATI. LICATIONS LANGUAGES INCLUDEE H AND TURKISH ISACA ISSUES INFIGESTED GUIDANCE ON HOW AUDIT	ING PROFESSIONALS REALIZE THE POSITIVE ASSOCIATION ACHIEVES THOSE ACTIVIT TO THE ITEMS NOTED IN THE DESCRIPTIO ITHLY, AND SUPPLEMENTED IN THE OFF MG GE OF ITS INTERNATIONAL READERSHIP BY AVAILABLE IN DIGITAL FORMAT ON THE WIF ONLY NEW PRODUCTS AND EDUCATIONAL OWS CONVERGED, MEETS THE NEED FOR THIS IBLICATIONS ON PROFESSIONAL TOPICS OF THE CATALOG REMAINS CURRENT WITH CHACONTENT IS AVAILABLE TO ITS PROFESSIFIATURED ON ALL THE MAJOR PODCAST APPODOS, INCLUDING CERTIFICATION EXAMS, SO CHINESE (SIMPLIFIED AND TRADITIONAL ORMATION SYSTEMS AUDITING STANDARD OR EXISTING ONES ARE REVISED AS NEED	IES BY PROVIDING INFORMATION, S NS OF PROGRAM ACHIEVEMENTS 1, NTHS BY ONLINE ARTICLES, THE JO Y PROVIDING PEER-REVIEWED MANA EBSITE AND VIA MOBILE APP OTHER NEWS, AND COBIT FOCUS, ISSUED PPORTUNITIES, AND GENERAL TIPS E LATEST CYBERSECURITY INFORMA IF INTEREST TO ISACA MEMBERS, AT NGING TRENDS AND MEMBER NEED DONAL COMMUNITY THE ISACA PODO PROVIDERS, AND THE CONTENT AN STUDY AIDS, ISACA JOURNAL ARTICI), FRENCH, GERMAN, ITALIAN, JAPAI S, GUIDELINES AND PROCEDURES, RDS, GUIDELINES AND PROCEDURES	OTANDARDS, 2 AND 3) THE ISACA DURNAL SEEKS TO AGERIAL AND TECHNICAL R REGULAR PERIODICALS QUARTERLY TO COBIT AND TECHNIQUES AN FION THE ISACA F DISCOUNTED PRICES S ISACA CONTINUES TO CAST GARNERED MORE D PUBLICATIONS TEAM LES, COBIT 2019 AND NESE, KOREAN, WHICH PROVIDE S ARE CONTINUALLY
4d	Other program serv	ices (Describe in Schedule 0)			
	(Expenses \$	ıncluding g	grants of \$	(Revenue \$)

4e

Total program service expenses ▶

or X as applicable

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Nο 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . Nο Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Nο 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 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 🛸 . . Yes 5 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 No 6 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 💙 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"

Nο Nο

7 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 9 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

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete

total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 😼 d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete

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* Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII.

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

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

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

foreign organization? If "Yes," complete Schedule F, Parts II and IV 🛸

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

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?

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🥦

8 No 10 Yes

Yes 11a No 11b

No

Yes

Yes

Yes

Yes

Yes

Yes

Form **990** (2019)

Nο

Nο

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Nο

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No

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20h

21

Pai	Checklist of Required Schedules (continued)			Page 4
ı aı	Checkist of Required Schedules (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	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
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . . .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

No

Yes

Yes

117

0

1c

1a 1b

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	Statements Regarding Other IRS Filings and Tax Compliance (continued)								
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes						
3a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?								
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes						
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	4a		No					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No					
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	-		No					
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b 5c							
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c							
a	If "Yes," indicate the number of Forms 8282 filed during the year								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f							
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b							
10	Section 501(c)(7) organizations. Enter								
а	Initiation fees and capital contributions included on Part VIII, line 12 10a								
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter								
	Gross income from members or shareholders								
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	which the organization is licensed to issue qualified health plans								
	Enter the amount of reserves on hand	14a		No					
	14a		.10						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	Yes						
16	If "Yes," see instructions and file Form 4720, Schedule N Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O	16		No					

orm	990 (2019)			Page 6
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lines 🗹
Se	ction A. Governing Body and Management			1
	Enterthe months of outron control of the common had at the out of the territory of the		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 12	-		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? •	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
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 Revenu	<u>e Code</u>		I
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
h	Describe in Schedule O the process, if any, used by the organization to review this Form 990	114	165	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	124	163	
	conflicts?	12b	Yes	
	Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14 15	Did the organization have a written document retention and destruction policy?	14	Yes	
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15a	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	130	103	
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
	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		
Se	ction C. Disclosure			
17	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			
	only) available for public inspection. Indicate how you made these available. Check all that apply			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
. 7	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 ►ROBERT A MICEK 1700 EAST GOLF ROAD SUITE 400 SCHAUMBURG, IL 60173 (847) 253-1545			

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Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	/ees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	this	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	istees, Key E	mploy	ees	, an	id H	lighe	st C	Compensated En	nployees	
year .	e this table for all persons require		·						, ,		
of compensa	of the organization's current off ation Enter -0- in columns (D), (E), and (F) if no	compe	nsatı	on v	vas p	paid				
	of the organization's current key										
who receive	organization's five current high d reportable compensation (Box and any related organizations										
	of the organization's former office e compensation from the organiz						pensat	ed e	employees who rece	ived more than \$10	0,000
organızatıor	of the organization's former dire n, more than \$10,000 of reportab	le compensation	n from t								e
	ions for the order in which to list	•									
☐ Check t	this box if neither the organization		d orgar	nizatio			ensate	d ar	ny current officer, di	rector, or trustee	_
	(A) Name and title	(B) Average hours per week (list any hours for related	than o	ne b	ox, ι n of or/t	t che unles ficer rust	· and a ee)	on	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
See Addition	al Data Table										_
					_						
											_

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

Page 8

	(A) Name and title	(B) Average hours per week (list any hours for related	than o	one bo	ox, u an off tor/tr	t che unles	neck mo ess pers er and a tee)	son a	(D) Reportable compensation from the organization (W-2/1099-	portable Reportable compensation from related organizations		(F) Estimated amount of other compensation from the organization and		
		organizations below dotted line)		Institutional Trustee	Officei	key employee	Highest compensated employee	Former	MISC)	MISC)		relati organiza	ed	
See	Addıtıonal Data Table						\vdash							
							 	+						
				 			<u> </u>	 						
											+			
	Sub-Total						<u> </u> 	<u> </u>			 			
	Total from continuation sheets to Pa Total (add lines 1b and 1c)	•					>		5,755,194		0		357,042	
2	Total number of individuals (including of reportable compensation from the	g but not limited	d to thos				e) who) rec	eived more than \$1	00,000				
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule J</i>			tee, k [,] •	ey er	mpl	oyee,	or hı	ghest compensated	employee on	3	Yes Yes	No	
4	For any individual listed on line 1a, is organization and related organization individual									n the	4	Yes		
5	Did any person listed on line 1a receiv services rendered to the organization								_	ıvıdual for	5		No	
	ection B. Independent Contract					_								
1	Complete this table for your five higher from the organization. Report comper										npens	ation		
	<u> </u>	(A) and business addre					· ·			(B) cription of services		(C		
615 N	NTIUM N NASH ST 303	Illu business u	155							k E-COMMERCE	1	Compensation 1,752,720		
	EGUNDO, CA 90245 ENBERG TRAURIG LLP				—	—			LEGAL SERV	/ICFS	\dashv	991,374		
77 EA	AST WACKER DRIVE AGO, IL 60601											991,374		
РОВ	DITTE & TOUCHE LLP 30X 844708 AS, TX 752844708								TRAINING S	SUPPORT SERVICES			451,610	
	NREZNICK LLP								ACCOUNTIN SERVICES	NG, TAX & AUDIT			316,989	
	AVENUE OF THE AMERICAS 7TH FL YORK, NY 10019								SEIVVICES					
	IARD J LOCKMAN								ADVERTISIN	ADVERTISING SALES SERVICES				
2946	2 THACKERY DR										1			
	JNA NIGUEL, CA 92677 Total number of independent contractor					_								

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

compensation from the organization ► 7

Part		Statement	of R	Revenue						Page 9
					respo	nse or note to any	line in this Part VIII	<u></u>	<u></u>	<u></u> \square
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
s	1a Federated campaigns 1a									
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues	5.	. [1 b	25,463,267				
9 m		c Fundraising even	ts .		1c					
fts, ⊏A		d Related organiza	tions	;	1 d					
		e Government grants	(cont	tributions)	1e					
Sin		f All other contribution and similar amounts	ns, g	ifts, grants,		_				
iği je		above		L	1f					
計		g Noncash contributio lines 1a - 1f \$	ns in	cluded in	1 g					
Con		h Total. Add lines	1a-1	f		•	25 462 267			
						Business Code	25,463,267			
<u> </u>	28	CERTIFICATION PROC	GRAM	1		611430	19,595,302	19,595,302		
k-ven	t	TRAINING & EDUCAT	ION			611430	10,850,743	10,850,743		
MCe		LICENSE FEES				541519	1,189,971	1,189,971		
n Ser	_	SUPPORT & CONSULT	ΓING			611430	244,808	244,808		
Program Service Revenue	e	e SUBSCRIPTIONS			541800	172,485	172,485			
_		All other program								
		Investment income				32,053,309	1		<u> </u>	
	!	sımılar amounts) .				•	2,273,864			2,273,864
		Income from invest					250 773			250 772
	5	Royalties	<u>.</u>	(ı) Rea		(II) Personal	258,772			258,772
				(I) IXEA	1	(II) Fersonal	-			
		a Gross rents	6a				_			
	b	Less rental expenses	6ь							
	С	Rental Income	6с				7			
		or (loss) d Net rental income		loss)						
				(ı) Securit		(II) Other				
	7 <i>a</i>	a Gross amount from sales of 7a 8,606,857				7				
		rrom sales or assets other than inventory	sets other							
	b	Less cost or other basis and sales expenses	7b	9,8	60,080	30,00	2			
	c	Gain or (loss)	7 c	-1,2	53,223	-30,00	2			
		d Net gain or (loss)				· · · · •	-1,283,225			-1,283,225
Other Revenue	88	a Gross income from fu (not including \$ contributions reported See Part IV, line 18	d on I	of line 1c)						
Rev		b Less direct expen			8a 8b		-			
ther		c Net income or (los				ents Þ	J 			
	9a	Gross income from See Part IV, line 19	gamı •	ng activities	9a					
	ı	b Less direct expen	ses		9b		-			
	•	c Net income or (los	s) fr	om gaming a	activiti	es •	-			
	10	aGross sales of inve	entor	y, less						
		returns and allowa			10a	6,688,304	_			
		b Less cost of good			10b	282,780	6,405,524	6,405,524		
	-	Net income or (los Miscellaneo			invento	Business Code	1	5,135,52		
	11	1a _{SPONSORSHIP}				90000	1,562,996	1,562,996		
	ı	b ADVERTISING			$\overline{}$	54180	0 817,690	148,000	669,690	
		C OTHER				90000	4 787,038			787,038
	•	C OTHER				90000	. , ,,,,,,,,			,07,030
		d All other revenue								
		e Total. Add lines 1				•	3,167,724			
	12	2 Total revenue. S	ee ir	structions .	•		68,339,235	40,169,829	669,690	2,036,449 Form 990 (2019)

Form 990 (2019)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations r	nust complete all columns	All other organizati	ons must complete co	lumn (A)
Check if Schedule O contains a response or note	to any line in this Part IX			<u> D</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations at domestic governments See Part IV, line 21	nd 744,256			
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, for governments, and foreign individuals. See Part IV, lines and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	d 2,633,379			
6 Compensation not included above, to disqualified person defined under section 4958(f)(1)) and persons described section 4958(c)(3)(B)				
7 Other salaries and wages	23,534,991			
8 Pension plan accruals and contributions (include section (k) and 403(b) employer contributions)	401 1,091,137			
9 Other employee benefits	2,889,902			
10 Payroll taxes	1,765,413			
11 Fees for services (non-employees)				
a Management				
b Legal	1,318,119			
c Accounting	189,530			
d Lobbying	520,000			
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, colum (A) amount, list line 11g expenses on Schedule O)	nn 6,788,273			
12 Advertising and promotion	5,633,089			
13 Office expenses	4,300,488			
14 Information technology	4,709,545			
15 Royalties	1,215,720			
16 Occupancy	1,110,604			
17 Travel	2,421,148			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	3,101,968			
20 Interest	109,186			
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,874,314			
23 Insurance	113,746			
24 Other expenses Itemize expenses not covered above (Limiscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a TAXES & LICENSES FEE	521,814			
b BAD DEBT	148,902			
c AWARDS	54,588			
d BOOKSTORE PURCHASES	53,587			

-2,003,496

68,176,242

Form **990** (2019)

e All other expenses

25 Total functional expenses. Add lines 1 through 24e

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)

2

3

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30 Cash-non-interest-bearing

Pledges and grants receivable, net . . .

Accounts receivable, net

Savings and temporary cash investments . .

Notes and loans receivable, net

Inventories for sale or use Prepaid expenses and deferred charges . . .

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Other assets See Part IV, line 11 . . .

Accounts payable and accrued expenses .

Tax-exempt bond liabilities . . .

Investments—other securities See Part IV, line 11 .

Investments-program-related See Part IV, line 11 .

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

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Organizations that follow FASB ASC 958, check here ▶

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

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

Organizations that do not follow FASB ASC 958, check here > 🔲 and

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

Retained earnings, endowment, accumulated income, or other funds

basis Complete Part VI of Schedule D

b Less accumulated depreciation

Intangible assets

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Grants payable .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Page **11**

9.220.384

305.405

2,991,326

16,486,420

75,628,265

8,949,212

4,804,849

122,658,745

17,308,727

20.824.608

9,614,941

1,172,650

48.920.926

73,737,819

73,737,819

122.658.745

Form 990 (2019)

Check if Schedule O contains a response or note to any line in this Part IX \cdot .					
	E	Begir	(A nning) i of y	ear

10a

10b

29,782,169

13,295,749

(A) Beginning of year		End of year
	1	104,655
6.266.481	2	4.168.229

• • •	
1	
6,266,481 2	
3	

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10c

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17 18

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27

28

29

30

31

32

33

2.617.491

347.355

2,157,958

8,927,277

65,604,575

8.194.987

5,704,531

99,820,655

13,747,370

16.988.701

1,300,000

1,452,786

33.488.857

66,331,798

66,331,798

99,820,655

☐ Both consolidated and separate basis

Yes

No

Form 990 (2019)

2c

3a

3b

Consolidated basis

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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

☐ Separate basis

Audit Act and OMB Circular A-133?

Additional Data



Software ID:

Name: INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION INC.

SEE SCHEDULE O

Form 990 (2019)

Form 990, Part III, Line 4a:

Form 990, Part III, Line 4b: SEE SCHEDULE O

Form 990, Part III, Line 4c: SEE SCHEDULE O

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

GREG GROCHOLSKI 619-1219

CHAIR, 2012-2013

GREGORY TOUHILL

CHAIR, 2003-2005

PAM NIGRO 619-1219

LEONARD ONG 119-619

MARIOS DAMIANIDES 319-619

MARTHA GABRIELA REYNAGA

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

......

.....

	any hours	and	a dır	ecto	r/tr	ustee))	organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
BRENNAN BAYBECK	15 00	×		x				0	0	0	
CHAIR, 2019-2020	1 00	l ''							,		
ASAF WEISBERG 619-1219	3 00	l									
DIRECTOR	1 00	×						0	U	U	
CHRISTOS K DIMITRIADIS	3 00										

CHINARY, 2013 2020	1 00						
ASAF WEISBERG 619-1219	3 00						
DIRECTOR	1 00	×			0	0	0
CHRISTOS K DIMITRIADIS	3 00	.,	,			0	
CHAIR, 2015-2017	1 00	×	×		l "	U	U
DAVID A SAMUELSON 419-1219	45 00		V		504.554	0	27.170
DIRECTOR & CEO	40.00	_ ×	^		584,551	U	27,170

0

10,989

5,700

0

0

DIRECTOR	1 00						
CHRISTOS K DIMITRIADIS	3 00	l	¥		0	0	
CHAIR, 2015-2017	1 00	_ ^	^			0	
DAVID A SAMUELSON 419-1219	45 00	l	_		584.551	0	
DIRECTOR & CEO	10 00	_ ^	^		364,331	0	

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other week (list person is both an officer from the from related compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours	and	a dır	ecto	or/tr	ustee)	organization	organizations	from the
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
RV RAGHU DIRECTOR	3 00 1 00	×						0	0	0
ROBERT A CLYDE CHAIR, 2018-2019	15 00 1 00	×		х				0	0	0
ROLF VON ROESSING 619-1219	3 00	х		x				20,000	0	0

DIRECTOR	1 00								
ROBERT A CLYDE	15 00								
		X		Х				0	
CHAIR, 2018-2019	1 00								
ROLF VON ROESSING 619-1219	3 00								
		X		Х				20,000	
VICE-CHAIR	1 00								
THEODORE WOLFF 119-619	3 00								
THEODORE WOELT ITS 013		lv	1 1		I	l			

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1 00 3 00

1 00 3 00

1 00 45 00

10 00 40 00

15 00 50 00

5 00

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590,348

837,805

452,134

54,533

42,479

44,359

0

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

CHAIR, 2017-2018

TRACEY DEDRICK

ROBERT A MICEK

TREASURER & CFO

KEN KUJUNDJIC

THERESA GRAFENSTINE 119-219

TICHAONA ZORORO 119-1119

SVP, ENTERPRISE SOLUTIONS

OUTGOING SVP, GLOBAL AFFAIRS

......

TARA WISNIEWSKI 119-619

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other week (list person is both an officer from the from related compensation m the

and Independent Contractors

VP, ENTERPRISE BUSINESS DEV & OPS

MATTHEW S LOFB

FORMER CEO & DIRECTOR

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours					ustee)		organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
CHRISTOHER DEMALE	45 00					х		311,844	0	45,278
STRATEGIC ACCOUNT REPRESENTATIVE	10 00									
ELIZABETH RANNO 119-819	50 00									
		I	I	I I	I	1 v 1	I	426 201	0	20.910

20,819

13,842

16,147

55,823

36,592

1,046,837

Х

CHRISTONER DEMALE				x	311.844	n	
STRATEGIC ACCOUNT REPRESENTATIVE	10 00			^	311,011	Ŭ	
ELIZABETH RANNO 119-819	50 00			Y	436,301	0	
OUTGOING VP, PRODUCT MANAGEMENT	5 00			^	430,301	0	
ELIZABETH SANTILLI 119-619	50 00						
				X	571,107	0	

- THE TEST OF THE	10 00						
ELIZABETH RANNO 119-819	50 00						
				X	436,301	0	
OUTGOING VP, PRODUCT MANAGEMENT	5 00				,		
ELIZABETH SANTILLI 119-619	50 00						
		l		X	571,107	0	
OUTGOING VP, HUMAN RESOURCES	5 00						

2227.02777.00000 213				Ιx	436,301	ı o	
OUTGOING VP, PRODUCT MANAGEMENT	5 00				,		
ELIZABETH SANTILLI 119-619	50 00						
				l x	571,107	0	
OUTGOING VP, HUMAN RESOURCES	5 00				ŕ	Į.	
	E0 00						

OUTGOING VP, PRODUCT MANAGEMENT	5 00						
LIZABETH SANTILLI 119-619	50 00			×	571,107	0	
UTGOING VP, HUMAN RESOURCES	5 00			^	3/1,10/		
ARAYANAN KRISHNAN 119-1119	50 00	·					

ELIZABETH SANTILLI 119-619	50 00			×	571 <i>.</i> 107	0	
OUTGOING VP, HUMAN RESOURCES	5 00				3,1,10,		
NARAYANAN KRISHNAN 119-1119	50 00			Х	376,636	0	

,	5 00						
NARAYANAN KRISHNAN 119-1119	50 00				074 404		
OUTGOING SR DIRECTOR INFO TECH	5 00			Х	376,636	U	
	45.00					·	

NARAYANAN KRISHNAN 119-1119				l _v	376,636	0	ı
OUTGOING SR DIRECTOR INFO TECH	5 00			^	370,030	Ü	1
STEVEN MOLE	45 00						
				X	510,942	0	i

10 00 0 00

0 00

SCHEDULE C

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

DLN: 93493204005120

Open to Public

Department of the Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

EZ)

(Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

f the	Section Sectin Section Section Section Section Section Section Section Section	501(c) (other than section 5 527 organizations Complete zation answered "Yes" on 501(c)(3) organizations that 501(c)(3) organizations that	Form 990, Part IV, Line 4, or Form have filed Form 5768 (election under have NOT filed Form 5768 (election in Form 990, Part IV, Line 5 (Proxy Table), then	rts I-A and C below 990-EZ, Part VI, Iin section 501(h)) Co under section 501(h	ne 47 (Lobbying mplete Part II-A)) Complete Par	Activiti Do not t II-B De	es), comp o not	plete Part II-l t complete Pa	art II-A
Na:	me of th	e organization N SYSTEMS AUDIT AND SOCIATION INC	·		23-70	67291		fication nun	ıber
Par	t I-A	Complete if the organ	nization is exempt under secti	ion 501(c) or is	a section 527	orgai	niza	tion.	
1		e a description of the organi al campaign activities")	ization's direct and indirect political ca	ampaign activities in	Part IV (see ins	tructions	s for	definition of	
2		al campaign activity expend	,			>	\$_		
3		<u> </u>	aign activities (see instructions)	F04(-)(2)					
	t I-B	<u> </u>	nization is exempt under secti						
1		•	x incurred by the organization under			•	\$_		
2 3		<i>'</i>	x incurred by organization managers ion 4955 tax, did it file Form 4720 foi			•	\$_		
		_	ion 4953 tax, did it lile Form 4720 for	tins year?				☐ Yes	⊔ No
4a		correction made?						☐ Yes	☐ No
	t I-C	," describe in Part IV Complete if the organ	nization is exempt under secti	ion 501(c), exce	ent section 50)1(c)(3	3).		
1			ed by the filing organization for section			<u> </u>	\$		
2			anization's funds contributed to other			ot .	Ψ_		
_		on activities	amendary of the second	organizations for se	ector 527 exemp	>	\$_		
3	Total e	exempt function expenditure	es Add lines 1 and 2 Enter here and	on Form 1120-POL,	lıne 17b	•	\$_		
4	Did the filing organization file Form 1120-POL for this year?					□ No			
5									
		(a) Name	(b) Address	(c) EIN	(d) Amount p filing organiz funds If non- -0-	ation's		(e) Amount contributions and promp directly deliv separate p organization enter	s received otly and vered to a political i If none,
1									
2									
3									
1									
5									
5									
or P	aperwor	k Reduction Act Notice, see t	he instructions for Form 990 or 990-EZ	• Cat	No 50084S Sc	hedule ((Foi	rm 990 or 99	0-EZ) 2019

If "Yes," enter the amount of any tax incurred under section 4912

answered "Yes."

Dues, assessments and similar amounts from members

Supplemental Information

expenses for which the section 527(f) tax was paid).

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Schedule C (Form 990 or 990-EZ) 2019

activity

1

2

1

2

C Total

Part IV

3

Part III-B

Current year

Carryover from last year

expenditure next year?

Return Reference

(b)

Amount

(a)

Yes | No

1

2a

2b

2c

3

4 5

Schedule C (Form 990 or 990EZ) 2019

Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? b Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? 1

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

If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Did the organization agree to carry over lobbying and political expenditures from the prior year?

Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

on				
	Yes	N		
1		No		
2		No		

- Nο Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)25,463,267
 - 133,753 758,200 763.955

-5,755

624,447

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

DLN: 93493204005120

2019

OMB No 1545-0047

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.

(Form 990)

	ment of the Treasury I Revenue Service		► Attach to Form 990. 1990 for instructions and the latest info	rmation.		to Public pection
INFO	ne of the organ RMATION SYSTEMS TROL ASSOCIATION	S AUDIT AND		23-7067291	ntification	number
Pai			sed Funds or Other Similar Funds o			
	Comple	te if the organization answered "Ye	(a) Donor advised funds	(b) Funds	and other a	accounts
	Total number at	end of year	(a) Bonor advised funds	(D) Tunus	and other t	accounts
		of contributions to (during year)				
		of grants from (during year)				
	Aggregate value					
5	Did the organiza	•	rs in writing that the assets held in donor ac clusive legal control?	lvised funds are f	_	Yes 🗌 No
,		oses and not for the benefit of the donor	onor advisors in writing that grant funds can or donor advisor, or for any other purpose o		missible	Yes 🗌 No
Par		vation Easements. te if the organization answered "Ye	s" on Form 990, Part IV, line 7.			
L	Purpose(s) of co	onservation easements held by the orgai	nization (check all that apply)			
	☐ Preservation	on of land for public use (e g , recreation	n or education)	historically impo	rtant land a	rea
	☐ Protection	of natural habitat	Preservation of a	certified historic s	structure	
	☐ Preservation	on of open space				
2	Complete lines	' '	qualified conservation contribution in the fol		tion t the End o	f the Vest
а		conservation easements		1 1 1 1 1 1 1 1 1 1	t the End o	i the rear
_		stricted by conservation easements		2b		
	_	ervation easements on a certified histori	c structure included in (a)	2c		
3	Number of constax year ▶	ervation easements modified, transferre	d, released, extinguished, or terminated by	the organization	during the	
ı	Number of state	es where property subject to conservatio	on easement is located >			
5		ization have a written policy regarding that of the conservation easements it holds	ne periodic monitoring, inspection, handling s?	of violations,	☐ Yes	□ No
	Staff and volunt	teer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing co	onservation ease		
,	<u> </u>					- '
7	► \$	enses incurred in monitoring, inspecting,	handling of violations, and enforcing conser	vation easement	s auring the	year
š	Does each constand section 170		above satisfy the requirements of section 1	70(h)(4)(B)(ı)	☐ Yes	□ No
•	balance sheet, a		ervation easements in its revenue and expe footnote to the organization's financial state ts		nd	
art		zations Maintaining Collections te if the organization answered "Ye	of Art, Historical Treasures, or Oth s" on Form 990, Part IV, line 8.	er Similar As	sets.	
La	If the organizati	ion elected, as permitted under SFAS 11 easures, or other similar assets held for	6 (ASC 958), not to report in its revenue sta public exhibition, education, or research in fi icial statements that describes these items			
b	historical treasu		6 (ASC 958), to report in its revenue statem lic exhibition, education, or research in furth			
(i) Revenue includ	led on Form 990, Part VIII, line 1		▶ \$		
(ii)Assets included	ın Form 990, Part X		▶ \$		
2	If the organizati	·	cal treasures, or other similar assets for fina 116 (ASC 958) relating to these items	ncial gain, provid	le the	
а	_	ed on Form 990, Part VIII, line 1	- -	▶ \$		
b	Assets included	ın Form 990, Part X		▶ \$		

 ${f b}$ Buildings

 $c \ \ \mathsf{Leasehold} \ \mathsf{improvements}$

 ${f d}$ Equipment .

 ${f e}$ Other .

Sche	dule D	(Form 990) 2019									Page 2
Par	t IIII	Organizations Maintai	ning Collections o	of Art, Histo	rical T	reas	ures, or	Other :	Similar A	ssets (cor	ntınued)
3		the organization's acquisition (check all that apply)	, accession, and other	records, chec	k any of	the fo	ollowing t	hat are a	significant i	use of its co	ollection
а		Public exhibition		d		Loar	n or excha	ange prog	rams		
b		Scholarly research		е		Othe	er				
c		Preservation for future genera	ations								
4	Provid Part >	de a description of the organiz KIII	ation's collections and	explain how t	hey furt	her th	ne organiz	atıon's ex	empt purpo	se in	
5	Durin asset	g the year, did the organizations to be sold to raise funds rath	on solicit or receive do ner than to be maintai	nations of art, ned as part of	historica the orga	al trea anızat	asures or ion's colle	other sim	ılar	☐ Yes	□ No
Pa	rt IV	Escrow and Custodial Complete if the organizar X, line 21.		" on Form 99	90, Part	: IV,	line 9, oi	reporte	d an amoı		
1a		e organization an agent, truste ded on Form 990, Part X?	e, custodian or other	intermediary f	or contri	ibutioi	ns or othe	er assets r	not	Yes	□ No
Ь	If "Ye	es," explain the arrangement ii	n Part XIII and comple	ete the follows	na tahle		ı		Δ	mount	
c		ining balance	Trute XIII and comple	te the followin	ig table		ŀ	1c			
d	_	ions during the year						1d			
e		butions during the year						1e			
f	Endın	ig balance						1f			
2a	Dıd tl	ne organization include an amo	ount on Form 990, Par	t X, line 21, fo	or escrov	v or c	ustodial a	ccount lia	bility?	☐ Yes	□ No
b		es," explain the arrangement in									
Pa	rt V	Endowment Funds.									
		Complete if the organiza	tion answered "Yes' (a) Currer				line 10. (c) Two y	aawa baali l	(d) Three ye	hl/ (-	> Farry
1a	Beainn	ing of year balance		,690,845	Prior yea 47,24	_		3,821,432		,801,138) Four years back 34,922,480
		outions	4	,633,718	3,44	5,275		3,424,138	5,	,020,294	3,878,658
С	Net inv	estment earnings, gains, and	losses								
d	Grants	or scholarships									
е		expenditures for facilities ograms									
f	Admını	strative expenses									
g	End of	year balance	55	,324,563	50,69	0,845	4	7,245,570	43,	,821,432	38,801,138
2	Provid	de the estimated percentage o	•	balance (line	1g, colu	ımn (a	a)) held a	s			
а	Board	d designated or quasi-endowm	ent ► 100 000 %								
b	Perm	anent endowment ►									
c		orarily restricted endowment									
-		percentages on lines 2a, 2b, ar									
3a		here endowment funds not in t nization by	ne possession of the c	organization ti	nat are n	ieia ai	na aamini	sterea for	tne		Yes No
	(i) ur	nrelated organizations								3a(i) No
h		elated organizations es" on 3a(ii), are the related or								3a(ii 3b	i) No
4		ribe in Part XIII the intended u	-				•				
Pa	rt VI	Land, Buildings, and E Complete if the organiza		" on Form 9	90. Part	: IV.	line 11a	See For	m 990. Pa	ırt X. lıne	10.
	Descri		Cost or other basis	(b) Cost or oth					epreciation		Book value
			(investment)								
1 a	Land										

10,573,933

2,512,971

16,695,265

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

9,484,638

6,051,282

950,500

1,089,295

1,562,471

10,643,983

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, F	Part IV	ıne 11h	See Form 990 [Part Y line 12
	(a) Description of security or category (including name of security)	(b) Book value		(c) Metho	d of valuation year market value
(1) Financia	ıl derivatives	value			
	held equity interests				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	n (b) must equal Form 990, Part X, col (B) line 12)				
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, F	Part IV, I	ne 11c	. See Form 990,	Part X, line 13.
	(a) Description of investment			(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)					
(2)					
(3)					
(4)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 13)				
Part IX	Other Assets.				
	Complete if the organization answered 'Yes' on Form 990, Polyal (a) Description	art IV, lıı	ne 11d.	See Form 990, Par	t X, line 15 (b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, col (B) line 15)		<u> </u>		•
Part X	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Po	art IV. III	ne 11e	or 11f.See Form	990, Part X. line 25
1.	(a) Description of liability	, 111			(b) Book value
(1) Federal (5)	Income taxes				
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 25)				1,172,650
	or uncertain tax positions In Part XIII, provide the text of the footnot 's liability for uncertain tax positions under FIN 48 (ASC 740) Check I				_

Add lines 4a and 4b .

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

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

Donated services and use of facilities . . .

Add lines 2a through 2d . .

Return Reference

Other (Describe in Part XIII)

Supplemental Information

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

Total expenses and losses per audited financial statements

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 . . .

Part XI

2

b

5

1 2

c

d

3 4

b

5

Part XIII

See Additional Data Table

Part XII

Schedule D (Form 990) 2019

Page 4

24,671,093 68,652,017

17,663,426

68,176,242

68.176.242

Schedule D (Form 990) 2019

d	Other (Describe in Part XIII)	2d		15,	349,910		
e	Add lines 2a through 2d					2e	
3	Subtract line 2e from line 1					3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

2a

2b

2c

2a 2b

2c

2d

4a

4b

Explanation

nent expenses not included on Form 990, Part VIII, line 7b . 4a			
Describe in Part XIII)........... 4b	-312,782		
es 4a and 4b		4c	-312,782
venue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	68,339,235
Reconciliation of Expenses per Audited Financial Statements V	•	eturi	n.
Complete if the organization answered 'Yes' on Form 990, Part IV, lin	ne 12a.		
penses and losses per audited financial statements		1	85,839,668

17,663,426

2e

3

4c 5

9.321.183

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

Page 5		chedule D (Form 990) 2019	
	ormation (continued)	Part XIII Supplemental Info	Part XIII
	Explanation	Return Reference	Re

Schedule D (Form 990) 2019

Additional Data

Software Version:

EIN: 23-7067291

Name: INFORMATION SYSTEMS AUDIT AND

OTECT THE ORGANIZATION AGAINST UNFORESEEN GLOBAL EVENTS AND ECONOMIC DOWNTURN

CONTROL ASSOCIATION INC

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	THE ASSOCIATION'S BOARD OF DIRECTORS AND THE INSTITUTE'S BOARD OF TRUSTEES DESIGNATE A POR

Software ID:

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	THE FINANCIAL ACCOUNTING STANDARDS BOARD ISSUED GUIDANCE THAT REQUIRES TAX EFFECTS FROM UN CERTAIN TAX POSITIONS TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS ONLY IF THE POSITION IS MORE LIKELY THAN NOT TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AU THORITY MANAGEMENT HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN POSITIONS THAT REQ UIRE RECOGNITION IN THE FINANCIAL STATEMENTS ADDITIONALLY, NO PROVISION FOR INCOME TAXES IS REFLECTED IN THESE FINANCIAL STATEMENTS, AND THERE IS NO INTEREST OR PENALTIES RECOGNIZ ED IN THE STATEMENT OF ACTIVITIES OR STATEMENT OF FINANCIAL POSITION THE ASSOCIATION'S FE DERAL AND STATE INCOME TAX RETURNS PRIOR TO 2016 ARE CLOSED, AND MANAGEMENT CONTINUALLY EV ALUATES EXPIRING STATUES OF LIMITATIONS, AUDITS, PROPOSED SETTLEMENTS, CHANGES IN TAX LAW AND NEW AUTHORITATIVE RULINGS

Supplemental Information

upplemental Information					
Return Reference	Explanation				
PART XI, LINE 2D - OTHER ADJUSTMENTS	RELATED ORGANIZATION REVENUE 16,006,946 ELIMINATION ENTRIES -657,036				

upplemental Information					
Return Reference	Explanation				
PART XI, LINE 4B - OTHER ADJUSTMENTS	RECLASS OF COST OF GOOD SOLD -282,780 RECLASS OF LOSS ON DISPOSAL -30,002				

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	RELATED ORGANIZATION EXPENSES 18,007,680 ELIMINATION ENTRIES -657,036 RECLASS OF LOSS ON DISPOSAL 30,002 RECLASS OF COST OF GOOD SOLD 282,780

efile GRAPHIC print -	DO NOT	PROCESS	As Filed Data	-		DLN:	93493204005120
SCHEDULE F Form 990)	State	ement of	Activities	Outside the Un	ited St	ates	OMB No 1545-0047
1 31111 333)	► Comp	lete if the organ		Yes" to Form 990, Part IV, I to Form 990.	ine 14b, 15	5, or 16.	2019
Department of the Treasury nternal Revenue Service	,	► Go to www.irs.	gov/Form990 for I	nstructions and the latest ii	nformation		Open to Public Inspection
lame of the organization NFORMATION SYSTEMS AU	IDIT AND					Employer iden	tification number
CONTROL ASSOCIATION IN						23-7067291	
General Inf Form 990, P			s Outside the l	Jnited States. Comple	ete if the	organization a	nswered "Yes" on
1 For grantmakers.	Does the o	rganızatıon ma	ıntaın records to	substantiate the amoun	t of its gra	ants and	
·	-		he grants or assi	stance, and the selection	criteria u	sed	_
to award the grants	or assistan	ce?					☐ Yes 🗹 No
2 For grantmakers. outside the United S		Part V the org	anızatıon's proce	dures for monitoring the	use of its	grants and ot	her assistance
3 Activites per Region	(The followii	ng Part I, line 3	table can be dupl	cated if additional space is	needed)		
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	fundraising, program	program s	ty listed in (d) is a service, describe cific type of s) in the region	(f) Total expenditures for and investments in the region
See Add'l Data							
3a Sub-total			0 0				810,952
b Total from continuatio	n sneets to	1	o				200,916
Part I			ol o				1,011,868

Part II	Grants a	and	Otl	٦e
	Part IV,	lıne	15,	fo

Page 2 er Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

L	(a) Name or organization	section and EIN (if applicable)	(c) Region	(d) Purpose or grant	cash grant	cash disbursement	of noncash assistance	of noncash assistance	valuation (book, FMV, appraisal, other)
	See Add'l Data								
_									

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 21

							Part III can be d
(h) Method of valuation (book, FMV, appraisal, other	(g) Description of noncash assistance	(f) Amount of noncash assistance	(e) Manner of cash disbursement	(d) Amount of cash grant	(c) Number of recipients	(b) Region	Type of grant or assistance

Sche	dule F (Form 990) 2019		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)	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 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

Schedule F (Form 990) 2019

Page 5

Part V

Supplemental Information
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method;

amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting

method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	ISACA'S CHAPTER GRANT PROGRAM AVAILABLE TO ISACA CHAPTERS (U.S. AND WORLDWIDE) ISACA UNDERSTANDS THE VALUE OF CHAPTER LEADERS HAVING THE OPPORTUNITY TO ATTEND AN ISACA LEADERSHIP EVENT. THE CHAPTER GRANT PROGRAM WAS ESTABLISHED TO COVERDEFRAY THE COSTS ASSOCIATED WITH AN INDIVIDUAL ATTENDING THESE EVENTS ALL ISACA CHAPTERS (U.S. AND WORLDWIDE) ARE ELIGIBLE FOR GRANT FUNDS EACH CHAPTER IS PROVIDED WITH A GRANT FOR THE AMOUNT IT IS ESTIMATED IT WILL COST FOR ONE PERSON FROM THE CHAPTER TO ATTEND THE EVENT. THE AMOUNT OF EACH GRANT VARIES BASED ON LOCATION AND COVERED/DEFRAYED THE COSTS ASSOCIATED WITH ECONOMY AIRFARE, LODGING, LOCAL TRANSPORTATION, AND MEALS IN TRANSIT WHILE EACH GRANT IS ISSUED TO A CHAPTER VIA THE CHAPTER'S PREFERRED REMITTANCE METHOD, THE CHAPTER MUST AGREE TO THE FOLLOWING IN ORDER TO RETAIN THE GRANT AFTER THE EVENT. 1) ATTENDEE(S) MUST STAY AT THE HOST HOTEL DETAILS WERE PROVIDED IN THE OFFICIAL REGISTRATION MESSAGE 2) ATTENDEE(S) MUST STAY AT THE HOST HOTEL DETAILS WERE PROVIDED IN THE OFFICIAL REGISTRATION MESSAGE 2) ATTENDEE(S) MUST STAY AND THE EVENT ATTENDANCE WAS VERIFIED EVERY DAY AND REGISTRATIONS WERE RECONCILED AFTER THE EVENT CONCLUDED 3) THE GRANT IS HIXED AMOUNT AND WAS INTENDED TO COVER/DEFRAY MOST OF THE COSTS ASSOCIATED WITH ATTENDING THE EVENT IF THE AMOUNT EACH ATTENDED TO COVER/DEFRAY MOST OF THE COSTS ASSOCIATED WITH ATTENDING THE EVENT IF THE AMOUNT EACH ATTENDED TO COVER/DEFRAY MOST OF THE COSTS ASSOCIATED WITH AN INDIVIDUAL'S ATTENDANCE, ANY ADDITIONAL COSTS (AS DEEMED REASONABLE AND PROPER BY THE CHAPTER SHOULD HAVE BEEN REIMBURSED TO THE INDIVIDUAL BY THE CHAPTER IF, FOR ANY REASON, THE REPRESENTATIVE FROM A CHAPTER DID NOT ATTEND THE ISACA LEADERSHIP EVENT, THE CHAPTER WAS REQUIRED TO RETURN THE GRANT TO ISACA GLOBAL IN ITS ENTIRETY THE TOTAL OF THE GRANT THE CHAPTER WAS HEADEN THE TOTAL OF THE GRANT TO PART OF ISACA'S NEW CHAPTER FUNDING FOR MORE THE RANNSER) THE TOTAL OF THE GRANT TO ISACA AFTER THE OWN THE CHAPTER'S AVAILABLE CREDIT UNTIL THE BALANCE OF THE GRAN

990 Schedule F, Supplemental Information	
Return Reference	Explanation

PART III ACCOUNTING METHOD

Additional Data

EAST ASIA AND THE PACIFIC

EAST ASIA AND THE PACIFIC

Software ID: Software Version: **EIN:** 23-7067291 Name: INFORMATION SYSTEMS AUDIT AND

Form 990 Schedule F Part I - Activities Outside The United States

(-)	(2)	(0)	(4)
	offices in the	employees or	in region (by
	region	agents in	fundraising,
		region	services, g
			recipients loc:

(b) Number of (c) Number of (d) Activities conducted

(f) Total expenditures for region

(a) Region

(e) If activity listed in (d) type) (i e , is a program service,

> IEDUCATION AND TRAINING

0 PROGRAM SERVICE

0 PROGRAM SERVICE

describe specific type of

14,026

76,020

, program

service(s) in region

PROGRAM OBSERVATIONS

arants to recipients located in the

region)

CONTROL ASSOCIATION INC.

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) EAST ASIA AND THE PACIFIC 0 PROGRAM SERVICE ITRADE SHOW 2.225 **EUROPE** 0 PROGRAM SERVICE IEDUCATION AND 522,286 TRAINING

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) 0 PROGRAM SERVICE PROGRAM APPRAISALS 56.949 EUROPE EUROPE (INCLUDING ICELAND 0 PROGRAM SERVICE ITRADE SHOW 111,507 & GREENLAND)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) NORTH AMERICA 0 PROGRAM SERVICE IEDUCATION AND 3,414 ITRAINING SOUTH AMERICA 0 PROGRAM SERVICE **IEDUCATION AND** 24.525 TRAINING

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region services, grants to service(s) in region region recipients located in the region) 0 PROGRAM SERVICE IEDUCATION AND 200.916 SUB-SAHARAN AFRICA ITRAINING

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS codel (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (a) Name of section (e) Amount of (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ICENTRAL LEADERSHIP 39,760 BANK TRANSFER lFM∨ AMERICA AND CONFERENCE ITHE CARIBBEAN İTRAVEL GRANT EAST ASIA AND 10,000 BANK TRANSFER **IFMV** ITO SUPPORT THE PACIFIC -ICHAPTER. AUSTRALIA. HOSTED ASIA IBRUNEI. ICACS IBURMA. CONFERENCE

CAMBODIA.

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, non-cash cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST LEADERSHIP 5,105 BANK TRANSFER lFM∨ IAND NORTH CONFERENCE IAFRICA ITRAVEL GRANT INORTH LEADERSHIP 15.899 BANK TRANSFER lFM∨ CONFERENCE

IAMERICA

TRAVEL GRANT

Form 990 Schedule F Part II - Grants or Entities Outside The United States (g) Amount of (h) Description (i) Method of l(b) IRS codel (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) RUSSIA AND LEADERSHIP 5,580 BANK TRANSFER IFMV NEIGHBORING CONFERENCE ISTATES ITRAVEL GRANT SOUTH AMERICA LEADERSHIP 17.049 BANK TRANSFER lFM∨ CONFERENCE

TRAVEL GRANT

(i) Method of l(b) IRS codel (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV. cash non-cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISOUTH ASIA LEADERSHIP 5,098 BANK TRANSFER **IFMV** CONFERENCE ITRAVEL GRANT ISUB-SAHARAN TO SUPPORT 65.000 BANK TRANSFER **IFMV** AFRICA -CHAPTER

Form 990 Schedule F Part II - Grants or Entities Outside The United States

IANGOLA, BENIN, HOSTED AFRICA CACS

CONFERENCE

IBOTSWANA. IBURKINA FASO.

(ı) Method of (h) Description , (b) IRS code (g) Amount of (f) Manner of valuation (e) Amount of (a) Name of (d) Purpose of section (c) Region (book, FMV, non-cash cash and EIN(ıf cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) ISUB-SAHARAN LEADERSHIP 15.515 BANK TRANSFER lFM∨

IAFRICA

ICONFERENCE

TRAVEL GRANT

Form 990 Schedule F Part II - Grants or Entities Outside The United States

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -					DLN: 93493204005120
Note: To capture the ful	l content of this de	ocument, please se	lect landscape mode	e (11" x 8.5") whe	n printing.		
Schedule I (Form 990)	Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.					OMB No 1545-0047 2019	
Department of the Treasury Internal Revenue Service	Co		► Attach to Form w.irs.gov/Form990 for	990.	•		Open to Public Inspection
Name of the organization INFORMATION SYSTEMS AUDI CONTROL ASSOCIATION INC Part I General Info	T AND	and Assistance				23-70672	Identification number
Does the organization in the selection criteria use	naintain records to subs ed to award the grants	stantiate the amount of or assistance?	the grants or assistance, t		for the grants or assistanc	e, and	☑ Yes ☐ No
		estic Organizations at can be duplicated if add		nts. Complete if the o	rganization answered "Yes'	on Form 990, Part	IV, line 21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description noncash assista	
(1) ONE IN TECH AN ISACA FOUNDATION 1700 EAST GOLF RD STE 40 SCHAUMBURG, IL 60173	83-4605433	501(C)(3)	515,213				START-UP SUPPORT
(2) MASSACHUSETTS INSTITUT OF TECHNOLOGY 77 MASSACHUSETTS AVENU CAMBRIDGE, MA 02139		501(C)(3)	150,000				RESEARCH GRANT
		-	listed in the line 1 table .				2
For Paperwork Reduction Act N				Cat No 5005!			Schedule I (Form 990) 2019

Schedule I (Form 990) 2019					Page 2
Part III Grants and Other Assistance Part III can be duplicated if add		ls. Complete if the organi	zation answered "Yes" on For	rm 990, Part IV, line 22	<u>-</u>
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount o	of (d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
Part IV Supplemental Inform	ation. Provide the info	rmation required in Pa	rt I, line 2; Part III, colur	nn (b); and any other addition	al information.

Schedule I (Form 990) 2019

efil	e GRAPHIC pi	rint - DO NOT PROCESS A	s Filed Data	a -	DLN: 934	19320	4005	120
Sch	edule J	Cor	npensati	on Information	10	1B No	1545-0	0047
(For	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest						
	Compensated Employees ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.			2019				
			▶ Attach	to Form 990.				
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/</u>	<u> <i>Form</i>990</u> for	instructions and the latest infor	mation.		to Pul ectio	
	me of the organiz				Employer identificat	tion nu	ımber	
	ORMATION SYSTEMS ITROL ASSOCIATION				23-7067291			
Pa	rt I Questi	ons Regarding Compensation	on					
							Yes	No
1a				the following to or for a person liste y relevant information regarding the				
		s or charter travel		Housing allowance or residence for	•			
	_	companions		Payments for business use of perso				
		nification and gross-up payments	H	Health or social club dues or initiati				
	Discretion	nary spending account	Ш	Personal services (e g , maid, chau	rreur, cner)			
b				follow a written policy regarding pay ve? If "No," complete Part III to expl		1b	Yes	
2				or allowing expenses incurred by all		2	Yes	
	directors, truste	ees, officers, including the CEO/Exe	cutive Director	r, regarding the items checked on Lii	ne 1a ⁷			
3				d to establish the compensation of t	he			
		EEO/Executive Director Check all the ed organization to establish comper		CEO/Executive Director, but explain	ın Part III			
	✓ Compens	ation committee	✓	Written employment contract				
		ent compensation consultant	✓	Compensation survey or study				
	✓ Form 990	of other organizations	✓	Approval by the board or compensa	ation committee			
4	During the year related organiza		0, Part VII, Sec	ction A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-contro	l payment?			4a	Yes	
b	Participate in, o	r receive payment from, a supplem	nental nonquali	fied retirement plan?		4b	Yes	
c		r receive payment from, an equity		_		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and p	rovide the app	licable amounts for each item in Par	t III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) o	rganizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Section of ontingent on the revenues of		the organization pay or accrue any				
а	The organization	n?				5a		
b	Any related orga					5b		
	·	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section <i>i</i> ontingent on the net earnings of	A, line 1a, did t	the organization pay or accrue any				
а	The organization					6a		
b	Any related orga					6b		
7	•	6a or 6b, describe in Part III	المام اماد ا	the organization provide any newforce	d			
7		ed on Form 990, Part VII, Section A escribed in lines 5 and 6? If "Yes,"		the organization provide any nonfixe rt III	u	7		
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8		
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follow	the rebuttable	presumption procedure described in	Regulations section	9		
For F	Paperwork Redu	iction Act Notice, see the Instri	uctions for Fo	rm 990. Cat No. 5	50053T Schedule J	(Forn	1 990)	2019

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC (C) Retirement (D) Nontaxable (E) Total of (F) and other benefits columns compensation Compensation in deferred (B)(i)-(D)column (B) (iii) Other (i) Base (ii) reported as compensation compensation | Bonus & incentive reportable deferred on prior compensation compensation Form 990 See Additional Data Table

Schedule J (Form 990) 2019

Schedule J (Form 990) 2019

KUJUNDJIC (SR. VP. BUSINESS DEVELOPMENT & SALES) - \$11.000, -TARA WISNIEWSKI (OUTGOING SR. VP. GLOBAL AFFAIRS) - \$5.500, -ELIZABETH SANTILLI (OUTGOING VP, HUMAN RESOURCES) - \$5,500, -ELIZABETH RANNO (OUTGOING VP, PRODUCT MANAGEMENT) - \$7,192, -STEVEN MOLE (VP, ENTERPRISE

BUSINESS DEVELOPMENT & OPERATIONS) - \$11,000

Schedule 1 (Form 990) 2019

SCHEDULE J, PART II, COLUMN B(II) INCLUDED ON SCHEDULE J, PART II, COLUMN B(II) ARE AMOUNTS REPRESENTING BONUS PAYMENTS. THESE AMOUNTS WERE APPROVED BY THE BOARD AND INCLUDED IN THE INDIVIDUAL'S 2019 W-2S

Additional Data Software ID: Software Version: **EIN:** 23-7067291 Name: INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION INC Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (B) Breakdown of W-2 and/or 1099-MISC compensation (E) Total of columns (F) Compensation in (A) Name and Title (C) Retirement and (D) Nontaxable other deferred (B)(ı)-(D) benefits column (B) (i) Base Compensation reported as deferred on compensation Bonus & incentive Other reportable prior Form 990 compensation compensation 438,361 146,190 12,493 14,677 611,721 DAVID A SAMUELSON 419-1219 DIRECTOR & CEO 1ROBERT A MICEK 389,754 156,537 44,057 14,000 40,533 644,881 TREASURER & CFO 2KEN KUJUNDJIC (1) 264,246 541,921 31,638 14,000 28,479 880,284 SVP, ENTERPRISE SOLUTIONS 111,968 70,761 9,208 35,151 269,405 496,493 TARA WISNIEWSKI 119-619 OUTGOING SVP, GLOBAL AFFAIRS 4CHRISTOHER DEMALE 134,629 176,960 255 7,137 38,141 357,122 STRATEGIC ACCOUNT REPRESENTATIVE 168,554 8,377 43,215 224,532 12,442 457,120

377,819

48,676

12,149

1,046,837

7,159

14,000

14,000

6,683

2,147

41,823

36,592

584,949

392,783

566,765

1,083,429

1,046,837

ELIZABETH RANNO 119-819 OUTGOING VP, PRODUCT MANAGEMENT

ELIZABETH SANTILLI 119-619 OUTGOING VP, HUMAN RESOURCES

NARAYANAN KRISHNAN

OUTGOING SR DIRECTOR

VP, ENTERPRISE BUSINESS

FORMER CEO & DIRECTOR

119-1119

INFO TECH

8STEVEN MOLE

DEV & OPS

9MATTHEW S LOEB

142,571

205,239

223,709

50,717

122,721

275,084

efile GRAPHIC	print - DO NOT PROCESS As Filed Data -		DLN: 93493204005120	
SCHEDULE (Form 990 or 990 EZ) Department of the Treast	Complete to provide information for Form 990 or 990-EZ or to prov	ion to Form 990 or 990-EZ for responses to specific questions on ovide any additional information. OMB No 1545-004 2019 Open to Public Inspection		
Namel Betherorganis INFORMATION SYSTEM CONTROL ASSOCIATIO 990 Schedule O	S AUDIT AND		Employer identification number 23-7067291	
Return Reference		Explanation		
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION	INFORMATION SYSTEMS AUDIT AND CONTROL AS BEING A LEADING GLOBAL PROVIDER OF KNOW EDUCATION ON INFORMATION SYSTEMS ASSUR INFORMATION TECHNOLOGY (IT), IT-RELATED R IN 1969, ISACA SPONSORS INTERNATIONAL CON PUBLISHES RESEARCH, PROVIDES BENEFITS GI COUNTRIES AND DEVELOPS INTERNATIONAL IN ISACA ALSO ADMINISTERS THE GLOBALLY RESECERTIFIED INFORMATION SECURITY MANAGER (CGEIT), CERTIFIED IN RISK AND INFORMATION DESIGNATIONS ISACA HAS 222 LOCAL CHAPTER UPDATE AND EDUCATION ACTIVITIES RELATED SIZING ENTERPRISE GOVERNANCE OF INFORMATION OF THE PROPERTY OF THE PRO	LEDGE, CERTIFICATIONS, COM ANCE AND SECURITY, GOVERI SK AND COMPLIANCE, AND OT FERENCES, PUBLISHES THE IS LOBALLY TO MORE THAN 140,0 FORMATION SYSTEMS AUDITING (CISM), CERTIFIED IN THE GOVEYSTEMS CONTROL (CRISC) AIR SAROUND THE WORLD ISAC, TO COBIT 2019, A FRAMEWORK ATION AND TECHNOLOGY, AND	IMUNITY, ADVOCACY AND NANCE OF ENTERPRISE THER RELATED TOPICS FOUNDED SACA JOURNAL, CONDUCTS AND 00 MEMBERS IN MORE THAN 185 NG AND CONTROL STANDARDS ON SYSTEMS AUDITOR (CISA), TERNANCE OF ENTERPRISE IT ND CSX PRACTITIONER (CSX-P) A SUPPORTS DEVELOPMENT, C FOR CUSTOMIZING AND RIGHT- O CYBERSECURITY NEXUS (CSX),	

Return Reference	Explanation
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS	INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION'S (ISACA) PRIMARY PURPOSE IS TO SERVE ITS MEMBERS ONE WAY ISACA DOES SO IS BY HELPING THEM DO THEIR JOBS BETTER, BY OFFERING THEM PRAGMATIC GUIDANCE ON EMERGING TECHNOLOGIES THEY DEAL WITH EVERY DAY MORE THAN 100 KNOWLEDGE ASSETS WERE RELEASED IN VARIOUS FORMATS IN 2019, INCLUDING PRINT, INTERACTIVE (TOOLS, AUDIT PROGRAMS), VIDEO AND AUDIO ISACA HOSTED IN-PERSON CONFERENCES IN NORTH AMERICA, EUROPE, ASIA AND AFRICA, IN ADDITION TO NUMEROUS OTHER TRAINING OPPORTUNITIES, INCLUDING ONLINE LEARNING THE ASSOCIATION OFFERS MEMBER BENEFITS IN THE AREAS OF PROFESSIONAL DEVELOPMENT, COMMUNITY AND LEADERSHIP, AND CONTINUALLY REVIEWS AND EXPANDS ITS PORTFOLIO OF BENEFITS TO ADDRESS THE CHANGING NEEDS OF MEMBERS MANY MEMBER BENEFITS ARE DOCUMENTED AND FURTHER EXPLAINED WITHIN THE OTHER RESPONSES ON THIS FORM A TOTAL OF 28,295 NEW MEMBERS JOINED THE ISACA PROFESSIONAL COMMUNITY IN 2019 IN ADDITION, A NEW CHAPTER WAS ADDED, TAKING THE TOTAL NUMBER OF CHAPTERS WORLDWIDE TO 222 IN 96 COUNTRIES

Return Reference	Explanation
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS	INFORMATION TECHNOLOGY (IT) IS A RAPIDLY CHANGING INDUSTRY, AND IT DEMANDS A COMMITMENT ON THE PART OF ITS PRACTITIONERS TO LEARN CONTINUOUSLY AND MASTER NEW SKILLS CERTIFICATION IS ONE WAY TO EXPAND ONE'S SKILL SET AND BE RECOGNIZED FOR DOING SO HOLDING AN ISACA PROFESSIONAL CERTIFICATION DEMONSTRATES EXCELLENCE IN THE TOPIC AND A COMMITMENT TO REMAINING CURRENT AND INFORMED, IT DISTINGUISHES AN INDIVIDUAL FROM HIS/HER PEERS ISACA OFFERS FIVE CERTIFICATION EXAMS CERTIFIED INFORMATION SYSTEMS AUDITOR (CISA), CERTIFIED INFORMATION SECURITY MANAGER (CISM), CERTIFIED IN THE GOVERNANCE OF ENTERPRISE IT (CGEIT), CERTIFIED IN RISK AND INFORMATION SYSTEMS CONTROL (CRISC) AND CSX PRACTITIONER (CSX-P) DESIGNATIONS MORE THAN 150,000 CISAS HAVE BEEN CERTIFIED SINCE ITS INCEPTION IN 1978, MORE THAN 50,000 CISMS HAVE BEEN CERTIFIED SINCE ITS INCEPTION IN 2002, MORE THAN 8,000 CGEITS HAVE BEEN CERTIFIED SINCE ITS INCEPTION IN 2010 IN 2019, THE COBIT 2019 FOUNDATIONS CERTIFICATE EXAM AND THE COBIT 2019 DESIGN AND IMPLEMENTATION EXAM WERE DEVELOPED AND DELIVERED

Return Reference

Return Reference	Explanation
FORM 990, PART III,	IN 2019, THE ISACA EDUCATION ROSTER INCLUDED MAJOR FACE-TO-FACE EVENTS SUCH AS THE GLOBAL
LINE 4C, PROGRAM	COMPUTER AUDIT, CONTROL AND SECURITY (CACS) AND INFOSECURITY-ISACA NORTH AMERICA
SERVICE	CONFERENCES, TOPIC-SPECIFIC CONFERENCES (ON INFORMATION SECURITY AND RISK MANAGEMENT,
ACCOMPLISHMENTS	AND ON GOVERNANCE, RISK AND COMPLIANCE), AND WEEK-LONG TRAINING EVENTS FOCUSING IN-DEPTH
	ON ONE OR TWO TOPICS ISACA IS DEDICATED TO MONITORING THE PROFESSIONAL ENVIRONMENT AND
	DEVELOPING NEW PROGRAMS AS NEEDED TO COMPLEMENT ITS ESTABLISHED PORTFOLIO OF EVENTS
	THE ASSOCIATION HAS FOCUSED A CONSIDERABLE AMOUNT OF EFFORT ON DIGITAL LEARNING
	PLATFORMS, AS IT PROVIDES A WAY TO COVER EMERGING TOPICS ON A TIMELY BASIS AND OFFER LOW-
	COST EDUCATION TO A GLOBALLY DISPERSED AUDIENCE

Explanation

990	Schedule	Ο,	Supplemental	Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	ON JUNE 14, 2019, THE ISACA BOARD APPROVED THE AMENDED/RESTATED BYLAWS DUE TO THE FOLLOWIN G CHANGES - THE FOLLOWING LANGUAGE IS ADDED TO SECTION 6 3 OF THE ISACA BYLAWS "THE CHAIR TO FEACH STANDING COMMITTEE SHALL BE A CURRENT MEMBER OF THE ISACA BOARD OF DIRECTORS" - IN THE COMPOSITION SECTION OF THE CHARTER OF THE GOVERNANCE COMMITTEE, THE LANGUAGE, "SUCH CHAIR SHALL BE A PAST BOARD CHAIR WHO IS NOT CURRENTLY SERVING ON THE BOARD" SHALL BE REM OVED - IN THE COMPOSITION SECTION OF THE CHARTER OF THE NOMINATING COMMITTEE, THE LANGUAGE "THE CHAIR FOR THE COMPOSITION SECTION OF THE CHARTER OF THE NOMINATING COMMITTEE, THE LANGUAGE "THE CHAIR FOR THE COMMITTEE SHALL BE THE MOST RECENT PAST BOARD CHAIR ON THE COMMITTEE SHALL BE SELECTED BY THE BOARD" - IN THE COMPOSITION SECTION OF THE CHARTER OF THE CHAIR FOR THE COMMITTEE SHALL BE SELECTED BY THE BOARD" - IN THE COMPOSITION SECTION OF THE CHARTER OF THE FINANCE COMMITTEE, THE FOLLOWING LANGUAGE SHALL BE ADDED "THE CHAIR FOR THE COMMITTEE SHALL BE SELECTED BY THE BOARD" ON AUGUST 4, 2019, THE ISACA BOARD APPROVED THE FOLLOWING - TO CHANGE THE STANDING COMMITTEE STRUCTURE TO BE AS FOLLOWS, WHICH WOULD BECOME EFFECTIVE UPON BOARD APPROVAL OF THE CHARTERS FOR FIVE COMMITTEES AUDIT, COMPENSATION, EXECUTIVE, GOVERNANCE & NOMINATING AND RISK & TECHNOLOGY - TO CREATE A TASK FORCE TO REVIEW THE NOMIN ATIONS PROCESS FOR ISACA DIRECTORS TO ALIGN TO THE NEW ISACA STRATEGY THIS TASK FORCE WILL CONSIST OF DIRECTORS BAYBECK, DIMITRIADIS, CLYDE, AND GROCHOLSKI, WHICH DIRECTOR DIMITRI ADIS WOULD ACT AS CHAIR AND WHICH TASK FORCE WOULD PROVIDE THE DRAFT NOMINATION PROCESS FO R APPROVAL AT THE NOVEMBER 2019 BOARD MEETING - TO DIRECT THE BOARD TASK FORCE TO PROVIDE A DRAFT CHARTER FOR THE GOVERNANCE & NOMINATING COMMITTEE FOR APPROVAL BY THE BOARD THE NEW COMMITTEE STRUCTURE WOULD BE COMPOSED ONLY OF INDEPENDENT DIRECTORS THE BOARD FURTHER RESOLVES THAT THE GOVERNANCE & NOMINATING COMMITTEE WOULD CONSIST ONLY OF PAST BOARD CHAIRS AND/OR NON-CONTRACT OF THE CORPORATION WHO WILL FOLL

Return

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Reference	
FORM 990,	THE BOARD CHAIR FOR THE SUBSEQUENT BOARD TERM NO LATER THAN THE LAST IN-PERSON BOARD MEET ING
PART VI,	FOR THE CURRENT TERM WHEN THE CHAIR AND VICE-CHAIR ARE NOT AVAILABLE TO PRESIDE AT A MEETING, A
SECTION A,	MAJORITY VOTE OF DIRECTORS THEN IN OFFICE SHALL DESIGNATE AN ELECTED DIRECTOR T O PRESIDE AT THAT
LINE 4	MEETING " - SECTION 4 16 OF THE BYLAWS IS CHANGED TO READ AS FOLLOWS. "THE VICE-CHAIR SHALL HAVE THE

Explanation

POWERS AND DUTIES AS SET FORTH IN THE POLICIES APPROVED BY THE BOARD OR IN THESE BYLAWS IF THE CHAIR IS ABSENT, THE VICE-CHAIR SHALL PERFORM THE DUTIES OF THE CHAIR THE BOARD SHALL APPOINT THE VICE CHAIR FOR THE SUBSEQUENT BOARD TERM NO LA TER THAN THE LAST IN-PERSON BOARD MEETING FOR THE CURRENT TERM

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	ISACA MAINTAINS A MEMBERSHIP OF INDIVIDUALS, THERE IS NO CORPORATE MEMBERSHIP CATEGORY ANYONE INTERESTED IN THE PURPOSES AND OBJECTIVES OF THE ASSOCIATION IS ELIGIBLE FOR MEMBERSHIP THE VAST MAJORITY OF ISACA MEMBERS ALSO BELONG TO A LOCAL CHAPTER (MEMBERSHIP IN ISACA IS REQUIRED FOR ANYONE HOLDING MEMBERSHIP IN A CHAPTER) A MEMBER-AT-LARGE CATEGORY EXISTS FOR INDIVIDUALS WHO WISH TO JOIN ISACA BUT WHO LIVE AT SUCH A DISTANCE FROM A LOCAL CHAPTER THAT ATTENDANCE AT MEETINGS IS PROHIBITIVE STUDENT AND RECENT GRADUATE MEMBER CATEGORIES ARE OFFERED AS WELL ISACA'S MEMBERSHIP IS CHARACTERIZED BY DIVERSITY MEMBERS OF ISACA'S PROFESSIONAL COMMUNITY LIVE AND WORK IN MORE THAN 180 COUNTRIES AND RUN THE GAMUT OF JOB TITLES, INCLUDING INFORMATION SYSTEM AUDITOR, CONSULTANT, EDUCATOR, INFORMATION SECURITY MANAGER, REGULATOR, CHIEF INFORMATION OFFICER, INTERNAL AND EXTERNAL AUDITOR, COMPLIANCE OFFICER, RISK MANAGER AND STUDENT SOME ARE NEW TO THE FIELD, WHILE OTHERS ARE AT MIDDLE MANAGEMENT LEVELS OR SENIOR RANKS THEY WORK IN FINANCE AND BANKING, PUBLIC ACCOUNTING, HOSPITALITY, HEALTH CARE, GOVERNMENT AND THE PUBLIC SECTOR, UTILITIES, MANUFACTURING AND RETAIL ISACA MEMBERS EMBRACE THIS DIVERSITY AS PROVIDING A VAST LEARNING GROUND WHERE THEY MAY DELVE INTO THE CHALLENGES AND OPPORTUNITIES FACED BY COLLEAGUES IN OTHER COUNTRIES, POSITIONS OR INDUSTRIES ISACA RECOGNIZES THAT ITS MEMBERS CONSTITUTE AN EXTENSIVE AND VARIED POOL OF EXPERTISE, EXPERTISE THE ASSOCIATION COUNTS ON TO HELP PROVIDE SERVICES AND PRODUCTS THAT ENGENDER CREDIBILITY AND CAPABILITY IN ITS CONSTITUENTS THE MORE MEMBERS, THE MORE EXPERTISE, THE MORE EXPERTISE, THE BETTER THE ABILITY TO MEET THE NEEDS OF ITS PROFESSIONAL COMMUNITY ISACA'S MEMBERS ARE ITS MOST VALUABLE ASSET

990 Schedule O, Supplemental Information

Return

Reference	
FORM 990,	ONLY THE BOARD OF DIRECTORS ELECT OR APPOINT OTHER BOARD MEMBERS. ANNUALLY, IN APRIL OF EACH
PART VI,	YEAR, THE ISACA BOARD IS PRESENTED WITH THE FOLLOWING TERM'S BOARD SLATE FOR APPROVAL, ENDORSED
SECTION A,	BY THE GOVERNANCE & NOMINATING COMMITTEE THE GOVERNANCE & NOMINATING COMMITTEE IS COMPRISED
I INF 7A	OF ISACA MEMBERS WHO ARE CURRENT SITTING DIRECTORS ON THE ISACA BOARD OF DIRECTORS

Explanation

Return

Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	ALL MEMBERS IN GOOD STANDING SHALL HAVE THE RIGHT TO VOTE ON THE DISPOSITION OF ALL OR SUBSTANTIALLY ALL OF THE ASSETS OF THE CORPORATION, ON ANY MERGER AND ITS PRINCIPAL TERMS AND ANY AMENDMENT OF THOSE TERMS, AND ON ANY ELECTION TO DISSOLVE THE CORPORATION IN ADDITION, MEMBERS SHALL HAVE ALL RIGHTS AFFORDED TO MEMBERS UNDER THE CALIFORNIA CORPORATIONS CODE IF THE CORPORATION IS DISSOLVED, ASSETS, EXCLUSIVE OF THOSE HELD IN CHARITABLE TRUST, REMAINING AFTER PAYMENT OR PROVISION FOR PAYMENT OF THE OBLIGATIONS AND DEBTS OF THE CORPORATION AND PROVISION FOR ANY OTHER PAYMENT REQUIRED UNDER APPLICABLE LAW SHALL BE DISTRIBUTED AS PROVIDED IN THE CORPORATION'S ARTICLES OF INCORPORATION

Explanation

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE 2019 FORM 990 FOR INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) WAS PREPARED BY COHNREZNICK LLP (COHNREZNICK), BASED UPON INFORMATION PROVIDED BY ISACA THIS DOCUMENT SUMMARIZES THE REVIEW POINTS AND AVAILABILITY ASSOCIATED WITH THE RETURNS THE DATA FOR THE RETURN WAS COMPILED BASED ON INFORMATION PREPARED FOR THE 2019 AUDIT, AS WELL AS OTHER ACCOUNTING RECORDS THIS INFORMATION WAS SUBMITTED TO COHNREZNICK FOR PREPARATION OF THE RETURNS IN ADDITION TO THE FINANCIAL INFORMATION COHNREZNICK RECEIVED, COHNREZNICK HAD AN OPPORTUNITY TO RAISE QUESTIONS ABOUT GOVERNANCE AND OTHER ISSUES AND REQUEST ADDITIONAL INFORMATION AS NEEDED THE NARRATIVE EXPLANATIONS OF PROGRAM ACCOMPLISHMENTS AND POLICIES WERE COORDINATED WITH THE APPLICABLE DIRECTORS AND MEMBERS OF THE LEADERSHIP TEAM UPON COMPLETION OF THE RETURN, SEVERAL LAYERS OF REVIEW WERE CONDUCTED - INITIAL REVIEWS OF RETURN THE INITIAL REVIEW OF THE COMPLETED RETURN WAS COMPLETED BY THE RESPECTIVE STAFF WITHIN THE FINANCE DEPARTMENT - SENIOR MANAGEMENT REVIEW FOLLOWING THE INITIAL REVIEW, THE LEADERSHIP TEAM INCLUDING THE CEO WERE PROVIDED A COPY OF THE RETURN FOR COMMENT THE CEO, CFO AND DIRECTOR OF HUMAN RESOURCES ALSO PROVIDED AN ADDITIONAL REVIEW OF THE COMPENSATION-RELATED AREAS COMMENTS WERE FORWARDED TO COHNREZNICK FOR INCORPORATION INTO THE RETURN - VOLUNTEER REVIEW THE BOARD OF DIRECTORS WERE PROVIDED ACCESS TO THE RETURN VIA BOARD EFFECT (WEB SITE) PRIOR TO ITS FILING COMMENTS FROM THESE REVIEWS WERE EVALUATED AND PROVIDED TO COHNREZNICK, WHO UPDATED THE RETURN, AS APPLICABLE

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION, INC (ISACA) HAS A CONFLICT OF INTEREST POLICY THAT DEFINES AN INTERESTED PERSON AS ANY DIRECTOR, OFFICER, OR MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWER AN INDEPENDENT DIRECTOR IS DEFINED AS DESCRIBED IN THE INSTRUCTIONS FOR THE IRS 990 FORM, OR IN THE ABSENCE OF SUCH DEFINITION AS AN INDIVIDUAL WHO HAS NOT IN THE PAST THREE YEARS BEEN AN EMPLOYEE OF ISACA OR ANY ENTITY IN WHICH ISACA HAS AN INTEREST, WHO DOES NOT HAVE A SIGNIFICANT BUSINESS RELATIONSHIP WITH ISACA WHICH COULD IMPACT INDEPENDENT DECISION MAKING, WHO DOES NOT SERVE AS THE EXECUTIVE OF ANOTHER CORPORATION WHERE ANY OF ISACA'S EXECUTIVE OFFICERS OR EMPLOYEES SERVE ON THAT CORPORATION'S COMPENSATION COMMITTEE AND WHO DOES NOT HAVE AN IMMEDIATE FAMILY MEMBER WHO IS AN EXECUTIVE OFFICER OR EMPLOYEE OF ISACA OR WHO HOLDS A POSITION THAT HAS A SIGNIFICANT FINANCIAL RELATIONSHIP WITH ISACA SUCH POLICY ALSO DIRECTS BOARD MEMBERS AND OTHERS TO KEEP IN CONFIDENCE ALL ISACA CONFIDENTIAL INFORMATION, REQUIRES BOARD MEMBERS AND OTHERS TO DISCLOSE ARRANGEMENTS THAT MAY PROPOSE A CONFLICT OF INTEREST SO THAT THE CONFLICT OF INTEREST PANEL COMPRISED OF THE GOVERNANCE & NOMINATING COMMITTEE CHAIR, BOARD CHAIR AND ISACA CEO MAY EVALUATE SUCH ARRANGEMENTS FURTHER, THIS POLICY DETAILS THE PROCEDURES THAT MUST BE USED IN CONSIDERING A CONFLICT OF INTEREST, PERIODIC REVIEWS OF ANY COMPENSATION ARRANGEMENTS AND OTHER PARTNERSHIPS POTENTIAL CONFLICTS OF INTEREST ARE DOCUMENTED AND MONITORED EACH YEAR, THROUGH (1) SELF-PROCLAMATIONS MADE BY INDIVIDUAL VOLUNTEERS WHO SIGN THE PARTICIPATION AGREEMENTS REQUIRED FOR PARTICIPATION IN ASSOCIATION BOARDS, COMMITTEES, WORKING GROUPS AND TASK FORCES, (2) DISCLOSURE OF CONFLICTS IN STANDARD CONSULTING AGREEMENTS, AND (3) DISCLOSURE BY ISACA EMPLOYEES UPON HIRE (AND ANNUALLY) BY REVIEW AND SIGNATURE OF THE ORGANIZATION'S EMPLOYEE AGREEMENT CONSULTANTS, VOLUNTEERS AND EMPLOYEES ARE ENCOURAGED TO REPORT ANY CONFLICTS THAT MAY ARISE THROUGHOUT THE YEAR IF SUCH INSTANCES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION PHILOSOPHY OF INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA), WHICH IS AFFIRMED BY THE BOARD OF DIRECTORS, SHOULD FACILITATE ISACA'S ABILITY TO ATTRACT, MOTIVATE AND RETAIN QUALITY STAFF THE COMPENSATION PHILOSOPHY IS SUPPORTED BY USE OF AN INDEPENDENT COMPENSATION CONSULTING FIRM AND THE ESTABLISHMENT OF A COMPENSATION COMMITTEE COMPOSED OF INDEPENDENT MEMBERS OF THE BOARD OF DIRECTORS (CURRENT BOARD CHAIR, BOARD CHAIR, ELECT AND TWO IMMEDIATE PAST BOARD CHAIRS) BASED ON THE COMPENSATION PHILOSOPHY, THE COMPENSATION RANGE FOR THE CEO IS DEVELOPED BY THE COMPENSATION CONSULTANT AND REPORTED TO THE COMMITTEE COMPENSATION RANGES ARE ALSO DEVELOPED BY THE CONSULTANT AND REPORTED TO THE EXECUTIVE MANAGEMENT TEAM WITH COMPENSATION VARIANCES TO THE RANGES PROVIDED TO THE COMMITTEE RANGES ARE CALCULATED BASED ON POSITION RESPONSIBILITIES AND A BLEND OF THE NOT-FOR-PROFIT AND FOR-PROFIT SECTORS, WHICH REFLECTS THE LABOR MARKET IN WHICH ISACA COMPETES FOR EXECUTIVE TALENT 60% FOR-PROFIT ORGANIZATIONS AND 40% NOT-FOR-PROFIT ORGANIZATIONS THE FINAL REPORT OF THE COMPENSATION CONSULTANT AS ACCEPTED BY THE COMMITTEE, THE COMPENSATION PHILOSOPHY, AND CONTRACT (IF APPLICABLE) THEN SERVE AS THE BASIS FOR THE DETERMINATION OF COMPENSATION, CONSISTING OF BASE SALARY, INCENTIVES, TOTAL CASH COMPENSATION AND BENEFITS DETERMINATION FOR EXECUTIVE MANAGEMENT IS MADE BY THE CEO BASED UPON THE ACCEPTED COMPENSATION, CONSISTING OF BASE SALARY, INCENTIVES, TOTAL CASH COMPENSATION FOR THE CEO IS MADE BY THE COMPENSATION COMMITTEE THE TOTAL REMUNERATION PACKAGES FOR THE CEO AND THE LEADERSHIP TEAM IS REVIEWED ANNUALLY BY THE COMPENSATION COMMITTEE DETERMINATION FOR THE CEO IS MADE BY THE COMPENSATION COMMITTEE THE TOTAL REMUNERATION COMMITTEE THE COMPENSATION COMMITTEE THE COMPENSATION FOR ALL STAFT IS REVIEWED EVERY THREE TO FIVE YEARS EXCEPT IF THERE IS A CHANGE IN CONTROL, MERGER AND/OR ACQUISITION, OR OTHER ACTIVITY THAT CHANGES ROLES AND RESPONSIBILITIES. THEN PERFORMED AS NEEDED GATHERING THE INFORMATION N

Return

Reference		
FORM 990,	THE FOLLOWING DOCUMENTS ARE POSTED TO THE INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION,	l
PART VI,	INC (ISACA) WEB SITE OR PROVIDED UPON REQUEST PARTICIPATION AGREEMENT, INTELLECTUAL PROPERTY (IP)	l

Explanation

SECTION C, WAIVER, ARTICLES OF INCORPORATION, BYLAWS AND ANNUAL REPORT ISACA DOES NOT HAVE AN IRS FORM 1023, BUT IT DOES PROVIDE THE IRS LETTER OF DETERMINATION, UPON REQUEST IN ADDITION, IRS FORM 990 IS PUBLICLY AVAILABLE THROUGH GUIDESTAR'S WEB SITE AND THE ILLINOIS ATTORNEY GENERAL'S WEB SITE

Return Explanation
Reference

FORM 990, PART XI, LINE 9

990 Schedule O, Supplemental Information

Paturn

Reference	Explanation
FORM 990,	INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION (ISACA) HAS AN AUDIT COMMITTEE RESPONSIBLE FOR
PART XII,	THE OVERSIGHT OF THE AUDIT, THE SELECTION OF THE INDEPENDENT ACCOUNTANT, AND THE REVIEW AND
LINE 2C	COMPILATION OF ITS FINANCIAL STATEMENTS

Evolunation

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE R**

(Form 990)

INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION INC

As Filed Data -

Related Organizations and Unrelated Partnerships

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

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

OMB No 1545-0047

DLN: 93493204005120

Open to Public Inspection

Employer identification number

23-7067291

Department of the Treasury Internal Revenue Service Name of the organization

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) (c) (d) (e) (f) Legal domicile (state Direct controlling Name, address, and EIN (if applicable) of disregarded entity End-of-year assets Primary activity Total income or foreign country) entity (1) CMMI INSTITUTE LLC TRAINING/CONSULTING 8,282,401 ISACA PΑ 1,632,252 11 STANWIX ST STE 1150 PITTSBURGH, PA 15222 30-0750321 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) (d) (f) (c) (e) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512 or foreign country) (if section 501(c)(3)) (b)(13) entity controlled entity? Yes No (1)ISACA ENTERPRISES INC TRAINING/CONSULTING DE 501(C)(6) LINE 10 ISACA Yes 1700 EAST GOLF ROAD SUITE 400 SCHAUMBURG, IL 60173 81-1115397 (2)IT GOVERNANCE INSTITUTE RESEARCH/DEVELOPMENT ΙL 501(C)(3) LINE 12B, II ISACA Yes 1700 EAST GOLF ROAD SUITE 400 SCHAUMBURG, IL 60173 95-3080691 (3) ONE IN TECH AN ISACA FOUNDATION **EDUCATION** DE 501(C)(3) LINE 12A. I ISACA Yes 1700 EAST GOLF ROAD SUITE 400 SCHAUMBURG, IL 60173 83-4605433 Schedule R (Form 990) 2019 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y

(2)														
(a) Name, address, and E related organization	EIN of on	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predomi Income(re unrelat excluded tax un sections	nant Sha elated, total i ed, from der 512-	f) re of ncome	(g) Share of end-of-year assets	Disprop alloca		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or Piging coner?	(k) ercentage ownership
						,			Yes	No		Yes	No	
												1		
							-+					1		
Part IV Identification of Related Or							answ	ered "Yes	on F	orm 9	90, Part IV	/, lıne	34	
because it had one or more rel	(b)	as a corporation (c			e tax ye.	ar. (e)		(f)	1	(g)	1 0	h)		(1)
(a) Name, address, and EIN of related organization	Primary activity	Leg dom (state or coun	jal icile foreign	Direct c	ontrolling itity	Type of entit (C corp, S cor or trust)	y Sha	are of total income	Share	of end-c year assets	of- Perce	ntage ership	(13	tion 512(t) controlle entity?
(1)ISACA GLOBAL INC	HOLDING COMPANY	DE		TNEODMA	TION	C		1,251,596		572,53	4 100 00	00 %	Ye	s No
• •				TIM OKIN					1					
1700 EAST GOLF ROAD SUITE 400 SCHAUMBURG, IL 60173 81-4641778				SYSTEMS AND CON	AUDIT									
	HOLDING COMPANY	DE	<u> </u>	SYSTEMS AND CON ASSOCIA	AUDIT ITROL ITION INC	C					100 00	00 %	Ye	s
SCHAUMBURG, IL 60173 81-4641778	HOLDING COMPANY	DE	.	SYSTEMS AND COM ASSOCIA INFORMA SYSTEMS AND COM	AUDIT ITROL ITION INC ITION S AUDIT	С					100 00	00 %	Ye	s
SCHAUMBURG, IL 60173 81-4641778 (2)ISACA ENTERPRISES INC 1700 EAST GOLF ROAD SUITE 400 SCHAUMBURG, IL 60173	HOLDING COMPANY	DE	:	SYSTEMS AND COM ASSOCIA INFORMA SYSTEMS AND COM	AUDIT ITROL ITION INC ITION ATION ATION TION TION TION	C					100 00	OO %	Ye	S
SCHAUMBURG, IL 60173 81-4641778 (2)ISACA ENTERPRISES INC 1700 EAST GOLF ROAD SUITE 400 SCHAUMBURG, IL 60173	HOLDING COMPANY	DE	:	SYSTEMS AND COM ASSOCIA INFORMA SYSTEMS AND COM	AUDIT ITROL ITION INC ITION ATION ATION TION TION TION	С					100 00	00 %	Ye	s
SCHAUMBURG, IL 60173 81-4641778 (2)ISACA ENTERPRISES INC 1700 EAST GOLF ROAD SUITE 400 SCHAUMBURG, IL 60173	HOLDING COMPANY	DE	Ē	SYSTEMS AND COM ASSOCIA INFORMA SYSTEMS AND COM	AUDIT ITROL ITION INC ITION ATION ATION TION TION TION	С					100 00	00 %	Ye	S
SCHAUMBURG, IL 60173 81-4641778 (2)ISACA ENTERPRISES INC 1700 EAST GOLF ROAD SUITE 400 SCHAUMBURG, IL 60173	HOLDING COMPANY	DE		SYSTEMS AND COM ASSOCIA INFORMA SYSTEMS AND COM	AUDIT ITROL ITION INC ITION ATION ATION TION TION TION	С					100 00	00 %	Ye	5
SCHAUMBURG, IL 60173 81-4641778 (2)ISACA ENTERPRISES INC 1700 EAST GOLF ROAD SUITE 400 SCHAUMBURG, IL 60173	HOLDING COMPANY	DE		SYSTEMS AND COM ASSOCIA INFORMA SYSTEMS AND COM	AUDIT ITROL ITION INC ITION ATION ATION TION TION TION	С					100 00	00 %	Ye	S

Schedule R (Form 990) 2019

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
4 Downsthate and the comment of the following transport of the following tr		$\overline{}$

1 D	1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?					
а	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)	1 b	Yes			
c	Gift, grant, or capital contribution from related organization(s)	1c		No		
d	Loans or loan guarantees to or for related organization(s)	1 d	Yes			
е	Loans or loan guarantees by related organization(s)	1e	Yes			
f	Dividends from related organization(s)	1 f		No		
a	Sale of accets to related organization(s)	10		Nο		

·	Girl, grant, or capital contribution from related organization(s)	-~	- 1	
d	d Loans or loan guarantees to or for related organization(s)	1d	Yes	
e	e Loans or loan guarantees by related organization(s)	1e	Yes	
f	Dividends from related organization(s)	1f		No
g	g Sale of assets to related organization(s)	1 g		No
h	n Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1 i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No

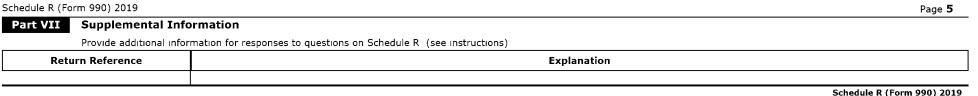
f Dividends from related organization(s)		1 f	No
g Sale of assets to related organization(s)		1g	No
h Purchase of assets from related organization(s)	Ī	1h	No
i Exchange of assets with related organization(s)		1i	No
\mathbf{j} Lease of facilities, equipment, or other assets to related organization(s)	. [1j	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)		1o Yes	
p Reimbursement paid to related organization(s) for expenses		1 p	No
q Reimbursement paid by related organization(s) for expenses		1q Yes	
r Other transfer of cash or property to related organization(s)	[1r Yes	

h Purchase of assets from related organization(s)				1h	No
i Exchange of assets with related organization(s)				1i	No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s) \cdot				1j	No
k Lease of facilities, equipment, or other assets from related organization(s) $\dots \dots \dots \dots$				1k	No
l Performance of services or membership or fundraising solicitations for related organization(s) \dots				11	No
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m	No
f n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n Yes	
o Sharing of paid employees with related organization(s)				1o Yes	
p Reimbursement paid to related organization(s) for expenses				1p	No
q Reimbursement paid by related organization(s) for expenses				1q Yes	
r Other transfer of cash or property to related organization(s)				1r Yes	+
s Other transfer of cash or property from related organization(s)				1s	No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line	, including covered r	elationships and trai	nsaction thresholds		
See Additional Data Table					
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	; amount involved	

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

was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)		(e) re all partners section 501(c)(3) rganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			514)	Yes	No	<u> </u>		Yes	No		Yes	No	
				_					_	Schedul	e R (Form	1 990	0) 2019



Additional Data

ISACA ENTERPRISES INC

ISACA ENTERPRISES INC

ISACA ENTERPRISES INC

ISACA ENTERPRISES INC

ISACA GLOBAL INC

ONE IN TECH AN ISACA FOUNDATION

(1)

(1)

(2)

(3)

(4)

(5)

(6)

(7)

(8)

(9)

(10)

(11)

(12)

(13)

Software Version: **EIN:** 23-7067291

Software ID:

Name: INFORMATION SYSTEMS AUDIT AND

(c)

Amount Involved

296,426

1,952,526

1.581.834

1,656,100

65,492

274,825

280,579

346,071

1,341,600

164,069

178,799

351,144

515,213

515,213

FMV

type(a-s)

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В

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Q

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Ν

Е

0

Q

В

(d)

Method of determining amount involved

CONTROL ASSOCIATION INC					
m 990, Schedule R, Part V - Transactions With Related Organizations					
(a)	(b)				

CONTROL ASSOCIATION INC	
orm 990, Schedule R, Part V - Transactions With Related Organizations	
(a)	(b)

Name of related organization Transaction