WEGNER CPAS LLP 419 N LEE ST ALEXANDRIA, VA 22314-2301

FINANCIAL PLANNING ASSOCIATION 1290 BROADWAY, 1625 DENVER, CO 80203

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\*\* PUBLIC DISCLOSURE COPY \*\*
Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

н г	OI LITE	e 2023 Calefidat year, or tax year beginning	ina enamg		
	heck if	C Name of organization	_	D Employer identifi	cation number
	Addre	FINANCIAL PLANNING ASSOCIATION			
	Name chang	Doing business as		84-15214	88
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/su		
	Final return/	1290 BROADWAY	1625	303-759-	1
_	termin ated	, , , , , , , , , , , , , , , , , , , ,		<b>G</b> Gross receipts \$	8,036,552.
	Ameno return	DENVER, CO 80203		H(a) Is this a group r	
	Application			for subordinates	s? Yes X No
	pendir	SAME AS C ABOVE		H(b) Are all subordinates i	ncluded? Yes No
<u> </u>	ax-exe	empt status: 501(c)(3) X 501(c)(6) (insert no.) 4947(a)	(1) or 5	If "No," attach a	list. See instructions
_	Vebsit			H(c) Group exemption	
K F	orm of	organization: X Corporation Trust Association Other	L Ye	ear of formation: $1999 _{f i}$	<b>M</b> State of legal domicile; <b>DC</b>
Pa	rt I	Summary			
a	1	Briefly describe the organization's mission or most significant activities: $\underline{\mathtt{FPP}}$	A FOSTE	ERS THE VALUE	OF
Activities & Governance		FINANCIAL PLANNING AND ADVANCES THE FIN			
ž Į	_	Check this box if the organization discontinued its operations or dis	sposed of mo	ore than 25% of its net as	
8				3	12
S		Number of independent voting members of the governing body (Part VI, line 1			12
es	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			30
Œ		Total number of volunteers (estimate if necessary)			1050
Act				<u>7a</u>	400,234.
$\dashv$	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
			-	Prior Year	Current Year
<u>a</u>		Contributions and grants (Part VIII, line 1h)		75,000.	75,000.
en e		Program service revenue (Part VIII, line 2g)		7,924,712.	7,154,331.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		60,488.	83,679.
-		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		991,515.	723,542.
$\dashv$		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12		9,051,715.	8,036,552.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		122,616.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		<u>0.</u> 3,442,268.	3,104,862.
ès		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1		3,442,200.	
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		U •	0.
낆		Total fundraising expenses (Part IX, column (D), line 25)	0.	5,546,701.	5,123,688.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		9,111,585.	8,228,550.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-59,870.	-191,998.
<u>ہ</u> ہ		Revenue less expenses. Subtract line 18 from line 12		Beginning of Current Year	End of Year
Net Assets or -und Balances	20	Total assets (Part X, line 16)		6,694,548.	5,791,659.
Asse Bala	20 21	Total assets (Part X, line 16)  Total liabilities (Part X, line 26)		4,647,003.	3,610,380.
麒	22	Net assets or fund balances. Subtract line 21 from line 20		2,047,545.	2,181,279.
	rt II	Signature Block		_, \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
		Ities of perjury, I declare that I have examined this return, including accompanying sched	dules and state	ements, and to the best of m	v knowledge and belief, it is
		et, and complete. Declaration of preparer (other than officer) is based on all information o			, 1100 80 0.10 001019 10 10
		, a succession of the successi	р. ори		
Sign	1	Signature of officer		Date	
Here		PATRICK MAHONEY, CEO & SECRETARY			
•		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
aid			CPA	10/29/24 if self-emplo	p00086726
	arer	Firm's name WEGNER CPAS LLP			9-0974031
	Only	Firm's address 419 N LEE ST			
		ALEXANDRIA, VA 22314-2301		Phone no. (7	03) 519-0990
May	the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No

Page 2

1	Check if Schedule O contains a response or note to any line in this Part III
•	Briefly describe the organization's mission:  TO ELEVATE THE PROFESSION THAT TRANSFORMS LIVES THROUGH THE POWER OF FINANCIAL PLANNING.
1 Birelly describe the organization's mission: TO ELEVATE THE PROFESSION THAT TRANSFORMS LIVES THROUGH THE POWER OF FINANCIAL PLANNING.  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990 e2?  1 1 'Yes,' describe these new services on Schedule O.  3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes If 'Yes,' describe these changes on Schedule O.  4 Describe the organizations program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.  4 (Code	
2	
3	
4	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
 4а	
	PROFESSIONALS. THE EVENT SPOTLIGHTS FPA'S CORE COMPETENCIES: PRACTICE
	SUPPORT, LEARNING, ADVOCACY, AND NETWORKING. THE PROGRAM OFFERS MANY
4h	(Code: \ \( \( \( \( \( \) \\ \) \\ \) \( \) \( \( \) \\ \) \( \) \( \( \) \\ \) \(
+IJ	
	·
	PROFESSION THROUGH ADVOCACY.
_	
4C	FPA RETREAT IS A LONG-STANDING, NON-TRADITIONAL GATHERING OF THE FPA
4C	·
4C	COMMUNITY. IT IS AN EVENT THAT ATTRACTS LEADING FINANCIAL PLANNERS DUE
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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
Ü	, , ,	8		X
9	Schedule D, Part III	<u> </u>		
3	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9	Х	
10	If "Yes," complete Schedule D, Part IV	٦		
10		10		x
44	or in quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10		- 22
11				
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
	Part VI	11a	71	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in		Х	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			x
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-		x
	Schedule D, Parts XI and XII	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	401	Х	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> ^</u>
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	4 41:		х
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	4-		x
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		x
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4.0		v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	4.0		v
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			x
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		⚠

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Form	1 990 (2023) FINANCIAL PLANNING ASSOCIATION 84-15	21488	Р	age <b>4</b>
Pai	rt IV Checklist 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		X
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	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
	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?			
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	214		
Lou	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	204		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		25b		
06	Schedule L, Part I	250		
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%	000		X
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		<u>^</u>
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% controllec	- 1		X
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		┝┷
28	Was the organization a party to a business transaction with one of the following parties? (See the 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? If			٠,,
	"Yes," complete Schedule L, Part IV			X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<u>^</u>
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			٠,,
	"Yes," complete Schedule L, Part IV			X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M			X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			l
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	?		
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
	-		Yes	No
	Enter the number reported in her 2 of Form 1000. Enter 0, if not emplicable	/3	T	

Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 0 **b** Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable \_\_\_\_\_\_ c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

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923) FINANCIAL PLANNING ASSOCIATION
Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
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?	2b	X	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		37	
	any contributions that were not tax deductible as charitable contributions?	6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	OI.	v	
_	were not tax deductible?	6b	X	
7	Organizations that may receive deductible contributions under section 170(c).	7-		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	70		
٨		7c		
d e		7e		
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <del>f</del>		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
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?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  13b			
		14a		Х
14a h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<del>  ^*</del>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1-10		
	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.	.0		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
-	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		L
	If "Yes," complete Form 6069.			

332005 12-21-23

FINANCIAL PLANNING ASSOCIATION Form 990 (2023) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 12 **1a** Enter the number of voting members of the governing body at the end of the tax year 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 on Schedule O. 12 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 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? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,

	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	· · · · · · · · · · · · · · · · · ·	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		

### Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed GA, CO
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available
	for public inspection. Indicate how you made these available. Check all that apply.
	Own website Another's website X Upon request Other (explain on Schedule O)

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

State the name, address, and telephone number of the person who possesses the organization's books and records DENNIS MOORE -303-759-4900

1290 BROADWAY, STE 1625, DENVER, CO 80203

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)	l	inza		C)	.,,,	-	(D)	(E)	(F)
Name and title	Average	(do		Pos		<mark>າ</mark> than d	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation	amount of
	week				l	1711 43		from the	from related	other
	(list any hours for	direct				_		organization	organizations (W-2/1099-MISC/	compensation from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	trust	nal tru		oyee	om pe		1099-NEC)	,	and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1)	line)	lnd	Inst	0#!	Ke	e Fig	For			_
(1) PATRICK D MAHONEY CEO & SECRETARY	40.00	1		х				406 524	0.	27 546
(2) SANDRA GARCIA	40.00			^				406,534.	0.	27,546.
CFO	3.00	1		х				190,917.	0.	24,461.
(3) BEN LEWIS	40.00			_				190,917.	0.	24,401.
CCO	40.00					x		182,411.	0.	5,722.
(4) JORGE VALDIVIA	40.00							,	-	- ,
SENIOR MANAGER, TECHNOLOGY						Х		144,638.	0.	23,526.
(5) CHRISTINE RICHARDSON	40.00									-
MANAGING DIRECTOR, MEMBER EXPERIENCE						Х		113,681.	0.	12,914.
(6) AMY WOODWARD	40.00									
DIRECTOR, STRATEGIC PARTNERSHIP	4.00					Х		102,016.	0.	16,080.
(7) KURT KACZOR	40.00									
DIRECTOR, PRO BONO						X		100,673.	0.	14,159.
(8) JAMES LEE	5.00									
PRESIDENT		Х		Х				0.	0.	0.
(9) CLAUDIA KANE	5.00	1								_
PRESIDENT ELECT		Х		Х				0.	0.	0.
(10) DENNIS MOORE	5.00	l								
PAST PRESIDENT		Х		Х				0.	0.	0.
(11) CRYSTAL ALFORD-COOPER	5.00	ļ								
BOARD MEMBER		Х						0.	0.	0.
(12) PAUL BRAHIM	5.00	ļ								
BOARD MEMBER		Х						0.	0.	0.
(13) CARL CHRISTIE	5.00								•	•
BOARD MEMBER	F 00	Х						0.	0.	0.
(14) RUSSELL CLIFFORD	5.00								•	•
BOARD MEMBER	F 00	Х	_					0.	0.	0.
(15) GEORGE FERNANDEZ	5.00	.,								0
BOARD MEMBER	F 00	Х						0.	0.	0.
(16) DANIEL GALLI	5.00	3,7		7.7				_	_	0
TREASURER	F 00	Х		Х	_			0.	0.	0.
(17) LISA KIRSHENBAUER BOARD MEMBER	5.00	Х						0.	0.	0.
DOARD MENDER		Λ	I	l	<u> </u>		1	1 0.	U •	990 (2022)

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Part VII Section A. Officers, Directors, Trus		JiUy	ees,			Ji ies			,		/ <b>-</b> \	
(A)	(B)	(C) Position			1		(D)	(E)		(F)		
Name and title	Average hours per		not c	neck r	more	than c		Reportable	Reportable		Estima	
	week					s both r/trust		compensation from	compensatior from related	'	amoun othe	
	(list any	tor						the	organizations	.	compens	
	hours for	direct				p		organization	(W-2/1099-MIS		from t	
	related	3e 0r	stee			nsate		(W-2/1099-MISC/	1099-NEC)	٠ <i>,</i>	organiza	
	organizations	trust	al tru		yee	om pe		1099-NEC)	,		and rela	
	below	Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	ner				organiza	tions
	line)	Indiv	Insti	Officer	Key 6	High emp	Former					
(18) BYRKE SESTOK	5.00											
BOARD MEMBER		Х						0.		0.		0.
(19) ROBERT VAN BEEK	5.00											
BOARD MEMBER		Х						0.		0.		0.
		1										
		1										
		1										
		1										
		-										
		4										
1b Subtotal								1,240,870.		0.	124,4	108.
c Total from continuation sheets to Part VI	I, Section A							0.		0.		0.
d Total (add lines 1b and 1c)								1,240,870.		0.	124,4	108.
2 Total number of individuals (including but r								eceived more than \$100,	000 of reportable			
compensation from the organization						,		•				7
											Yes	No
3 Did the organization list any <b>former</b> officer	director, trusto	ee. k	ev e	mpl	ove	e. or	hia	hest compensated empl	ovee on	1		
line 1a? If "Yes," complete Schedule J for s	*	,	,	•	,	,	•		•		3	Х
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150	•							•	•		4 X	
											4 23	
· .	•				,			· ·			_	х
rendered to the organization? If "Yes," con Section B. Independent Contractors	iplete Schedule	e J to	or su	ich p	oers	on .					5	1 22
·									100.000 (			
1 Complete this table for your five highest co	=	-							· · · · · · · · · · · · · · · · · · ·	ensat	ion from	
the organization. Report compensation for	the calendar ye	ear e	ndir	ig wi	ith c	or wi	thin T		ear.			
(A)								(B)		_	(C)	
Name and business	address							Description of s			ompensati	on
CHAVERS CONSULTING, LLC			_				- 1	ADVOCACY CON	SULTANT			
531 CHARLIE BROWN LN, SAF	RASOTA,	FL	3	42.	<u>33</u>			SERVICES			113,7	<u> 50.</u>
							一					
2 Total number of independent contractors (i	ncluding but n	ot lin	nited	l to t	thos	e lis	ted	above) who received mo	ore than			

Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					iunction revenue	business revenue	sections 512 - 514
SΩ	1 2	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b					
ي ق		Fundraising events 1c					
fts, r A		Related organizations 1d					
ig ig		Government grants (contributions)					
Sin		All other contributions, gifts, grants, and					
uti je r		similar amounts not included above	75,000.				
Ģ.		Noncash contributions included in lines 1a-1f	737000				
ou				75,000.			
OB		Total. Add lines 1a-1f	Business Code	75,000.			
_	•	MEMBERSHIP DUES		5,096,764.	5 096 764		
ice		REGISTRATION	900099	840,614.	840,614.		
er ue		SPONSORSHIPS	900099	693,075.	693,075.		
n S	•	FEES	900099	523,878.	523,878.		
gra Re	(	FEED	300033	323,070.	343,070.		
Program Service Revenue		All ables are great and a second					
-		All other program service revenue		7,154,331.			
$\rightarrow$		Total. Add lines 2a-2f		7,134,331.			
	3	Investment income (including dividends, interes		83,679.			83,679.
		other similar amounts)		03,019.			03,079.
	4	Income from investment of tax-exempt bond pr	roceeds	115,233.			115,233.
	5	Royalties(i) Real	/ii\ Daraanal	115,233.			115,233.
			(ii) Personal				
		Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)	(") OH				
	7 8	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
	ŀ	Less: cost or other basis					
une		and sales expenses <b>7b</b>					
ther Revenue		Gain or (loss) <b>7c</b>					
~		Net gain or (loss)					
Ę.	8 8	Gross income from fundraising events (not					
Ö		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 188a					
		Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See					
		Part IV, line 199a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns	70 002				
		and allowances10a					
		Less: cost of goods sold10b	0.	E0 000	E0 000		
$\rightarrow$	(	Net income or (loss) from sales of inventory		78,983.	78,983.		
<u>s</u>		ADMEDITATIO	Business Code	200 016		200 016	
eon Ie	11 a	ADVERTISING	541800	389,816.		389,816.	
Miscellaneous Revenue	ı	JOB BOARD POSTINGS	541800	10,418.		10,418.	
3eV	(		00000	100 000			100 000
Mis	(	All other revenue	900099	129,092.			129,092.
	•	Total. Add lines 11a-11d		529,326.	7 022 244	400 004	200 004
	12	Total revenue. See instructions		8,036,552.	/,⊿33,314.	400,234.	<b>3</b> ⊿8,004.

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### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) Do not include amounts reported on lines 6b. Program service expenses Total expenses Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....... Benefits paid to or for members ..... Compensation of current officers, directors, 649,276. trustees, and key employees ..... Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)  $2,018,\overline{575}$ Other salaries and wages 7 Pension plan accruals and contributions (include 84,695. section 401(k) and 403(b) employer contributions) 187,091. Other employee benefits 9 165,225. 10 Payroll taxes Fees for services (nonemployees): Management 50,891. Legal 33,490. Accounting 75,922. Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, 536,760. column (A), amount, list line 11g expenses on Sch O.) 225,290. Advertising and promotion 12 454,675. Office expenses 13 735,522. Information technology 14 Royalties 15 314,595. 16 Occupancy 429,510. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 1,912,604. Conferences, conventions, and meetings 19 20 Payments to affiliates \_\_\_\_\_ 21 272,347. 22 Depreciation, depletion, and amortization 55,449. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 20,718. DUES AND SUBSCRIPTIONS BAD DEBT EXPENSE 5,915. С d All other expenses 8,228,550. Total functional expenses. Add lines 1 through 24e 25 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)

Form 990 (2023)
Part X | Balance Sheet

Part	t X	Balance Sheet					
		Check if Schedule O contains a response or note to	any l	ine in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1,701,357.	1	719,859
	2	Savings and temporary cash investments			0.	2	4,938
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net			331,698.	4	232,809
	5	Loans and other receivables from any current or for					
		trustee, key employee, creator or founder, substanti					
		controlled entity or family member of any of these p		5			
	6	Loans and other receivables from other disqualified	perso	ons (as defined			
		under section 4958(f)(1)), and persons described in	on 4958(c)(3)(B)		6		
2	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
<b>ĕ</b>	9	B			279,843.	9	348,863
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D 10	0a	2,130,103.			
	b	Less: accumulated depreciation1	Ob	1,834,353.	473,001.		295,750
	11	Investments - publicly traded securities			2,864,147.	11	3,299,010
	12	Investments - other securities. See Part IV, line 11			0.	12	30,461
	13	Investments - program-related. See Part IV, line 11		60,852.	13	0	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			983,650.	15	859,969
	16	Total assets. Add lines 1 through 15 (must equal lin			6,694,548.	16	5,791,659
	17	Accounts payable and accrued expenses	1	960,836.	17	384,973	
	18	Grants payable		18			
	19	Deferred revenue			2,412,861.	19	2,303,755
	20	Tax-exempt bond liabilities			445 555	20	440.045
	21	Escrow or custodial account liability. Complete Part			117,757.	21	113,315
es	22	Loans and other payables to any current or former of					
Liabilities		trustee, key employee, creator or founder, substanti					
ia p		controlled entity or family member of any of these p		·····		22	
	23	Secured mortgages and notes payable to unrelated		·		23	
	24	Unsecured notes and loans payable to unrelated thi	-			24	
	25	Other liabilities (including federal income tax, payab		l			
		parties, and other liabilities not included on lines 17	-24). (	Complete Part X	1 155 540		000 227
		of Schedule D		1	1,155,549.		808,337
+	26	Total liabilities. Add lines 17 through 25			4,647,003.	26	3,610,380
ς l		Organizations that follow FASB ASC 958, check I	nere	X			
၁၉		and complete lines 27, 28, 32, and 33.			2 047 545		2 101 270
<u>a</u>	27	Net assets without donor restrictions			2,047,545.	27	2,181,279
Ä	28	Net assets with donor restrictions				28	
בַ		Organizations that do not follow FASB ASC 958,	chec	k here			
7		and complete lines 29 through 33.					
ts (	29	Capital stock or trust principal, or current funds				29	
SSE	30	Paid-in or capital surplus, or land, building, or equip				30	
ا ب	31	Retained earnings, endowment, accumulated incom			2,047,545.	31	2 101 270
	32	Total net assets or fund balances				32	2,181,279
	33	Total liabilities and net assets/fund balances			6,694,548.	33	5,791,659 Form <b>990</b> (202

Form **990** (2023)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,	03	5,5	<u>52.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,	228	3,5	50.
3	Revenue less expenses. Subtract line 2 from line 1	3	-	-19:	1,9	98.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,	04'	7,5	45.
5	Net unrealized gains (losses) on investments	5		38	5,5	84.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8		-60	0,8	52.
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	2,	18:	1,2	79.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		Γ			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required			Ì		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3h		

332012 12-21-23

## Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

84-1521488

Name of the organization Employer identification number

FINANCIAL PLANNING ASSOCIATION

Organization type (check one): Filers of: Section: X 501(c)( 6 ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization Employer identification number

# FINANCIAL PLANNING ASSOCIATION

84-1521488

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Trainic, dada 600, drid Eir 1 1	\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

# FINANCIAL PLANNING ASSOCIATION

84-1521488

Part II	Noncash Property (see instructions). Use duplicate copies of Part I	I if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
323453 12-26	22	· · · · · · · · · · · · · · · · · · ·	Schedule B (Form 990) (2023)

Page 4

Schedule B (Form 990) (2023) Name of organization **Employer identification number** 84-1521488 FINANCIAL PLANNING ASSOCIATION Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift

323454 12-26-23

Schedule B (Form 990) (2023)

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

### SCHEDULE C (Form 990)

# Political Campaign and Lobbying Activities

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

2023

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service 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.

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

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

Name of organ	ization	ions. Complete Fait III.		1	Employer identification number
rtaine or organ		AL PLANNING ASSO	СТАПТОМ	'	84-1521488
Part I-A	Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527	organization.
<ul><li>1 Provide a</li><li>2 Political c</li></ul>	description of the organiz ampaign activity expendit	ation's direct and indirect polition	cal campaign activities in	n Part IV.	. \$
Part I-B	Complete if the org	anization is exempt und	ler section 501(c)(	3).	
1 Enter the	amount of any excise tax	incurred by the organization und	der section 4955		\$
2 Enter the	amount of any excise tax	incurred by organization manag	ers under section 4955		\$
		n 4955 tax, did it file Form 4720			
4a Was a cor	rection made?				Yes No
b If "Yes," c	lescribe in Part IV.				
		anization is exempt und			
		by the filing organization for se			\$
		ization's funds contributed to of	•		
					. \$
	·	. Add lines 1 and 2. Enter here a	•		•
		4400 DOL 6 H : 0			
		1120-POL for this year?			
		nployer identification number (E ion listed, enter the amount pai		~	
	•	omptly and directly delivered to	0 0		· ·
	•	additional space is needed, prov			oanaro oog. ogarou rama or a
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fr filing organization funds. If none, enter	's contributions received and

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

Schedule C (Form 990) 2023

			PLANNING ASS			.521466 Page 2
Part II-A	Complete if the orga section 501(h)).	inization is exe	mpt under section	1 50 1 (c)(3) and file	a Form 5768 (ele	ection under
A Check	if the filing organizati	on belongs to an af	filiated group (and list ir	Part IV each affiliated	group member's nam	e, address, EIN,
	expenses, and share	of excess lobbying	expenditures).			
<b>B</b> Check	if the filing organizati	on checked box A a	and "limited control" pro	visions apply.		
		s on Lobbying Expe tures" means amo	enditures unts paid or incurred.]		<b>(a)</b> Filing organization's totals	(b) Affiliated group totals
1a Total lo	obbying expenditures to influen	ence public opinion	(grassroots lobbying)			
<b>b</b> Total lo	obbying expenditures to influen	ence a legislative bo	dy (direct lobbying)			
c Total lo	obbying expenditures (add lin	es 1a and 1b)				
<b>d</b> Other	exempt purpose expenditures	s				
e Total e	xempt purpose expenditures	(add lines 1c and 1	d)			
<b>f</b> Lobbyi	ing nontaxable amount. Enter	the amount from th	e following table in bot	h columns.		
If the a	mount on line 1e, column (a) or	(b) is: The lo	bbying nontaxable am	ount is:		
not ove	er \$500,000,		f the amount on line 1e.			
over \$5	500,000 but not over \$1,000,0	000, \$100,0	000 plus 15% of the exc	ess over \$500,000.		
over \$	1,000,000 but not over \$1,50	0,000, \$175,0	000 plus 10% of the exc	ess over \$1,000,000.		
over \$	1,500,000 but not over \$17,0	00,000, \$225,0	000 plus 5% of the exce	ss over \$1,500,000.		
over \$	17,000,000,	\$1,000	),000.			
g Grassr	oots nontaxable amount (ente	er 25% of line 1f)				
h Subtra	ct line 1g from line 1a. If zero	or less, enter -0-				
	ct line 1f from line 1c. If zero			[		
j If there	e is an amount other than zero			•		•
	ng section 4911 tax for this y	•				Yes No
•	<u> </u>		eraging Period Under			
	(Some organizations that		501(h) election do not rate instructions for li	•	f the five columns b	elow.
		Lobbying Expe	enditures During 4-Yea	ar Averaging Period		1
(or fisc	Calendar year cal year beginning in)	(a) 2020	<b>(b)</b> 2021	<b>(c)</b> 2022	(d) 2023	(e) Total
	ing nontaxable amount					
,	ing ceiling amount of line 2a, column(e))					
<b>c</b> Total lo	obbying expenditures					
<b>d</b> Grassr	oots nontaxable amount					
e Grassr	oots ceiling amount					
(150%	of line 2d, column (e))					
<b>f</b> Grassr	oots lobbying expenditures					

Schedule C (Form 990) 2023

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

1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities in line 1 cause the organization to not be described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 tax, idia it file Form 4720 for this year?  1 Were substantially all (90% or more) dues received nondeductible by members? 1 Were substantially all (90% or more) dues received nondeductible by members? 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 4 Dues, assessments and similar amounts from members 2 Section 182(e) enceleductible lobbying and political expenditures (do not include amounts of political expense or which the section \$27(f) tax was paid).  2 Section 182(e) enceleductible lobbying and political expenditures (do not include amounts of political expense or which the section \$27(f) tax was paid).  2 Dues, assessments and similar amounts from members 4 Total Receives and the amount on line 2c exceeds the amount on line 3, what portion of the	or ea	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(1	b)
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?  b If "Yes," enter the amount of any tax incurred under section 4912  c If "Yes," enter the amount of any tax incurred under section 4912  c If "Yes," enter the amount of any tax incurred under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Yes No  1 Were substantially all (90% or more) dues received nondeductible by members?  2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  2 Did the organization and the only in-house lobbying and political exampain activity expenditures from the prior year?  1 Dues, assessments and similar amounts from members  2 Section 162(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid).  a Current year  2 Dues, assessments and similar amounts from members  1 \$5,096,764  2a 75,922  2b C 75,922  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  3 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 carry over the reasonab	of the	lobbying activity.	Yes	No	Amo	ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?  b If "Yes," enter the amount of any tax incurred under section 4912  c If "Yes," enter the amount of any tax incurred under section 4912  c If "Yes," enter the amount of any tax incurred under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Yes No  1 Were substantially all (90% or more) dues received nondeductible by members?  2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  2 Did the organization and the only in-house lobbying and political exampain activity expenditures from the prior year?  1 Dues, assessments and similar amounts from members  2 Section 162(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid).  a Current year  2 Dues, assessments and similar amounts from members  1 \$5,096,764  2a 75,922  2b C 75,922  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  3 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 carry over the reasonab	1	During the year, did the filing organization attempt to influence foreign, national, state, or				
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred by organization managers under section 4912 c if "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filing organization incurred a section 4912 tax, did if file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 X Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6), and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year b Carryover from last year c Total 2b Carryover from last year 5 Total 2c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible sec						
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 tax, did if file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Vere substantially all (90% or more) dues received nondeductible by members? 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only inhouse lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  1 Dues, assessments and similar amounts from members 2 Section 150(e) (and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."  1 Dues, assessments and similar amounts from members 2 2 3 Catton 150(e) ondeductible lobbying and political expenditures (do not include amounts of political expenditures (and the amount on line 2 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 expendi						
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 tax, did if file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Vere substantially all (90% or more) dues received nondeductible by members? 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only inhouse lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  1 Dues, assessments and similar amounts from members 2 Section 150(e) (and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."  1 Dues, assessments and similar amounts from members 2 2 3 Catton 150(e) ondeductible lobbying and political expenditures (do not include amounts of political expenditures (and the amount on line 2 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 expendi	а	Volunteers?				
d Mailings to members, legislators, or the public?  Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?  b if "Yes," enter the amount of any tax incurred under section 4912  d if the filling organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  2 Did the organization agree to carry over lobbving and political campaign activity expenditures from the prior year?  3 X  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."  1 Dues, assessments and similar amounts from members  1 5,096,764  2 2 75,922  b Carryover from last year  c Total  2 2 75,922  b Carryover from last year  c Total  3 Aggregate amount reported in section 603(e)(1)(A) notices of nondeductible section 162(e) dues  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures heaven of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures heaven of the excess does th						
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Part IV Supplemental Information	2 3 Part 1 2 a b c 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year? n 501(c)(5 'No" OR (	2 3 3 5), or se (b) Parri 1 22 22 22 3	5,096	X X 3, is 5, 764
	2 3 Part 1 2 a b c 3 4	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political campaign activity expenditures from the till-Both	e prior year? n 501(c)(5 'No" OR (	2 3 3 5), or se (b) Pari	5,096	X X 3, is 5,764 5,922
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	1 2 a b c 3 4	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions	e prior year? n 501(c)(5 'No" OR (	2 3 3 5), or se (b) Pari	5,096	X X 3, is 5,764 5,922
	1 2 a b c 3 4	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions	e prior year? n 501(c)(5 'No" OR (	2 3 3 5), or se (b) Pari	5,096	X X 3, is 5,764 5,922
	Part  1 2 a b c 3 4  5 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyper expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  IV Supplemental Information	e prior year? n 501(c)(5 'No" OR (	22 (b) Pari	5,096	X X 3, is 5,764 5,922
	Part  1 2 a b c 3 4  5 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  til V Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year? n 501(c)(5 'No" OR (	22 (b) Pari	5,096	X X 3, is 5,764 5,922
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	Part  1 2 a b c 3 4  5 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  til V Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year? n 501(c)(5 'No" OR (	22 (b) Pari	5,096	X X 3, is 5,764 5,922
	Part  1 2 a b c 3 4  5 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  til V Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year? n 501(c)(5 'No" OR (	22 (b) Pari	5,096	X X 3, is 5,764 5,922
	Part  1 2 a b c 3 4  5 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  til V Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year? n 501(c)(5 'No" OR (	22 (b) Pari	5,096	X X 3, is 5,764 5,922
	Part  1 2 a b c 3 4  5 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  til V Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year? n 501(c)(5 'No" OR (	22 (b) Pari	5,096	X X 3, is 5,764 5,922
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### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

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

Attach to Form 990.

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

2023
Open to Public Inspection

Name of the organization

FINANCIAL PLANNING ASSOCIATION

Employer identification number 84-1521488

Schedule D (Form 990) 2023

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin.		Siı	nilar Funds o	r Ac	cour	nts. Complete if the
	Giganization anomorou Teo Giri enii eee, i arriv, iir	(a) Donor advi	ised	funds	(	<b>b)</b> Fun	ds and other accounts
1	Total number at end of year	. ,					
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in v		helo	l in donor advise	d fund	ls	
	are the organization's property, subject to the organization's	-					Yes No
6	Did the organization inform all grantees, donors, and donor a						
	for charitable purposes and not for the benefit of the donor or						
	impermissible private benefit?						
Par	t II Conservation Easements. Complete if the org	ganization answered "\	Yes'	on Form 990, Pa	art IV,	line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that apply	y).				
	Preservation of land for public use (for example, recreated	tion or education)		Preservation of a	a histo	rically	important land area
	Protection of natural habitat	L		Preservation of a	a certi	fied his	storic structure
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contr	ribut	ion in the form of	f a cor	nserva	
	day of the tax year.						Held at the End of the Tax Year
а	Total number of conservation easements					2a	
b	Total acreage restricted by conservation easements					2b	
С	Number of conservation easements on a certified historic stru	ucture included on line	2a			2c	
d	Number of conservation easements included on line 2c acqui						
	on a historic structure listed in the National Register					2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, o	or te	minated by the o	organi	zation	during the tax
	year						
4	Number of states where property subject to conservation eas						
5	Does the organization have a written policy regarding the per						
	violations, and enforcement of the conservation easements it						Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations,	anc	enforcing conse	rvatio	n ease	ements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and	enfo	rcing conservation	on eas	sement	ts during the year
_					4) (D) (')		
8	Does each conservation easement reported on line 2d above						□ vaa □ Na
•	and section 170(h)(4)(B)(ii)?						Yes No
9	In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footn						
	organization's accounting for conservation easements.	lote to the organization	151	nanciai statemei	ונס נוופ	ii uesc	Tibes trie
Par	t III Organizations Maintaining Collections of	Art, Historical Ti	rea	sures, or Oth	er S	imila	r Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.					
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its re	ever	ue statement an	d bala	ınce st	neet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education	on, o	or research in furt	heran	ce of p	oublic
	service, provide in Part XIII the text of the footnote to its finan	ncial statements that d	lesc	ribes these items			
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its rever	nue :	statement and ba	alance	sheet	works of
	art, historical treasures, or other similar assets held for public	exhibition, education,	, or ı	esearch in furthe	rance	of pul	olic service,
	provide the following amounts relating to these items.						
	(i) Revenue included on Form 990, Part VIII, line 1						\$
							\$
2	If the organization received or held works of art, historical trea						
	the following amounts required to be reported under FASB A						
а	Revenue included on Form 990, Part VIII, line 1						\$
b	Assets included in Form 990, Part X						\$

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

	t III Organizations Maintaining C	ollections of Ar				r Other	Simila		Contin		age Z
3	Using the organization's acquisition, accessi								COITIII	ucu)	
Ŭ	collection items (check all that apply).	on, and other record	io, oricoit	arry or the i	ollowing that	. make of	grimodire	000 01 110			
а	Public exhibition	,	<b>.</b>	oan or exc	hange progra	am					
b	Scholarly research				riango progre						
C	Preservation for future generations	`	, \								
4	Provide a description of the organization's co	ollections and explain	n how the	ov further th	ne organizatio	n's even	ant nurno	se in Part	XIII		
5	During the year, did the organization solicit of							oc iiii ait	AIII.		
3	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran										110
	reported an amount on Form 990, Pa		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	or gar ii Latioi	ranoworda		01111 000	, , , , , , , , , , , , , , , , , , , ,			
1a	Is the organization an agent, trustee, custod		diary for c	contribution	s or other as	sets not	included				
	on Form 990, Part X?								Yes	X	No
h	If "Yes," explain the arrangement in Part XIII										,
-	ii ree, explain the arrangement iiir arrytii								Amount	:	
c	Beginning balance						1c				
	Additions during the year										
	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on F							X	Yes		No
	If "Yes," explain the arrangement in Part XIII.						•		_	X	]
	t V Endowment Funds Complete if										
	Зетрия ::	(a) Current year		rior year	(c) Two year			years back	(e) Four	years	back
1a	Beginning of year balance		, ,		, ,			,	,		
b	Contributions										
c	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
٠	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr		e (line 1a	column (a	I) held as:	I.					
a	Board designated or quasi-endowment	•	%	, coluitiit (a	n noid as.						
b	Permanent endowment										
Ŭ	The percentages on lines 2a, 2b, and 2c sho	• -									
За	Are there endowment funds not in the posse	•	ation that	are held ar	nd administer	ed for th	<b>e</b>				
ou	organization by:	obion of the organiza	ation that	are riola ai	ia darriiriiotor	CG 101 ti1	•		Γ	Yes	No
	m								3a(i)		
	for								3a(ii)		
h	If "Yes" on line 3a(ii), are the related organization								3b		
4	Describe in Part XIII the intended uses of the	-							0.0		
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answere	d "Yes" on Form 990	0, Part IV,	line 11a. S	ee Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) A	ccumulate	ed	(d) Book	value	<del></del>
	2000p.i.o or proporty	basis (investi			(other)	٠,	oreciation		, 2, 2001		-
1a	Land										
	Buildings										
	Leasehold improvements			5	9,083.		40,5	43.	18	3,54	10.
	Equipment				8,536.		391,5			5,96	
	Other				2,484.		102,2			),24	

Schedule D (Form 990) 2023

295,750.

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

Schedule D (Form 990) 2023 FINANCIAL P.	LANNING ASSOC.	IATION 84-1521488 Page
Part VII Investments - Other Securities		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
1) Financial derivatives		
2) Closely held equity interests		
3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(a) Mothod of valuation: Cost or and of year market value

(a) Description of investment	(b) Dook value	(c) Wethod of Valuation. Cost of the of year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		
Part IX Other Assets		

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

(a) Description	(b) Book value
(1) INTERCOMPANY RECEIVABLES	122,273.
(2) FINANCE LEASE RIGHT-OF-USE ASSETS	4,411.
(3) OPERATING LEASE RIGHT-OF-USE ASSETS	707,341.
(4) SECURITY DEPOSITS	25,944.
(5)	
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	859,969.
	859,969

### | Part X | Other Liabilities

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	FINANCE LEASE LIABILITIES	4,480.
(3)	OPERATING LEASE LIABILITIES	803,857.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, line 25, col. (B))	808,337.

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

Schedule D (Form 990) 2023

	t XI	Reconciliation of Revenue per Audited Financial Sta		-	
		Complete if the organization answered "Yes" on Form 990, Part IV, I	ine 12a.		
1	Total re	evenue, gains, and other support per audited financial statements		1	
2	Amoun	nts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net uni	realized gains (losses) on investments	2a		
b	Donate	ed services and use of facilities	2b		
С	Recove	eries of prior year grants	2c		
d		Describe in Part XIII.)			
е		es 2a through 2d		2e	
3	Subtra	ct line <b>2e</b> from line <b>1</b>		3	
4		nts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investn	nent expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (	Describe in Part XIII.)	4b		
С	Add lin	es <b>4a</b> and <b>4b</b>		4c	
5	Total re	evenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	2.)	5	
Pa		Reconciliation of Expenses per Audited Financial St	•	ses per Return	
		Complete if the organization answered "Yes" on Form 990, Part IV, I			
1	Total e	xpenses and losses per audited financial statements		1	
2		its included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donate	ed services and use of facilities	2a		
b	Prior ye	ear adjustments	2b		
С	Other le	osses	2c		
d	,	Describe in Part XIII.)			
е		es 2a through 2d			
3		ct line <b>2e</b> from line <b>1</b>		3	
4		nts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а		nent expenses not included on Form 990, Part VIII, line 7b			
b		Describe in Part XIII.)	4b		
С	Add lin	es <b>4a</b> and <b>4b</b>		4c	
5 <b>D</b> a	Total e	xpenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			
Pa	rt XIII	Supplemental Information	18.)	5	
<b>Pa</b> l Prov	rt XIII ide the d	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	18.) 4; Part IV, lines 1b and 2b; P	5	KI,
<b>Pa</b> l Prov	rt XIII ide the d	Supplemental Information	18.) 4; Part IV, lines 1b and 2b; P	5	<b>ΚΙ</b> ,
<b>Pa</b> l Prov	rt XIII ide the d	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	18.) 4; Part IV, lines 1b and 2b; P	5	<b>Κ</b> Ι,
<b>Pa</b> l Prov lines	rt XIII ide the d 2d and	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	18.) 4; Part IV, lines 1b and 2b; P	5	KI,
<b>Pa</b> l Prov lines	rt XIII ide the d 2d and	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	18.) 4; Part IV, lines 1b and 2b; P	5	KI,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	KI,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	KI,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ΚΙ,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ΚΙ,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ΚΙ,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ΚΙ,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ΚΙ,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ΚΙ,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ΚΙ,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ζί,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ζί,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ζί,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ΚΙ,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ΚΙ,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ζί,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ζί,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ΚΙ,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ΚΙ,
Par Prov lines PAI	rt XIII	Supplemental Information descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 7, LINE 2B:	4; Part IV, lines 1b and 2b; Pany additional information.	art V, line 4; Part X, line 2; Part >	ΚΙ,

Schedule D (Form 990) 2023

### SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2023

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

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

Employer identification number 84-1521488

### FINANCIAL PLANNING ASSOCIATION

Pa	ITLI	Questions Regarding Compensation			
		_		Yes	No
<b>1</b> a	Check	the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII	I, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	Fi	irst-class or charter travel Housing allowance or residence for personal use			
	Tr	ravel for companions Payments for business use of personal residence			
	Ta	ax indemnification and gross-up payments Health or social club dues or initiation fees			
	Di	iscretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any o	of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbu	rsement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the	e organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustee	es, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate	e which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/E	xecutive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establis	sh compensation of the CEO/Executive Director, but explain in Part III.			
	X C	ompensation committee X Written employment contract			
		dependent compensation consultant  X Compensation survey or study			
	☐ Fo	orm 990 of other organizations  X Approval by the board or compensation committee			
4	During	the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organiz	zation or a related organization:			
а	Receive	e a severance payment or change-of-control payment?	4a		X
b	Particip	pate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Particip	pate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes'	" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only se	ection 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For per	rsons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	conting	gent on the revenues of:			
			5a		<del></del>
b		•	5b		
		" on line 5a or 5b, describe in Part III.			
6	For per	rsons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	_	gent on the net earnings of:			
а	The org	ganization?	6a		<del></del>
b	Any rel	lated organization?	6b		
		" on line 6a or 6b, describe in Part III.			
7		rsons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
		scribed on lines 5 and 6? If "Yes," describe in Part III	7		<del></del>
8	Were a	any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
		contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9		on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regula	ations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2023

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

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

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

(A) Name and Title		<b>(B)</b> Breakdown of W	V-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) PATRICK D MAHONEY	(i)	406,534.	0.	0.	11,978.	15,568.	434,080.	0.
CEO & SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SANDRA GARCIA	(i)	189,917.	1,000.	0.	11,926.	12,535.	215,378.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) BEN LEWIS	(i)	180,911.	1,500.	0.	5,462.	260.	188,133.	0.
CCO	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JORGE VALDIVIA	(i)	143,638.	1,000.	0.	5,299.	18,227.	168,164.	0.
SENIOR MANAGER, TECHNOLOGY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)						<u> </u>	

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

### **SCHEDULE 0** (Form 990)

Department of the Treasury

Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

FINANCIAL PLANNING ASSOCIATION

**Employer identification number** 84-1521488

SECTION A, LINE 1A: FORM 990, PART VI,

THE EXECUTIVE COMMITTEE IS COMPOSED OF THE PAST PRESIDENT, THE PRESIDENT ELECT, AND THE CEO. THE CEO SHALL BE AN EX OFFICIO, NON-VOTING MEMBER OF THE EXECUTIVE COMMITTEE. THE COMMITTEE HAS THE AUTHORITY TO ACT UPON ISSUES IN BETWEEN BOARD MEETINGS AS WELL AS ISSUES SPECIFICALLY DELEGATED TO THE EXECUTIVE COMMITTEE BY THE BOARD

SECTION A, LINE 6: FORM 990, PART VI,

THE ORGANIZATION HAS TWO CLASSES OF MEMBERS: INDIVIDUAL MEMBERS AND INSTITUTIONAL MEMBERS. INDIVIDUAL MEMBERS: ANY INDIVIDUAL DEMONSTRATING A PROFESSIONAL INTEREST IN FINANCIAL PLANNING AND WILLING TO ABIDE BY THE BYLAWS IS ELIGIBLE FOR MEMBERSHIP IN THE ASSOCIATION. MEMBERS SHALL BE ENTITLED TO SPECIAL RIGHTS, PRIVILEGES, AND BENEFITS AS DETERMINED BY THE BOARD OF DIRECTORS OR ITS DESIGNEE. MEMBER OF FPA INCLUDE FINANCIAL STUDENTS, ACADEMICIANS, SUPPORT STAFF, PLANNING PRACTITIONERS, RETIRED PRACTITIONERS, AND OTHER ALLIED PROFESSIONALS WHO SUPPORT THE PROFESSION. INSTITUTIONAL MEMBERS: ANY INSTITUTION WITH AN INTEREST IN FINANCIAL PLANNING AND WHICH IS WILLING TO ABIDE BY THE BYLAWS FOR MEMBERSHIP IN THE ASSOCIATION.

FORM 990, PART VI, SECTION A, LINE 7B:

PLANS OF MERGER, CONSOLIDATION, OR DISSOLUTION WHICH ARE VOTED ON AND ADOPTED BY THE BOARD OF DIRECTORS SHALL REQUIRE RATIFICATION THROUGH AN AFFIRMATIVE VOTE OF AT LEAST A MAJORITY OF THE INDIVIDUAL MEMBERS OF THE FPA VOTING MEMBERSHIP.

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

Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2** 

Name of the organization FINANCIAL PLANNING ASSOCIATION Employer identification number 84-1521488

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PREPARED BY AN INDEPENDENT CPA FIRM AND REVIEWED IN DETAIL

BY THE CFO AND THE ACCOUNTING MANAGER. IT IS THEN SHARED WITH THE BOARD FOR

THEIR REVIEW PRIOR TO BEING FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

ON AN ANNUAL BASIS, THE DIRECTORS AND OFFICERS OF THE ORGANIZATION ARE
REQUIRED TO DISCLOSE ANY CONFLICTS OF INTEREST (ACTUAL, APPARENT, OR
POTENTIAL) AND AGREE TO COMPLY WITH THE ORGANIZATION'S CONFLICT OF INTEREST
POLICY. UPON DISCLOSURE OF A POTENTIAL CONFLICT OF INTEREST AND ALL
MATERIAL FACTS TO THE INDEPENDENT MEMBERS OF THE BOARD, AND AFTER ANY
DISCUSSION WITH THE INTERESTED PERSONS, THE INDEPENDENT BOARD MEMBERS SHALL
DISCUSS AND DECIDE IF A CONFLICT OF INTEREST EXISTS. AFTER EXERCISING DUE
DILIGENCE, THE INDEPENDENT BOARD MEMBERS SHALL DETERMINE WHETHER OR NOT A
CONFLICT OF INTEREST IS PRESENT. AS PART OF THAT DETERMINATION, THE
INDEPENDENT BOARD MEMBERS WILL DECIDE WHETHER THE TRANSACTION OR
ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR THE ORGANIZATION'S
BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE TO THE ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 15:

CEO COMPENSATION IS DETERMINED THROUGH VARIOUS SALARY SURVEYS AND OTHER

THIRD-PARTY NON-PROFIT COMPENSATION RESOURCES AND GUIDELINES. THE

COMPENSATION PACKAGE IS REVIEWED ANNUALLY BY THE CEO COMPENSATION

COMMITTEE, COMPRISED OF INDEPENDENT VOTING MEMBERS OF THE BOARD OF

DIRECTORS. THE APPROVAL PROCESS IS DOCUMENTED BY THE EXECUTIVE COMMITTEE.

THE COMPENSATION FOR THE CFO IS APPROVED BY THE CEO. COMPARABILITY DATA IS USED, AND THE PROCESS IS DOCUMENTED IN THE HR FILE.

Schedule O (Form 990) 2023	Page 2
Name of the organization FINANCIAL PLANNING ASSOCIATION	Employer identification number 84-1521488
FORM 990, PART VI, SECTION C, LINE 19:	
THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND	FINANCIAL
STATEMENTS ARE ALL AVAILABLE UPON REQUEST. THE GOVERNING D	OCUMENTS ARE ALSO
AVAILABLE ON THE ORGANIZATION'S WEBSITE.	

### **SCHEDULE R** (Form 990)

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

FINANCIAL PLAI	NNING ASSOCIATION					84-15214	88	
Part I Identification of Disregarded Entities. Complete	ete if the organization answered "	Yes" on Form 990, Part IV, line 33	3.					
(a)	(b)	(c)	(d)	(e)			(f)	
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state o	or Total inco	me End-of-yea	r assets	Direct o	ontrolling	9
of disregarded entity		foreign country)				entity		
	_							
	$\dashv$							
	-							
	-							
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	tion answered "Yes" on Form 990	), Part IV, line 34,	because it had one	or more	related tax-exer	mpt	
	(b)	(c)	(d)	(e)		(f)	(9	<b>g)</b> 512(b)(13)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Dire	ct controlling		512(b)(13) rolled
of related organization		foreign country)	section	, ,		entity		tity?
				501(c)(3))			Yes	No
NATIONAL FINANCIAL PLANNING SUPPORT CENTER -					THE FI	NANCIAL		
74-2341001, 1290 BROADWAY, STE 1625, DENVER,	COORDINATE PRO BONO				PLANNI	NG		
CO 80203	FINANCIAL PLANNING	COLORADO	501(C)(3)	LINE 7	ASSOCI	ATION	Х	

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

Schedule R (Form 990) 2023

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	domicile		rolling Predominant income	Legal domicible claster entity   Predominant income   Share of total   Share of   Disproportionate   Companies   C	Share of total income	Disproportionate	Code V-UBI amount in box	General managir	Percentage ownership	
o, rolatoù organization		(state or foreign	5	(related, unrelated, excluded from tax under sections 512-514)		assets	alloca	itions?	20 of Schedule	partner	1
		country)		sections 512-514)			Yes	No	amount in box 20 of Schedule K-1 (Form 1065)	Yes N	
							<u> </u>				

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

(a)  Name, address, and EIN  of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion (b)(13) rolled tity?
FINANCIAL SERVICES INFORMATION COMPANY - 58-1675458, 1290 BROADWAY, STE 1625, DENVER, CO 80203	PUBLICATION		THE FINANCIAL PLANNING ASSOCIATION	C CORP	491,334.	8,076.	100%		
					,				

Schedule R (Form 990) 2023

Page 3

Yes No

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

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

b	Gift, grant, or capital contribution to related organization(s)				1b		X	
С	c Gift, grant, or capital contribution from related organization(s)							
d	d Loans or loan guarantees to or for related organization(s)							
e Loans or loan guarantees by related organization(s)								
f	Dividends from related organization(s)				1f		X	
g	Sale of assets to related organization(s)				<b>1</b> g		X	
h	Purchase of assets from related organization(s)				1h		X	
i	Exchange of assets with related organization(s)				1i		X	
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X	
	Lease of facilities, equipment, or other assets from related organization(s)				1k		X	
- 1	Performance of services or membership or fundraising solicitations for related organ	nization(s)			11		X	
	Performance of services or membership or fundraising solicitations by related organ						X	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	on(s)			1n	X		
0	Sharing of paid employees with related organization(s)				10	X		
р	Reimbursement paid to related organization(s) for expenses				<b>1</b> p		X	
q	Reimbursement paid by related organization(s) for expenses				1q		X	
r	Other transfer of cash or property to related organization(s)				1r		X	
s	Other transfer of cash or property from related organization(s)				1s		X	
2	If the answer to any of the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instruction of the above is "Yes," in the above is	ho must complete th	is line, including covered relat	ionships and transaction thresholds.				
	<b>(a)</b> Name of related organization	(b)	(c)	(d)				
	Name of related organization	Transaction	Amount involved	Method of determining amount in	ivolved			
		type (a-s)						
(1)								
(2)								
(3)								
(4)								
(5)								
<b>'</b> 0'								
(6)				2	D /=	000	.0000	
33216	3 09-28-23	33		Schedule	; K (Fori	n 990)	2023	
		J J						

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.?  Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner?  Yes No	(k) r Percentage ownership
	-									

### UNRELATED BUSINESS INCOME

## **CARRYOVER DATA TO 2024**

Name FINANCIAL PLANNING ASSOCIATION	Employer Identification Number 84-1521488								
Based on the information provided with this return, the following are possible carryover amounts to next year.									
FEDERAL POST-2017 NET OPERATING LOSS - JOB BOARD POST	INGS 1,128,153.								
FEDERAL POST-2017 NET OPERATING LOSS - ADVERTISING	1,655,790.								
FEDERAL PRE-2018 NET OPERATING LOSS	3,585,107.								
	· · · · · · · · · · · · · · · · · · ·								

Form	990-T	E	Exempt Organization Business In			n	OMB No. 1545-0047
			(and proxy tax under section 6	6033(e))			0000
		For ca	lendar year 2023 or other tax year beginning , a	and ending			2023
	ent of the Treasury Revenue Service		Go to www.irs.gov/Form990T for instructions and t Do not enter SSN numbers on this form as it may be made public if			-	Open to Public Inspection for 501(c)(3) Organizations Only
Α	Check box if address changed.		Name of organization ( Check box if name changed and see i	nstruction	s.)	<b>D</b> Emp	ployer identification number
<b>B</b> Exe	mpt under section	Print	FINANCIAL PLANNING ASSOCIATION	Г		8	4-1521488
	501( <b>c</b> )( <b>6</b> )	or	Number, street, and room or suite no. If a P.O. box, see instructions			<b>E</b> Gro	up exemption number e instructions)
	408(e) 220(e)	Туре	1290 BROADWAY, 1625			(500	e instructions)
	408A 530(a) 529(a) 529A		City or town, state or province, country, and ZIP or foreign postal c DENVER, CO 80203	ode		F	Check box if
	( )	СВо	ok value of all assets at end of year	5,79	1,659.	Ţ <u> </u>	an amended return.
G Ch	neck organization		X 501(c) corporation 501(c) trust 401(a) tru		Other trust	State	college/university
	J	,,	6417(d)(1)(A) Applicable entity		_		
H C	neck if filing only to	o claim	Credit from Form 8941 Refund shown on Fo	rm 2439	Elective payme	ent amo	unt from Form 3800
I Ch	neck if a 501(c)(3)	organiz	ation filing a consolidated return with a 501(c)(2) titleholding	corporati	on		
<b>J</b> Er	nter the number of	attach	ed Schedules A (Form 990-T)				2
K Du	uring the tax year,	was th	e corporation a subsidiary in an affiliated group or a parent-su	ubsidiary	controlled group?		Yes X No
If	"Yes," enter the na	ame an	d identifying number of the parent corporation				
	ne books are in car			Tel	ephone number :	303-	759-4900
Part	t I   Total Unr	elate	d Business Taxable Income				
1	Total of unrelated	d busin	ess taxable income computed from all unrelated trades or bu	sinesses	(see instructions)	1	148,284.
2	Reserved					2	
3	Add lines 1 and 2	2				3	148,284.
4			(see instructions for limitation rules)			4	0.
5			s taxable income before net operating losses. Subtract line 4			5	148,284.
6			ting loss. See instructions			6	148,284.
7	Total of unrelated	d busin	ess taxable income before specific deduction and section 19	9A deduc	ction.		
	Subtract line 6 fro					7	1 222
8			erally \$1,000, but see instructions for exceptions)			8	1,000.
9			eduction. See instructions			9	
10	Total deductions	s. Add	lines 8 and 9			10	1,000.
11			table income. Subtract line 10 from line 7. If line 10 is greate	r than lin	e 7, enter zero	11	0.
Part							
1			as corporations. Multiply Part I, line 11 by 21% (0.21)			1	0.
2			rates. See instructions for tax computation. Income tax on the	he amour	nt on		
						2	
3	Proxy tax. See in					3	
4			instructions			4	
5	Alternative minim	ium tax				5	
6			acility income. See instructions				0
7 Part	Total. Add lines 3	3 throu	gh 6 to line 1 or 2, whichever applies			7	0.
				14-			
1a h	Other credits (see		orations attach Form 1118; trusts attach Form 1116)				
b	•		ctions) Attach Form 3800 (see instructions)			-	
4			mum tax (attach Form 8801 or 8827)			-	
d	Total credits. Ac					1e	
e 2			1a through 1d art II, line 7			2	0.
2 3a	Amount due from		1055	١٠			•
b	Amount due from		0011				
0	Amount due from						
d	Amount due from			·· 🗖			
e	Other amounts d						
f		•	lines 3a through 3e		1	3f	0.
4			nd 3f (see instructions).			J.	<u> </u>
•			x amount here			4	0.
5			lity paid from Form 965-A, Part II, column (k)			5	0.
				_		_	

Form 990-T (2023)

Part II	Tax and Payments (continued)						age Z
	Payments: Preceding year's overpayment cred	dited to the current vear	6a				
	Current year's estimated tax payments. Check	•	54		1		
	applies	,	6b				
					1		
	oreign organizations: Tax paid or withheld at				1		
	Backup withholding (see instructions)				1		
	Credit for small employer health insurance pre				1		
	Elective payment election amount from Form				1		
	Payment from Form 2439				1		
	Credit from Form 4136				1		
	Other (see instructions)				1		
	otal payments. Add lines 6a through 6j				7		
	Estimated tax penalty (see instructions). Chec				8		
	ax due. If line 7 is smaller than the total of lin	4 F 1 O			9		
	Overpayment. If line 7 is larger than the total		rnaid		10		
	Enter the amount of line 10 you want: <b>Credite</b>			Refunded	11		
Part I			tion (see instr				
1 /	At any time during the 2023 calendar year, dic			· · · · · · · · · · · · · · · · · · ·		Yes	No
	over a financial account (bank, securities, or o						110
	inCEN Form 114, Report of Foreign Bank and	, , ,	•	•			
	nere	,		,			х
	During the tax year, did the organization recei	ve a distribution from, or was it the gra	antor of, or trans	feror to, a			
	oreign trust?						Х
	f "Yes," see instructions for other forms the o						
3 [	Enter the amount of tax-exempt interest receive	red or accrued during the tax year		\$			
	Enter available pre-2018 NOL carryovers here				ryover		
5	hown on Schedule A (Form 990-T). Don't red	uce the NOL carryover shown here by	any deduction r	eported on Part	I, line 6.		
5 F	ost-2017 NOL carryovers. Enter the Business	Activity Code and available post-201	7 NOL carryove	rs. Don't reduce			
t	he amounts shown below by any NOL claime	d on any Schedule A, Part II, line 17 f	or the tax year. S	See instructions.			
	Business Activity Co	ode	Available	post-2017 NOL			
		.499	\$		28,153.		
	541	.800	\$	1,6	55,790.		
			\$				
			\$				
6 a	Reserved for future use						
Part V							
Provide a	any additional information. See instructions.						
	Under penalties of perjury, I declare that I have examined	this return, including accompanying schedules an	d statements, and to the	ne hest of my knowled	dae and helief it is tr	10	
Sign	correct, and complete. Declaration of preparer (other than				age and benef, it is at		
Here		CEO &	SECRETAI	OV	ay the IRS discuss th		vith
	Signature of officer	Date Title	SECKETAL		e preparer shown belestructions)? X Y	`	□No
		T	Data			<u> </u>	NU
	Print/Type preparer's name	Preparer's signature	Date	Check i	f PTIN		
Paid	GLENN MILLER, CPA	GLENN MILLER, CPA	10/29/24	self-employed	P00086	726	
Prepar	CI	LLP	<u> </u>	Firm's EIN	39-097		1
Use O	IIV ———————————————————————————————————	ST		FIIIII 5 EIIV	33 031	= 0 0	
		., VA 22314-2301		Phone no. (	703) 519	0-09	90
-	1.4mlo addioso ADDMANDILLA	., 22314 2301		i nono no. (		90-T	

Form **990-T** (2023)

FORM 990-T	PRE 2018 NOL SCHEDULE	STATEMENT 1
PRE-2018 NOL CARRY FORW PRE-2018 NOL DEDUCTION	ARD FROM PRIOR YEAR INCLUDED IN PART I, LINE 6	3,733,391. 148,284.
SCHEDULE A PORTION OF P	RE-2018 NOL SCHEDULE A SHARE	
1	0.	
2	0.	
TOTAL SCHEDULE A SHARE	OF PRE-2018 NOL	0.
NET OPERATING DEDUCTION		148,284.
BALANCE AFTER PRE-2018		0.
EXPIRING NET OPERATING		0.
CARRY FORWARD OF NET OP	ERATING LOSS	3,585,107.

FORM 990-T	PRE-2018	NET OPERATING	LOSS DEDUCTION	STATEMENT 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/11	135,280.	135,280.	0.	0.
12/31/12	280,263.	130,662.	149,601.	149,601.
12/31/13	40,939.	0.	40,939.	40,939.
12/31/14	161,958.	0.	161,958.	161,958.
12/31/15	1,200,586.	0.	1,200,586.	1,200,586.
12/31/16	1,218,975.	0.	1,218,975.	1,218,975.
12/31/17	961,332.	0.	961,332.	961,332.
NOL CARRYOV	ER AVAILABLE THIS Y	EAR	3,733,391.	3,733,391.

## **SCHEDULE A** (Form 990-T)

## **Unrelated Business Taxable Income** From an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

-	lame of the organization  FINANCIAL PLANNING ASSOCIATION			B Employer iden 84-1521	
<u>c</u> ւ	Unrelated business activity code (see instructions) 56149	9		<b>D</b> Sequence:	1 of 2
<u>E [</u>	Describe the unrelated trade or business JOB BOARD PO	STIN	GS		
Pa	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales				
b	Less returns and allowances c Balance	1c			
2	Cost of goods sold (Part III, line 8)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Schedule D (Form 1041 or Form				
	1120)). See instructions	4a			
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Part IV)	6			
7	Unrelated debt-financed income (Part V)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Part VI)	8			
9	Investment income of section 501(c)(7), (9), or (17)				
	organizations (Part VII)	9			
10	Exploited exempt activity income (Part VIII)	10			
11	Advertising income (Part IX)	11			
12	Other income (see instructions; attach statement) STMT 3	12	10,418.		10,418.
13	Total. Combine lines 3 through 12	13	10,418.		10,418.
Pa	<b>Deductions Not Taken Elsewhere.</b> See instruct directly connected with the unrelated business in		or limitations on ded	uctions. Deduct	ions must be
1	Compensation of officers, directors, and trustees (Part X)			1	
2	Salaries and wages			1	2
3	Repairs and maintenance			3	3
4	Bad debts			1	ļ
5				l _	5
6	Taxes and licenses			<u>6</u>	6
7	Depreciation (attach Form 4562). See instructions		7		
8	Less depreciation claimed in Part III and elsewhere on return			8	b
9	Depletion				)
10	Contributions to deferred compensation plans				0
11	Employee benefit programs				1
12	Excess exempt expenses (Part VIII)				2
13	Excess readership costs (Part IX)				3
14	Other deductions (attach statement)			_	
15	•				5 0.
16	Unrelated business income before net operating loss deduction. Se	ubtract I	ine 15 from Part I, line 13	,	
	column (C)				6 10,418.
17	Deduction for net operating loss. See instructions				
<u>18</u>	Unrelated business taxable income. Subtract line 17 from line 16	3			•
For F	aperwork Reduction Act Notice, see instructions.			Sche	edule A (Form 990-T) 2023

LHA 323741 01-19-24

n		
rac	ıe.	- 2

	ule A (Form 990-T) 2023					Pa	ige 2
Part		hod of inventory valuat					
1	Inventory at beginning of year			l l	1		
2	Purchases				2		
3	Cost of labor				3		
4	Additional section 263A costs (attach statement)				4		
5	Other costs (attach statement)				5		
6	Total. Add lines 1 through 5			<u> </u>	6		
7	Inventory at end of year			·····	7		
8	Cost of goods sold. Subtract line 7 from line 6. Enter I	here and in Part I, line 2	2	L	<u> </u>		
9	Do the rules of section 263A (with respect to property)				L	Yes	No
Part	IV Rent Income (From Real Property and	l Personal Proper	ty Leased With Re	eal Property)			
1	Description of property (property street address, city, s	tate, ZIP code). Check	if a dual-use. See instru	ıctions.			
	A						
	В 🗌						
	c 🗌						
	D						
		Α	В	С		D	
2	Rent received or accrued						
а	From personal property (if the percentage of						
	rent for personal property is more than 10%						
	but not more than 50%)						
b	From real and personal property (if the						
	percentage of rent for personal property exceeds						
	50% or if the rent is based on profit or income)						
С	Total rents received or accrued by property.						
	Add lines 2a and 2b, columns A through D						
4	Deductions directly connected with the income in lines 2a and 2b (attach statement)		line O and war (D)				0.
5 Part	Total deductions. Add line 4, columns A through D. El  V Unrelated Debt-Financed Income (s		, line 6, column (B)				0.
1	Description of debt-financed property (street address, of		Shook if a dual was Can	inatuustiana			
'	A	city, state, ZIP codej. C	fileck ii a dual-use. See	iristructions.			
	в —						
	c —						
	D						
		Α	В	С		D	
2	Gross income from or allocable to debt-financed		В			<u> </u>	
2	property						
3	Deductions directly connected with or allocable						
J	to debt-financed property						
а	Straight line depreciation (attach statement)						
a b	Other deductions (attach statement)						
С	Total deductions (add lines 3a and 3b,						
4	columns A through D)						
4	Amount of average acquisition debt on or allocable						
_	to debt-financed property (attach statement)						
5	Average adjusted basis of or allocable to debt-						
_	financed property (attach statement)	%	2/		0/		
6	Divide line 4 by line 5		%		%		<u>%</u>
7	Gross income reportable. Multiply line 2 by line 6		wt I line 7! (4)				0.
8	Total gross income (add line 7, columns A through D)	. ⊏nter here and on Pa	rt i, iirie 7, column (A)				<u> </u>
0	Allocable deductions. Multiply line 3c by line 6						
9 10	Total allocable deductions. Add line 9, columns A thr	ough D. Enter here and	d on Part Lline 7 colum	n (R)			0.
11	Total dividends-received deductions included in line						0.
<u> </u>							<u> </u>

Schedule A (Form 990-T) 2023 Page

	Name of controlled											
	1. Name of controlled					E	xempt Control	lled Or	ganization	ıs		
Name of controlled organization		. ,		ments made that is incontrolli		ort of coluic included olling orga gross inc	in the aniza-	the connected with				
(1)												_
(2)												
(3)												
(4)												
				· · ·	Controlled Or			- C I	0			alore Alberta and Constanting
7. 1	axable Income	in	Net unrelated come (loss) e instructions)	1	otal of specifi yments made		that is inc controlling gross	luded i	in the zation's		cor	ductions directly nnected with ne in column 10
(1)												
(2)												
(3)												
(4)												
							Add colum Enter here line 8, c	and on	Part I,	Ent	er h	olumns 6 and 11. ere and on Part I, 8, column (B).
Totals									0.			0.
Part V	II Investment I	ncome	of a Section 50	1(c)(7), (	9), or (17)	Orgar	nization <sub>(s</sub>	ee inst	ructions)			
	<b>1.</b> Desc	cription of i	income		2. Amour incom		3. Deduction directly connected (attach states	ected	4. Set- (attach st		′ I	5. Total deductions and set-asides (add cols 3 and 4)
(1)												
(2)												
(3)												
(4)					Add amou column 2. here and or line 9, colu	Enter n Part I, mn (A).						Add amounts in column 5. Enter here and on Part I, line 9, column (B).
Totals					<u> </u>	0.						0.
Part V			ctivity Income,	Other 1	han Adve	rtising	g Income (	see ins	structions)		ı	
	escription of exploite											
	Gross unrelated busine						•	. ,		2		
	xpenses directly con											0
			to a decay by the second							3		0.
	let income (loss) from					-						
			a not unvoloted busi							4		0.
	Gross income from activities and activities and activities attributed to									5 6		0.
	xpenses attributable xcess exempt expens									-		<u></u>
	. Enter here and on P			•						7		0.

Schedule A (Form 990-T) 2023

Part	IX	Advertising Income				
1	Na	me(s) of periodical(s). Check box if reporting two	or more periodicals on a c	consolidated basis.		
	Α					
	В					
	С					
	D					
Enter a	amou	unts for each periodical listed above in the corre	sponding column.			
		·	Α Α	В	С	D
2	Gro	oss advertising income				
	Ad	d columns A through D. Enter here and on Part				0.
а		-				
3	Dir	ect advertising costs by periodical				
а	Ad	d columns A through D. Enter here and on Part	I, line 11, column (B)			0.
4	Ad	vertising gain (loss). Subtract line 3 from line				
	2. I	For any column in line 4 showing a gain,				
	cor	mplete lines 5 through 8. For any column in				
	line	e 4 showing a loss or zero, do not complete				
	line	es 5 through 7, and enter -0- on line 8				
5	Rea	adership costs				
6	Cir	culation income				
7	Exc	cess readership costs. If line 6 is less than				
		e 5, subtract line 6 from line 5. If line 5 is less				
	tha	an line 6, enter -0-				
8		cess readership costs allowed as a				
		duction. For each column showing a gain on				
		e 4, enter the lesser of line 4 or line 7	·			
а		d line 8, columns A through D. Enter the greater	of the line 8a columns tota	al or -0- here and or	1	0
Dart		rt II, line 13	re and Truetope /-			0.
Part		Compensation of Officers, Director	ors, and Trustees (se	ee instructions)		
Part		Compensation of Officers, Directo		ee instructions)	3. Percentage	4. Compensation
Part		Compensation of Officers, Directors  1. Name	ors, and Trustees (Se	ee instructions)	3. Percentage of time devoted	4. Compensation attributable to
		Compensation of Officers, Directo		ee instructions)	3. Percentage of time devoted to business	4. Compensation
1)		Compensation of Officers, Directo		ee instructions)	3. Percentage of time devoted to business	4. Compensation attributable to
1)		Compensation of Officers, Directo		ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to
1) 2) 3)		Compensation of Officers, Directo		ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to
1)		Compensation of Officers, Directo		ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to
1) 2) 3) 4)	X	1. Name		ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to
(1) (2) (3) (4)	X . Ent	1. Name	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X . Ent	1. Name  er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business

FORM 990-T	(A)	OTHER	INCOME		STATEMENT 3
DESCRIPTION	N				AMOUNT
INCOME FROM	— M JOB BOARD POSTING	GS .			10,418.
TOTAL TO S	CHEDULE A, PART I,	LINE 12			10,418.
990-T SCH 2	A POST-203	17 NET OPE	ERATING I	LOSS DEDUCTION	STATEMENT 4
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOU APPL]	JSLY	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	1,128,153.		0.	1,128,153.	1,128,153.
NOL CARRYO	VER AVAILABLE THIS	YEAR		1,128,153.	1,128,153.

## SCHEDULE A (Form 990-T)

## **Unrelated Business Taxable Income** From an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). 501(c)(3) Organizations Only B Employer identification number Name of the organization FINANCIAL PLANNING ASSOCIATION 84-1521488 541800 D Sequence: Unrelated business activity code (see instructions) Describe the unrelated trade or business ADVERTISING Part I Unrelated Trade or Business Income (C) Net (A) Income (B) Expenses 1a Gross receipts or sales **b** Less returns and allowances 1c Cost of goods sold (Part III, line 8) 2 2 Gross profit. Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions 4a Net gain (loss) (Form 4797) (attach Form 4797). See instructions) 4b Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) Rent income (Part IV) 6 Unrelated debt-financed income (Part V) 7 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 8 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) 251,950. 389,816. 137,866. Exploited exempt activity income (Part VIII) 10 10 11 11 Advertising income (Part IX) Other income (see instructions; attach statement) 12 12 13 389,816. 251,950. **Total.** Combine lines 3 through 12 Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income Compensation of officers, directors, and trustees (Part X) 2 2 Salaries and wages 3 Repairs and maintenance 4 4 Interest (attach statement). See instructions 5 5 6 Taxes and licenses 6 7 Depreciation (attach Form 4562). See instructions Less depreciation claimed in Part III and elsewhere on return 8b 8 9 Depletion \_\_\_\_\_ 9 10 Contributions to deferred compensation plans 10 Employee benefit programs 11 11 12 Excess exempt expenses (Part VIII) 12

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2023

137,866.

137,866.

13

14

15

16

13

14

15

16

17

Excess readership costs (Part IX)

Other deductions (attach statement)

Total deductions. Add lines 1 through 14

Deduction for net operating loss. See instructions

Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13,

Unrelated business taxable income. Subtract line 17 from line 16 ......

Part	III Cost of Goods Sold Enter metho	od of inventory valuation	on		Page 2
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter he	•			
9	Do the rules of section 263A (with respect to property pr				Yes No
Part	, , ,	•	-		
1	Description of property (property street address, city, sta	ate, ZIP code). Check i	f a dual-use. See instru	ctions.	
	A				
	B				
	<u> </u>				
	D	•		0	
•	Pont received or account	A	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
<b>L</b>	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
C	Add See October 10 to a language Address of D				
	Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c, columns A t	through D. Enter here	and on Part I line 6 co	olumn (A)	0.
	Deductions directly connected with the income	through B. Enter Here		January V	
4	in lines 2a and 2b (attach statement)				
		•	<u>'</u>	•	
5	Total deductions. Add line 4, columns A through D. Ent	er here and on Part I,	line 6, column (B)		0.
Part		e instructions)			
1	Description of debt-financed property (street address, cit	ty, state, ZIP code). Ch	neck if a dual-use. See	instructions.	
	A				
	В				
	c 🗌				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D). E	Enter here and on Parl	t I, line 7, column (A)		0.
	_				
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A through				0.
11	Total dividends-received deductions included in line 1	0			0.

	ule A (Form 990-T) 2023											Page 3
Part	VI Interest, Ann	uities, R	oyalties, and Re	ents Fro	m Contro	lled O	rganization	<b>S</b> (s	ee instruct	ions)		
					Exempt Controlled Organizations							
	1. Name of controlle	ed	2. Employer	3. Net unrelated 4. Tota		al of specified	al of specified 5. Part of colu		nn 4 <b>6.</b> Deductions directl		ons directly	
	organization		identification	income (loss)		payments made		that is included in the			I COILLECTED MILLI	
			number	(see ins	structions)			controlling organized tion's gross incor				
(1)												
(2)												
(3)												
(4)												
<del>''</del>			No.	nexempt (	Controlled O	u manizati	ions					
	. Taxable Income		Net unrelated		otal of specif		<b>10.</b> Part	of colu	ımn 9	11	Deductions	s directly
•	in		ncome (loss)	payments made			that is include controlling organizes inc		cluded in the organization's		connected with	
			e instructions)	payments made		Ü						
/4\		( )	,				gross	INCON	ie			
(1) (2)				1								
(2)												
(3)												
(4)							<b>.</b>					
							Add colum Enter here				d columns 6 er here and	
							line 8, c		′ 1		ine 8, colun	,
									` '		,	. ,
Totals	\/II			4	(0) (43)		<u> </u>		0.			0.
Part			of a Section 50	1(C)(/), (	T		1		tructions)			
	<b>1.</b> Des	cription of	income		2. Amou		3. Deduction		<b>4.</b> Set-			deductions et-asides
					incor	ie	directly conn (attach state)		(attach st	atemer	'')	ols 3 and 4)
							(attaon state)	11101111				,
(1)												
(2)												
(3)												
(4)												
					Add amou							mounts in
					column 2 here and o							nn 5. Enter nd on Part I,
					line 9, colu							column (B).
Totals						Ò.					,	0.
Part	VIII Exploited E	xempt /	Activity Income	Other 1	Than Adve	ertisino	Income	(see in	structions)	S	TATEME	
1	Description of exploit							(200 ///	2 400110)	Ĩ		
2	Gross unrelated busin	-			r here and o	n Part I	line 10 colum	n (A)		2	38	9,816.
3	Expenses directly cor						•	. ,		-		_ , = = = •
3								,		3	25	1,950.
4	line 10, column (B)  Net income (loss) from									3		<del>-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
4	` '						• .			,	12	7,866.
F	lines 5 through 7		io not unrelatad bara							4	т э	0.
5	Gross income from ac									5		0.
6	Expenses attributable									6		U •
7	Excess exempt exper			o, but do n	ot enter mor	e tnan tr	ie amount on l	ine		_		^
	// Enter here and an i	Jort II lino	1.7						1	/		( )

Schedule A (Form 990-T) 2023

Part	IX	Advertising Income				
1	Name	e(s) of periodical(s). Check box if reporting	two or more periodicals on a	consolidated basi	S.	
	A [					
	в					
	c $\Box$					
	D	<del></del>				
Entor o		□ ts for each periodical listed above in the co	prrosponding column			
_III.GI a	inouni	is for each periodical listed above in the co	_	В	С	D
•	0		A	В В		U
2		s advertising income		<u> </u>		0.
	Ada	columns A through D. Enter here and on P	art I, line 11, column (A)			<u> </u>
а				T		
3		t advertising costs by periodical				
а	Add	columns A through D. Enter here and on P	art I, line 11, column (B)			0.
				ı	1	
4		rtising gain (loss). Subtract line 3 from line				
		r any column in line 4 showing a gain,				
	comp	olete lines 5 through 8. For any column in				
	line 4	showing a loss or zero, do not complete				
	lines	5 through 7, and enter -0- on line 8				
5	Read	lership costs				
6	Circu	lation income				
7		ss readership costs. If line 6 is less than				
	line 5	i, subtract line 6 from line 5. If line 5 is less				
	than	line 6, enter -0-				
8		ss readership costs allowed as a				
	dedu	ction. For each column showing a gain on				
	line 4	, enter the lesser of line 4 or line 7				
а		line 8, columns A through D. Enter the great		al or -0- here and	on	
		II, line 13				0.
	Part I	II, III IE 13				<b>U</b> •
Part :		Compensation of Officers, Dire	ctors, and Trustees (s			0.
Part :		Compensation of Officers, Dire	ctors, and Trustees (s		3. Percentage	4. Compensation
Part :		Compensation of Officers, Dire	ctors, and Trustees (s		1 1	
Part :		Compensation of Officers, Dire			3. Percentage of time devoted	4. Compensation attributable to
		Compensation of Officers, Dire			3. Percentage	4. Compensation
1)		Compensation of Officers, Dire			3. Percentage of time devoted to business	4. Compensation attributable to
1)		Compensation of Officers, Dire			3. Percentage of time devoted to business %	4. Compensation attributable to
1) 2) 3)		Compensation of Officers, Dire			3. Percentage of time devoted to business %	4. Compensation attributable to
1) 2) 3) 4)		Compensation of Officers, Dire			3. Percentage of time devoted to business %	4. Compensation attributable to
1) 2) 3) 4)	X	1. Name			3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to
1) 2) 3) 4)	Enter	1. Name	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	Enter	1. Name  here and on Part II, line 1	<b>2.</b> Title		3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business

990-T SCH A	POST-2	017 NET	OPERATING	LOSS DEDUCTION	STATEMENT 5
TAX YEAR	LOSS SUSTAINED	PRE	LOSS /IOUSLY PPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	1,655,790.		0.	1,655,790.	1,655,790.
NOL CARRYOVI	ER AVAILABLE THI	S YEAR		1,655,790.	1,655,790.

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DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
COMPENSATION AND BENEFITS OUTSOURCED AND CONTRACT SERVICES MARKETING TECHNOLOGY - SUBTOTAL - COMPENSATION AND BENEFITS OUTSOURCED AND CONTRACT SERVICES MARKETING TECHNOLOGY	1	148,630. 6,990. 6,311. 292. 82,208. 3,866. 3,491.	162,223.
- SUBTOTAL -	2	102.	89,727.
TOTAL OF FORM 990-T, SCHEDULE A, PART VI	II, COLUMN	3	251,950.