efile	e Pu	<u>ıblic Vis</u> u	al Render ObjectId: 202322269349300922 - Submission	1: 2023-08	-14	TI	N: 36-6108621
			Return of Organization Exempt From	Income	Тах		OMB No. 1545-0047
Form	95	JU	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code				2021
			Do not enter social security numbers on this form as it may			,	
Doparte	oont of	f the Treasury	Go to <u>www.irs.gov/Form990</u> for instructions and the la	•			Open to Public
		nue Service					Inspection
A Fe	or th	ne 2021 ca	lendar year, or tax year beginning 11-01-2021 , and ending 10-31-	2022			
		applicable:	C Name of organization INTERNATIONAL FRANCHISE ASSOCIATION		D Employer ide	entif	ication number
_		change hange			36-6108621		
O Ini		-	Doing business as				
		rn/terminated			E Telephone nun	nber	
		ed return ion pending	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1900 K STREET NW STE700		(202) 662-0		
-	pricaci	ion penang	City or town, state or province, country, and ZIP or foreign postal code		(202) 002 0	//0	
			WASHINGTON, DC 20006		G Gross receipts	\$ 23	2,753,486
			F Name and address of principal officer:	H(a) Is this	a group return	for	
			MICHAEL WILLIAMS	suboro	dinates?		🗌 Yes 🗹 No
			WASHINGTON, DC 20006	H(b) Are all include	subordinates ed?		🗆 Yes 🔲 No
I Tax	k-exer	mpt status:	□ 501(c)(3)		," attach a list. S	See i	instructions.
JW	ebsi	te: 🕨 WW	W.FRANCHISE.ORG	H(c) Group	exemption num	ber	►
							<u></u>
K Forn	n of o	organization:	Corporation Trust Association Other	Year of forma	tion: 1960 M S	tate	of legal domicile: IL
Pa	art I	Sum	narv				
	1	Briefly des	cribe the organization's mission or most significant activities:				
B		PROTECTS	, ENHANCES AND PROMOTES FRANCHISING.				
an							
/en							
Governance	_	Check this Number o	s box ▶ □ f voting members of the governing body (Part VI, line 1a)		1	3	66
	4		f independent voting members of the governing body (Part VI, line 1b)			4	66
Activities &	5	Total num	ber of individuals employed in calendar year 2021 (Part V, line 2a)		.	5	49
IMI	6	Total num	ber of volunteers (estimate if necessary)			6	66
Ac	7a	Total unre	lated business revenue from Part VIII, column (C), line 12			7a	1,913,745
	b	Net unrela	ated business taxable income from Form 990-T, Part I, line 11			7b	0
				Prie	or Year		Current Year
Ð	8	Contributi	ons and grants (Part VIII, line 1h)		0		0
Revenue	9	Program s	ervice revenue (Part VIII, line 2g)		11,384,315		22,436,279
2ev	10	Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)		274,797		317,207
	11	Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		64,200		0
	12	Total reve	nue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		11,723,312		22,753,486
			d similar amounts paid (Part IX, column (A), lines 1–3)		55,000		0
			aid to or for members (Part IX, column (A), line 4)		0		0
8			other compensation, employee benefits (Part IX, column (A), lines 5–10)		5,037,697		6,040,253
Exp enses			nal fundraising fees (Part IX, column (A), line 11e)		0		0
хb			aising expenses (Part IX, column (D), line 25) ▶0				
salai			enses (Part IX, column (A), lines 11a–11d, 11f–24e)		5,929,534		15,526,675
			enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		11,022,231		21,566,928
- w	19	Kevenue l	ess expenses. Subtract line 18 from line 12	Bosinging	701,081		1,186,558
Net Assets or Fund Balances				Beginning	of Current Year		End of Year
sse 3ala	20	Total asse	ts (Part X, line 16)		21,218,208		21,839,438
of A			lities (Part X, line 26)		7,183,771		9,389,208
ž	22	Net asset	s or fund balances. Subtract line 21 from line 20		14,034,437		12,450,230
	rt II	Sign	iture Block				

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

							2023-08-10			
Sign	Siç	gnature of of	fficer				Date			
Here	MI		IAMS CHIEF FINANCIAL	OFFICER						
	Ту		name and title							
Paid	1	Print/Typ	e preparer's name	Preparer'	s signature	Date 2023-08-04	Check if PTIN self-employed	7829		
	oarer	Firm's na	ame 🕨 RSM US LLP				Firm's EIN 🕨 42-07143	325		
Use	Only	Firm's ad	ldress Þ 1250 H STREET	SUITE 700			Phone no. (202) 293-2	200		
			WASHINGTON, I	DC 20005						
May th	he IRS disc	cuss this re	turn with the prepare	er shown above?	(see instructions)			🗸 Yes		
For Pa	aperwork	Reductio	n Act Notice, see th	e separate ins	tructions.	Cat. I	No. 11282Y	F	orm 99	0 (2021)
					Page 2					
Form 9	990 (2021))								Page 2
Parl	t III St	atement	of Program Serv	ice Accompli	shments					-
					any line in this Part III					
-	,		organization's mission							
					SING.IFA VISION: BE THE TRUST, EXCELLENCE, DI					
RELAT	IONS, PUB	BLIC RELAT	TONS, EDUCATION A	ND PROFESSION	AL DEVELOPMENT.					
2	Did the or	nanization	undertake anv signifi	cant program se	rvices during the year w	hich were not li	sted on			
		-	or 990-EZ?						'es 🔽	No
			ese new services on S							
3	Did the or	ganization	cease conducting, or	make significant	t changes in how it cond	ucts, any progra	m			
	services?								Yes	🗹 No
	If "Yes," d	escribe the	ese changes on Sched	ule O.						
4					ents for each of its three					
			nd 501(c)(4) organiza for each program ser		ed to report the amount of	of grants and all	ocations to others, th	e total	expense	s,
4a	(Code:) (Expenses \$		including grants of \$) (Revenue \$)	
	THE PROGR	AM AND CO	NFERENCE DEPARTMENT	IS REPONSIBLE FO	OR PLANNING AND ORGANIZ	ING TRAINING PRO	DGRAMS AND THE ANNU	AL CONV	ENTION.	
4b	(Code:) (Expenses \$		including grants of \$) (Revenue \$)	
10	•	CATION DEPA		LICATIONS PROMO	TING FRANCHISING TO SER	VICE MEMBERS.)	
4c	(Code:) (Expenses \$		including grants of \$) (Revenue \$)	
			ATIONS DEPARTMENT FU FOR MEMBERS.	NCTIONS TO INFOR	RM MEMBERS ON LEGAL AND	LEGISLATIVE MA	ITERS WHICH WOULD IM	1PACT FF	ANCHISI	NG AND
	CONDUCTS	RESEARCH	TOR MEMDERS.							
4d	Other pro	gram servi	ces (Describe in Sche	dule 0.)						
	(Expenses	-		cluding grants o	f \$) (Revenue	\$)		
4e	Total pro	gram ser	vice expenses 🕨							
									Form 99	0 (2021)
					Page 3					
Form 9	990 (2021))								Page 3
Part	t IV Ch	ecklist o	of Required Scheo	dules						
									Yes	No
1	Is the orga		lescribed in section 50	01(c)(3) or 4947	(a)(1) (other than a priv	ate foundation)	? If "Yes," complete	1		No
2			equired to complete 9	Schedule B. Sche	dule of Contributors? Se	e instructions		2		No
			• •		ampaign activities on be			<u> </u>	Yes	
			Yes," complete Sched			••••		3		
4	Section 5	01(c)(3)	organizations. Did t	the organization	engage in lobbying activ	ities, or have a	section 501(h)			
					Schedule C, Part II			4		
5	Is the org	anization a	a section 501(c)(4), 50	01(c)(5), or 501	(c)(6) organization that I	receives membe	rship dues,			
					98-19? If "Yes " complete				I	l

assessments or similar amounts as defined in Rev Proc. 98-197 If "Yes." complete Schedule C. Part III 🔞

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		5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D</i> ,Part I Schedule D ,Part I Schedule D , Part I Schedule D ,	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 🗐	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 🐿	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> 1	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 🗐	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> 🗐	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> 🗐	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 🗐	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🗐	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 😒	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 😼	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional **	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
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 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
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Form 990 (2021)

Pa	t 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		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
۰.	entre in internet and internet			
https:/	/projects.propublica.org/nonprofits/organizations/366108621/202322269349300922/full			

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D	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? \ldots .	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L</i> , Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see 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 "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			\square
		•	Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1a46Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
		F	orm 99	0 (2021)
	Daga F			
	Page 5			
	990 (2021)			Page 5
	Statements Regarding Other IRS Filings and Tax Compliance (continued)	1 1		
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 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b 4-	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	

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4 a	Ac any time during the calendar year, du the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:	4a		NO
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b 5c		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).	00	165	
	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		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7.5		
-	Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
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:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	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.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O \cdot .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17		
		F	orm 99	0 (2021)

Form 990 (2021)

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

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	Check if Schedule O contains a response or note to any line in this Part VI			<
Se	ction A. Governing Body and Management			
_			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 66	b		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 66	5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	່ 3	Yes	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? $$.	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $\ .$	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		Yes	
b 11a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	10b	Yes	No
b 11a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	No
b 11a b 12a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990.	10b 11a		No
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> .	10b 11a 12a		No
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> . Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a 12b		No No No
b 11a b 12a b c	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c	Yes	No No No
b 11a b 12a b c 13 14	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes	No No No
b 11a b 12a b c 13 14 15	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes	No No No
b 11a b 12a b c 13 14 15 a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> . Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i> . Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13 14	Yes	No No No No
b 11a b 12a b c 13 14 15 a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a	Yes	No No No No
b 111a b 12a b c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a	Yes	No No No No
b 111a b 12a b c 13 14 15 a b 16a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a	Yes	No No No No No No
b 111a b 12a b c 13 14 15 a b 16a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a 15b 16a	Yes	No No No No No No
b 111a b 12a b c 13 14 15 a b 16a b 5 <u>Se</u> 17	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> . Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i> . Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization . If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	10b 11a 12a 12b 12c 13 14 15a 15b 16a	Yes	No No No No No No

Own website Another's website Vpon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 19 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: MIKE WILLIAMS CFO 1900 K STREET NW STE700 WASHINGTON, DC 20006 (202) 662-0778 20

Form 990 (2021)

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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours	pers	in òn on is	e bo botł	t ch ox, ι h an	eck m Inless I office Tustee	er	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099- MISC/1099- NEC)	(W-2/1099- MISC/1099- NEC)	organization and related organizations
(1) CHARLIE CHASE CHAIR	0.30	х		x				0	0	0
(2) CATHERINE MONSON CFE IMMEDIATE PAST CHAIR	0.30	х		x				0	0	0
(3) EDITH WISEMAN CHAIR, SUPPLIER FORUM ADVISORY BOARD	0.30	х		x				0	0	0
(4) ADAM CONTOS BOARD MEMBER	0.30	х						0	0	0
(5) AL RODRIGUEZ BOARD MEMBER	0.30	х						0	0	0
(6) ASLAM KHAN BOARD MEMBER	0.30	х						0	0	0
(7) BARBARA MORAN-GOODRICH CFE BOARD MEMBER	0.30	х						0	0	0
(8) CAROLINE OYLER BOARD MEMBER	0.30	х						0	0	0
(9) CAROLYN THURSTON BOARD MEMBER	0.30	х						0	0	0
(10) CHARLES WATSON CFE BOARD MEMBER	0.30	х						0	0	0
(11) CHERYL STANTON BOARD MEMBER	0.30	х						0	0	0
(12) CHRIS RONDEAU BOARD MEMBER	0.30	x						0	0	0
(13) CLAUDIA SAN PEDRO BOARD MEMBER	0.30	x						0	0	0
(14) CLINT EHLERS	0.30			1	l	İ	İ			

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International Franchise Association Inc - Full Filing- Nonprofit Explorer - ProPublica

					0 1	•	
BOARD MEMBER		Х			0	0	0
(15) DAN MONAGHAN CFE	0.30	х	х		0	0	0
FOUNDATION BOARD CHAIR	0.30	~	~		9	9	5
(16) DANIEL HALPERN	0.30	v			0	0	0
BOARD MEMBER (AS OF 1/21)		^			0	0	0
(17) DAVE MORTENSEN	0.30	v					
BOARD MEMBER		X			0	0	0
							Form 990 (2021)

– Page 8 –

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Page **8**

(A) Name and title	(B) Average hours per week (list	Positi th	(E) Reportable compensation from related	(F) Estimated amount of other compensation						
CE CHAIR 9) DAVID PEPPER	any hours for related organizations below dotted line)		a dir Institutional Trustee	ecto	or/tr	ustee)		from the organization (W- 2/1099- MISC/1099- NEC)	organizations (W-2/1099- MISC/1099- NEC)	from the organization and related organizations
18) DAVID HUMPHREY	0.30	Ň		v				0		
/ICE CHAIR		×		х				0	0	L
19) DAVID PEPPER	0.30		1		1		1			
OARD MEMBER		X	1					0	0	C
20) DENNIS MAPLE	0.30		1				\vdash			
OARD MEMBER		×	1					0	0	C
21) DUSTIN HANSEN	0.20									
DARD MEMBER	0.30	х						0	0	(
22) EARSA JACKSON CFE	0.30									
<i>,</i>		х						0	0	C
OARD MEMBER 23) ERICKA GARZA	0.30						-			
OARD MEMBER	0.30	×						0	0	C
24) ERIN MARTIN OARD MEMBER	0.30	×						0	0	C
25) GARY ROBINS	0.30									
OARD MEMBER		×						0	0	C
26) GENNA GENT	0.30									
OARD MEMBER		×						0	0	C
27) GEOFF SEIBER	0.20									
ICE CHAIR, SUPPLIER FORUM	0.30	×						0	0	C
28) GRAHAM WEIHMILLER	0.30	х		x				0	0	(
HAIR, FRANCHISOR FORUM		^		^				5	5	
29) GREG FLYNN	0.30	х	1					0	0	c
OARD MEMBER		^						0	0	
30) HARVEY HOMSEY	0.30									
OARD MEMBER		×	1					0	0	(
31) JAY DUKE	0.30		1			1	1			
OARD MEMBER		×	1					0	0	C
32) JAY JOHNS	0.50		1		1		\vdash			
OARD MEMBER	0.30	×	1					0	0	(
33) JEFFREY SOPP			1							
OARD MEMBER	0.30	х	1		l			0	0	(

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BOARD MEMBER		×					(0 0	
(35) JERRY AKERS									
	0.30	х					() 0	
BOARD MEMBER		<u> </u>			_				
(36) JIM HOLTHOUSER	0.30	х					() 0	
BUARD MEMBER		<u> </u>							
(37) JOE LINDENMAYER	0.30	x) 0	
BOARD MEMBER		····^						0	
(38) JYOTI SAROLIA	0.30								
BOARD MEMBER		××					(0 0	
(39) KAREN SATTERLEE CFE	0.30)							
BOARD MEMBER	0.30						(0 0	
(40) KEVIN MORRIS		1		_					
	0.30						(0 0	
BOARD MEMBER		<u> </u>			_				
(41) KIMBERLY CROWELL	0.30	х					() 0	
BOARD MEMBER									
(42) LANE FISHER CFE	0.30	v) 0	
BOARD MEMBER		×						, 0	
(43) LUIS SAN MIGUEL	0.30								
BOARD MEMBER		×						0 0	
(44) MARCUS BANKS		<u> </u>		+	+	-+			
	0.30	х					(0 0	
BOARD MEMBER (45) MARY KENNEDY THOMPSON		<u> </u>	+	\rightarrow	+	-+			
	0.30	х					() 0	
2ND VICE CHAIR, IFA BOARD									
(46) MATTHEW PATINKIN	0.30	x						0	
BOARD MEMBER		····^						0	
(47) MEG ROBERTS	0.30								
BOARD MEMBER		××					(0 0	
(48) MICHAEL BROWNING JR	0.20								
	0.30	×					0	0 0	
BOARD MEMBER		<u> </u>			_				
(49) MITCH COHEN	0.30	х					() 0	
BOARD MEMBER									
(50) NED LYERLY	0.30	x) 0	
BOARD MEMBER		····^					,	0	
(51) RANDY CROSS	0.30								
BOARD MEMBER		××					(0 0	
(52) RONALD FELDMAN CFE	0.30	J							
		х					0	0 0	
BOARD MEMBER (53) SAM BALLAS CFE	0.30	<u> </u>							
(JJ) SAM BALLAS CFL	0.30	х					() 0	
BOARD MEMBER									
(54) SEAN FALK CFE	0.30	х) 0	
BOARD MEMBER		····^							
(55) STEPHEN PIACENTINI	0.30				T				
VICE CHAIR, FRANCHISE FORUM		X					() 0	
(56) STEPHEN SHIELDS	0.00	<u>t – – – – – – – – – – – – – – – – – – –</u>		+	+		1	1	1
	0.30	×					(0 0	
BOARD MEMBER (57) STEVE DANON		┣───	+	\rightarrow	+	-+	1	ł	
	0.30	х					() 0	
BOARD MEMBER		<u> </u>			\perp				
(58) STEVE HOCKETT	0.30	x) 0	
BOARD MEMBER		····^							
(59) STEVE WHITE	0.30			Τ	Τ				
BOARD MEMBER		×) 0	
(60) TAMRA KENNEDY	0.30			\neg	+				İ
		x					(0 0	
BOARD MEMBER (61) TIM WILLIAMS	0.30		+	\rightarrow	+				
	0.30	х					(0 0	
		<u> </u>							
(62) TODD LEFF	0.30	x) 0	
BOARD MEMBER		+^					, i i i i i i i i i i i i i i i i i i i	U U	
(63) TODD RECKNAGEL CFE				_			T		

CHAIR, FRANCHISEE FORUM		×		х				0	0	
(64) TOM BABER	0.20									
		х						0	0	
BOARD MEMBER (65) TROY DAHL										
		Х						0	0	(
BOARD MEMBER (66) WANDA WILLIAMS			-							
(00) WANDA WILLIAMS	0.30	х						0	0	(
BOARD MEMBER										
(67) WILLIAM HALL CFE	0.30			х				0	0	(
TREASURER	0.30									
(68) STUART HERSHMAN	0.30			х				0	0	(
SECRETARY				~				0	9	
(69) ROBIN GAGNON	0.30			<				0	0	
CHAIR, WOMEN'S FRANCHISE COMMITTEE				х				0	U	(
(70) MATTHEW HALLER	40.00									
CHIEF EXECUTIVE OFFICER				Х				604,672	0	61,423
(71) MICHAEL WILLIAMS	40.00									
				х				364,000	0	(
CHIEF FINANCIAL OFFICER (72) JENNIFER BRANDEEN										
	40.00				х			376,566	0	65,499
CHIEF REVENUE OFFICER (73) RIKKI AMOS				-						
. , ,					х			203,788	0	24,302
EXECUTIVE DIRECTOR, IFA FOUNDATION										
(74) ERICA FITZSIMMONS	40.00				х			222,779	0	10,180
VP, POLITICAL AFFAIRS AND GRASSROOTS ADVOCACY								,		
(75) MICHAEL HANSCOM	40.00				х			237,690	0	21,798
VP, STATE GOV'T RELATIONS AND PUBLIC POLICY					~			237,030	0	21,750
(76) MICHAEL LAYMAN	40.00				v			259 027	0	26.29
SVP, GOV'T RELATIONS AND PUBLIC AFFAIRS					х			258,927	U	36,283
(77) PAUL ROCCHIO	40.00									
VP, DEVELOPMENT AND MEMBER SERVICES					х			183,530	0	54,396
(78) CARLY WOOLEY	40.00									
SENIOR DIRECTOR, ADVERTISING						х		271,988	0	
(79) LYNETTE JAMES										
. , ,						х		143,939	0	(
SR DIRECTOR, CONFERENCES & MEETINGS (80) JEANINE LITTREL										
	40.00					х		134,430	0	(
SR DIRECTOR, CONFERENCES & MEETINGS				_						
(81) SARA WILLIAMSON	40.00					х		128,333	0	(
DIRECTOR, TECHNOLOGY & OPERATIONS										
(82) ALAN CATLETT	40.00					х		130,029	0	(
VP, REVENUE GROWTH & OPS								100,025	0	
(83) ROBERT CRESANTI	40.00								0	20 70
FORMER CEO (THRU 4/21)							х	255,082	0	30,784
(84) SUZANNE BEALL	40.00		1					_		
FORMER VP PUBLIC POLICY (THRU 10/21)							х	176,173	0	
					•	•		·		
c Total from continuation sheets to Part V						-				

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 18

		Yes	No					
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3	Yes						
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes						
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No					
Se	Section B. Independent Contractors							

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business add	dress		Desci	(B) ription of services	(C) Compensation
LOCUST STREET GROUP			PUBLIC REL		735,858
2008 HILLYER PL NW					
WASHINGTON, DC 20009 MICHAEL WILLIAMS,			CONSULTING	G, MANAGEMENT	364,000
5307 WAPAKONETA RD BETHESDA, MD 20816					
CARLY WOOLEY, 428 LEE RD APT 2128			TELEMARKE	TING	271,988
VALLEY, AL 36854					
CONDOR COMMUNICATIONS			EVENT PROD	DUCTION	206,264
17521 RIDGE ROAD ROCKVILLE, MD 20853					
HARBINGER STRATEGIES LLC			CONSULTING	3	195,000
801 PENNSYLVANIA AVENUE NW STE 430 WASHINGTON, DC 20004					
2 Total number of independent contractors (including b	ut not limited t	those listed abov	ve) who received mo	ore than \$100,000 o	f
compensation from the organization \blacktriangleright 16					Form 990 (2021)
		Page 9 ———			
Form 990 (2021)					Page 9
Part VIII Statement of Revenue					
Check if Schedule O contains a response o	or note to any I				<u></u> 🗆
		(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
			exempt function	business revenue	excluded from tax under sections
			revenue	revenue	512 - 514
Federated campaigns 1a					
Contributions, Sifts, Grants, an <mark>u</mark> Membership dues1b					
DtherAmt					
Similar Arfio[Htg/raising events 1c					
d Related organizations 1d					
e Government grants (contributions) 1e					
f All other contributions, gifts, grants,					
and similar amounts not included 1f					
g Noncash contributions included in					
lines 1a - 1f:\$ 1g					
h Total. Add lines 1a-1f					
Bus	iness Code				
2a MEMBERSHIP DUES	900099	8,005,478	8,005,478		
		6,246,644	6,246,644		
GOV. RELATIONS/PUBLIC AFFAIRS	900099	0,240,044	0,240,044		
GOV. RELATIONS/PUBLIC AFFAIRS PROGRAMS AND CONFERENCES MARKETING AND PUBLIC	900099	5,183,931	5,183,931		
	500055				
	541800	1,123,291	2,193	1,121,098	
		1,084,288			
🖺 🛓 SPONSORSHIPS		1,004,200			1,084,288
SPUNSUKSHIPS	900099	1,004,200			1,084,288
Prog	900099	792,647		792,647	1,084,288
f All other program service revenue.	900099			792,647	1,084,288

5 Royalties				>				
		(i) Rea	I	(ii) Personal				
6a Gross rents	6a							
b Less: rental	0a				•			
expenses	6b)						
c Rental income or (loss)	6c							
d Net rental incom	ne or (loss) .						
		(i) Securi	ties	(ii) Other				
7a Gross amount from sales of assets other than inventory	7a							
b Less: cost or other basis and sales expenses	7b							
c Gain or (loss)	7c							
d Net gain or (loss	s) .				1			
Gross income from t		5						
(not including \$ contributions report		of						
 (not including \$ contributions report See Part IV, line 18 b Less: direct expe c Net income or (logonalization) 			8a					
b Less: direct expe	nses		8b					
c Net income or (Ic	oss) fr	om fundraisir	ig evei	nts 🕨	•			
Gross income from See Part IV, line 1	n gami 9 .	ng activities.	9a					
b Less: direct expe			9b					
c Net income or (lo			L I	s	J			
				, , , , , , , , , , , , , , , , , , ,				
10aGross sales of inv returns and allow	/entor	y, less						
			10a					
b Less: cost of goo			10b		J			
c Net income or (lo			nvento					
Miscellane	eous F	kevenue	<u> </u>	Business Code				
b								
с								
d All other revenue			—					
e Total. Add lines			ا۔ 	•				
			-					
12 Total revenue.	See In	istructions .	•	• • •	22,753,486	19,438,246	1,913,745	1,401,495

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Part IX	Statement of Functional Expenses						
	Section 501(c)(3) and 501(c)(4) organizations must	complete all columns	s. All other organizati	ons must complete co	lumn (A).		
	Check if Schedule O contains a response or note to any line in this Part IX						
	clude amounts reported on lines 6b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses		
	s and other assistance to domestic organizations and stic governments. See Part IV, line 21						
	s and other assistance to domestic individuals. See /, line 22						
9 Crante	and other accistance to foreign organizations. foreign						

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3	governments, and foreign individuals. See Part IV, lines 15 and 16.			
4	Benefits paid to or for members			
5	Compensation of current officers, directors, trustees, and key employees	3,050,385		
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$			
7	Other salaries and wages	2,489,844		
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)			
9	Other employee benefits	215,073		
10	Payroll taxes	284,951		
11	Fees for services (non-employees):			
а	Management			
b	Legal	1,045,122		
С	Accounting	195,900		
d	Lobbying	331,116		
е	Professional fundraising services. See Part IV, line 17			
f	Investment management fees			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	7,215,558		
12	Advertising and promotion			
13	Office expenses	256,976		
14	Information technology	9,627		
15	Royalties			
16	Occupancy	994,647		
17	Travel	286,445		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .			
19	Conferences, conventions, and meetings	3,997,327		
20	Interest			
21	Payments to affiliates			
22	Depreciation, depletion, and amortization	319,718		
23	Insurance			
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)			
;	a UBIT	-3,200		
I	b PUBLICATIONS COMMISSION	274,829		
	c DUES AND SUBSCRIPTIONS	200,131		
	d EXEMPT FUNCTION EXPENDI	140,000		
	e All other expenses	262,479		
25	Total functional expenses. Add lines 1 through 24e	21,566,928		
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► □ if following SOP 98-2 (ASC 958-720).			

Form **990** (2021)

	Page 11			
Form 990 ((2021)			Page 11
Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part IX			🗆
		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	490	1	490

2/21/	24	12:21	PM
	<u> </u>	12.21	1 1 1 1

		ب				L	J
	2	Savings and temporary cash investments $\ .$			2,469,196	2	5,152,758
	3	Pledges and grants receivable, net				3	
Assets	4	Accounts receivable, net			320,548	4	442,707
	5	Loans and other receivables from any current o trustee, key employee, creator or founder, subs controlled entity or family member of any of the	tantial	contributor, or 35%		5	
	6	Loans and other receivables from other disquali section $4958(f)(1)$, and persons described in s				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
SS	9	Prepaid expenses and deferred charges .			643,046	9	925,181
As	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	2,925,731			
	b	Less: accumulated depreciation	10b	1,986,851	1,056,729	10c	938,880
	11	Investments—publicly traded securities .	·		16,182,453	11	13,727,895
	12	Investments-other securities. See Part IV, line	11 .			12	
	13	Investments-program-related. See Part IV, line	e 11 .			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			545,746	15	651,527
	16	Total assets. Add lines 1 through 15 (must eq	ual line	. 33)	21,218,208	16	21,839,438
	17	Accounts payable and accrued expenses	2,035,649	17	2,005,624		
	18	Grants payable			18		
	19	Deferred revenue	4,976,360	19	7,218,506		
	20	Tax-exempt bond liabilities		20			
s	21	Escrow or custodial account liability. Complete F	Part IV	of Schedule D		21	
Liabilities	22	Loans and other payables to any current or form employee, creator or founder, substantial contri or family member of any of these persons		22			
-19	23	Secured mortgages and notes payable to unrela		23			
	24	Unsecured notes and loans payable to unrelated		•		23	
	25	Other liabilities (including federal income tax, p and other liabilities not included on lines 17 - 24	171,762	25	165,078		
	26	Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 .			7,183,771	26	9,389,208
ances	20	Organizations that follow FASB ASC 958, cl		ere 🕨 🗹 and	7,100,771	20	0,000,200
	27	complete lines 27, 28, 32, and 33. Net assets without donor restrictions	14,034,437	27	12,450,230		
a B	28	Net assets with donor restrictions		28			
or Fund Ba	29	Organizations that do not follow FASB ASC complete lines 29 through 33. Capital stock or trust principal, or current funds		check here 🕨 🗌 and		29	
	30	Paid-in or capital surplus, or land, building or ed	quipme	nt fund		30	
SSE	31	Retained earnings, endowment, accumulated in	come,	or other funds		31	
Net Assets	32	Total net assets or fund balances			14,034,437	32	12,450,230
Ne	33	Total liabilities and net assets/fund balances .			21,218,208	33	21,839,438
							•

Form 990 (2021)

------ Page 12 ---

Form 990	(2021)		Page 12
Part XI	Reconcilliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	🗆
1 Tot	al revenue (must equal Part VIII, column (A), line 12)	1	22,753,486
2 Tot	al expenses (must equal Part IX, column (A), line 25)	2	21,566,928
3 Rev	venue less expenses. Subtract line 2 from line 1	3	1,186,558
4 Net	t assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) .	4	14,034,437
5 Net	t unrealized gains (losses) on investments	5	-2,770,765
6 Do	nated services and use of facilities	6	
7 Inv	restment expenses	7	

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8	Prior period adjustments					
9	Other changes in net assets or fund balances (explain in Schedule O)	+				
10	10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10					
Pa	TXII Financial Statements and Reporting			,450,2		
	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 Cash Contexponent Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No		
ь	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 Were the organization's financial statements audited by an independent accountant?	2b	Yes			
	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					
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	Yes			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule	0.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b				

Form 990 (2021)

Additional Data

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Software ID: Software Version:

Form 990, Special Condition Description:

Special Condition Description

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efile P	ublic Visual	Render (ObjectId: 20232226934	9300922 - Submissior	n: 2023-08-14	TIN: 36-6	
SCHE	DULE C	F	Political Campaig	n and Lobbying	Activities	OMB No. 1	545-0047
(Form 99	90)	For Organiz	zations Exempt From Inc	ome Tax Under section	501(c) and section 527	20	21
	of the Treasury enue Service		the organization is describ to <u>www.irs.gov/Form990</u> t			Open to Inspe	
 Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section Section <	on 501(c)(3) orc ion 501(c) (othe ion 527 organiz ganization ans ion 501(c)(3) or ion 501(c)(3) or	ganizations: Co er than section s ations: Comple wered "Yes" o ganizations tha ganizations tha wered "Yes" o	n Form 990, Part IV, Line 3, mplete Parts I-A and B. Do no 501(c)(3)) organizations: Com te Part I-A only. n Form 990, Part IV, Line 4, at have filed Form 5768 (election thave NOT filed Form 5768 (n Form 990, Part IV, Line 5 (as), then	t complete Part I-C. plete Parts I-A and C below. or Form 990-EZ, Part VI, lin on under section 501(h)): Co election under section 501(h	Do not complete Part I-B. ne 47 (Lobbying Activities), pmplete Part II-A. Do not con i)): Complete Part II-B. Do not	t hen pplete Part II-E ot complete Pa	3. art II-A.
	ion 501(c)(4), (5 of the organizati		zations: Complete Part III.		Employer ident	ification num	hor
	TIONAL FRANCHI						ibei
D. I.T.					36-6108621		
Part I-	-		nization is exempt und				
	ovide a descript olitical campaig		nization's direct and indirect p	olitical campaign activities in	n Part IV. See instructions for	r definition of	
			ditures. See instructions		> \$		140,000
3 Vol	lunteer hours fo	or political camp	paign activities. See instructio	ns			
Part I-	B Complet	e if the orga	nization is exempt und	er section 501(c)(3).			
1 Ent	ter the amount	of any excise t	ax incurred by the organization	n under section 4955	> \$		
2 Ent	ter the amount	of any excise t	ax incurred by organization m	anagers under section 4955			
3 Ift	the organizatior	n incurred a sec	tion 4955 tax, did it file Form	4720 for this year?		🗌 Yes	🗌 No
4a Wa	as a correction r	made?				🗆 Yes	
b If '	"Yes," describe	in Part IV.				- 105	- 110
Part I-	C Complet	e if the orga	nization is exempt und	er section 501(c), exc	ept section 501(c)(3).		
1 Ent	ter the amount	directly expend	ded by the filing organization	for section 527 exempt func	tion activities 🕨 🖇		
			ganization's funds contributed				140,000
3 Tot	tal exempt func	tion expenditur	es. Add lines 1 and 2. Enter h	ere and on Form 1120-POL,	line 17b > \$		140,000
4 Dic	d the filing orga	nization file Fo	rm 1120-POL for this year?			🗹 Yes	
or <u>c</u> of	ganization made political contrib	e payments. Fo utions received	employer identification numb r each organization listed, ent that were promptly and direc ree (PAC). If additional space	er the amount paid from the tly delivered to a separate p	e filing organization's funds. A political organization, such as	the filing Also enter the	amount
(a) Nam	ne		(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of contributions and promp directly deliv separate p organization enter	s received otly and vered to a political . If none,

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

Cat. No. 50084S

54-2060982

Schedule C (Form 990) 2021

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Schedule C (Form 990) 2021

(1) FRANPAC

2

3

4

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6

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

Page 2

1900 K STREET NW 700 WASHINGTON, DC 20006

Page 2

631,169

В	Check \blacktriangleright if the filing organization checked box μ	A and "limited control" provisions apply.		
	Limits on Lobbying (The term "expenditures" means	g Expenditures s amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinio	on (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislative	body (direct lobbying)		
С	Total lobbying expenditures (add lines 1a and 1b)			
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1c and	1 1d)		
f	Lobbying nontaxable amount. Enter the amount from columns.			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25% of line 1f)		
h	Subtract line 1g from line 1a. If zero or less, enter -	D		
i	Subtract line 1f from line 1c. If zero or less, enter -0			
i	If there is an amount other than zero on either line		enorting	0 0

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

🗆 Yes 🗌 No

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

	Lobbying Expenditu	res During 4-	Year Averagin	ng Period		
	Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
с	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					
					Schedule C (F	orm 990) 2021

Page 3

Schedule C (Form 990) 2021

Schedule C (Form 990) 2021

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

Page	3

Form 5768 (election under section 501(h)). (b) (a) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. Yes | No Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers? а b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? С d Mailings to members, legislators, or the public? Publications, or published or broadcast statements? e

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f	Grants to other organizations for lobbying purposes?		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		
i	Other activities?		
j	Total. Add lines 1c through 1i		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		
b	If "Yes," enter the amount of any tax incurred under section 4912		
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		

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

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

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

1	Dues, assessments and similar amounts from members	1		8,005,478
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).			
а	Current year	2a		857,556
b	Carryover from last year	2b		5,028,603
с	Total	2c		5,886,159
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3		2,001,370
4	4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?			3,884,789
5	Taxable amount of lobbying and political expenditures. See Instructions	5		
P	art IV Supplemental Information		-	
Dro	vide the descriptions required for Part I.A. line 1, Part I.R. line 4, Part I.C. line 5, Part II.A. (affiliated group list); I	Dart II	A lines	1 and 2 (see

Provide the descriptions required for Pa	art I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see
instructions), and Part II-B, line 1. Also	, complete this part for any additional information.
Datum Dataman	En al la castilia d

Return Reference	Explanation
PART I-A, LINE 1:	EXCEPT FOR DONATIONS TO CERTAIN POLITICAL ORGANIZATIONS REPORTED ON FORM 1120-POL, THE INTERNATIONAL FRANCHISE ASSOCIATION CONDUCTED ALL OF ITS POLITICAL ACTIVITY THROUGH FRANPAC, A SECTION 527 POLITICAL ACTION COMMITTEE.

Schedule C (Form 990) 2021

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Additional Data

Return to Form

Software ID: Software Version:

efile Public Visual Render			ObjectId: 2023222	69349300922 - Submission	: 2023-08-	14	TIN: 36-6108621
SCHEDULE D		Supplaman	tal Financial Statem	onte		OMB No. 1545-0047	
(Form 990)		Supplemen		enis		2021	
			▶ Complete if the organization answered "Yes," on Form 990, art IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.				
Department of the Treasury				Attach to Form 990.			Open to Public
Internal Revenue Service FG Name of the organization			o to <u>www.irs.gov/Form</u>	1990 for instructions and the late		-	Inspection ification number
	ERNATIONAL FRANC		ON			• •	
De	rt I Organi	-ations Mai	ntaining Danay Advi	sed Funds or Other Similar F		-6108621	
Pd				s" on Form 990, Part IV, line 6.		counts.	
						nd other accounts	
1	Aggregate value of contributions to (during year)						
2							
3	Aggregate value	•					
4			·			L C un de la un de la	
5				rs in writing that the assets held in clusive legal control?		i funds are the	e 🗌 Yes 🗌 No
6	Did the organiza	ation inform all	grantees, donors, and do	onor advisors in writing that grant fu	unds can be us	sed only for	
	charitable purpo	oses and not fo	or the benefit of the donor	or donor advisor, or for any other p	ourpose confei		sible
_	•				••		🗌 Yes 🗌 No
Ра		vation Ease te if the orga		s" on Form 990, Part IV, line 7.			
1	Purpose(s) of co	onservation eas	sements held by the organ	nization (check all that apply).			
		on of land for p	public use (e.g., recreation	n or education) 🛛 🗍 Preservat	ion of an histo	orically importa	ant land area
	Protection	of natural hab	itat	Preservat	ion of a certifi	ed historic str	ucture
		on of open spa	се				
2	Complete lines 2	2a through 2d	if the organization held a	qualified conservation contribution	in the form of	a conservatio	n
	easement on the	,	•			Held at t	he End of the Year
а					2a		
b	5	•		· · · · · · · · · · · · · · · · · · ·			
C L				c structure included in (a) red after 7/25/06, and not on a hisi			
d	structure listed i				20		
3	Number of cons tax year 🕨	ervation easen	nents modified, transferre	d, released, extinguished, or termir	nated by the o	rganization du	iring the
4	Number of state	s where prope	erty subject to conservatio	n easement is located 🕨			
5	Does the organi	zation have a	written policy regarding th	ne periodic monitoring, inspection, h	andling of vio	lations,	
	and enforcemen	it of the consei	rvation easements it holds	5?	2		Yes 🗌 No
6	Staff and volunt	eer hours devo	oted to monitoring, inspec	ting, handling of violations, and enf	forcing conser	vation easeme	ents during the year
7	Amount of expe	nses incurred i	in monitoring, inspecting,	handling of violations, and enforcin	g conservatio	n easements d	luring the year
•	·				170(1)		
8				above satisfy the requirements of s		· · · · · · · _	Yes 🗌 No
9				ervation easements in its revenue a		tatement, and	
			applicable, the text of the for conservation easemen	footnote to the organization's finan ts.	icial statemen	ts that describ	es
Par	t III Organi	zations Mai	ntaining Collections	of Art, Historical Treasures,	or Other S	imilar Asse	ets.
		5		s" on Form 990, Part IV, line 8. C 958, not to report in its revenue s	atatamant and	l halanca chao	t worke of ort
1a	historical treasu	res, or other s	imilar assets held for publ	lic exhibition, education, or research ents that describes these items.			
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:					orks of art, rvice, provide the		
((i) Revenue includ	led on Form 99	00, Part VIII, line 1			. ▶\$_	
(i	ii)Assets included	in Form 990,	Part X			. ►\$	
2				cal treasures, or other similar assets ASC 958 relating to these items:	s for financial	gain, provide	the
а	Revenue include	ed on Form 990), Part VIII, line 1			. ►\$	
b	Assets included	in Form 990, F	Part X			. ▶\$	
For				ns for Form 990.			ule D (Form 990) 2021

		I	Page 2								
Sche	dule D (Form 990) 2021										Page 2
Parl	t III Organizations Maintaining C	ollections of Art, I	Historio	al Tr	easure	es, or	Other	Similar A	ssets (cont	inued)	
3	Using the organization's acquisition, access items (check all that apply):										
а	Public exhibition		d		Loan or	exchai	nge prog	jrams			
b	Scholarly research		e	\Box	Other						
с	Preservation for future generations										
4	Provide a description of the organization's of Part XIII.	collections and explain	how the	y furth	er the o	rganiza	ition's ex	kempt purpo	ose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								🗌 Yes		o
Par	t IV Escrow and Custodial Arrang Complete if the organization an line 21.		rm 990,	Part	IV, line	9, or 1	reporte	d an amou		n 990,	Part X,
1a	Is the organization an agent, trustee, custo	dian or other intermed	liary for	contrit	outions o	or other	- assets	not			
	included on Form 990, Part X?								🗌 Yes		0
b	If "Yes," explain the arrangement in Part X	III and complete the fo	ollowing t	able:		Γ			Amount		_
с	Beginning balance						1c				
d	Additions during the year					. [1d				
е	Distributions during the year					ľ	1e				_
f	Ending balance					. [1f				_
2a	Did the organization include an amount on	Form 990, Part X, line	21, for e	scrow	or custo	odial ac	count lia	ability?	🗌 Yes		0
b	If "Yes," explain the arrangement in Part XI	II. Check here if the e	xplanatio	on has	been pro	ovided	in Part >	<pre></pre>			
Pa	rt V Endowment Funds.										
	Complete if the organization an										
1-	Beginning of year balance	(a) Current year	(b) Pr	ior yea	r (c)	Two ye	ars back	(d) Three ye	ears back (e)	Four yea	rs back
	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cu	rrent year end balance	e (line 1g	, colur	mn (a)) l	held as	:				
а	Board designated or quasi-endowment										
b	Permanent endowment 🕨										
с	Term endowment 🕨										
	The percentages on lines 2a, 2b, and 2c sh	ould equal 100%.									
3a	Are there endowment funds not in the pose	ession of the organiza	tion that	are he	eld and a	adminis	tered fo	r the		N	
	organization by:								2=(1)	Yes	No
	(i) Unrelated organizations		• • •	•	• •	• •			3a(i) 3a(ii)		
b	If "Yes" on 3a(ii), are the related organization					•			. 3b		
4	Describe in Part XIII the intended uses of t							• •			
	t VI Land, Buildings, and Equipm										
1 611	Complete if the organization an		rm 990,	Part	IV, line	11a. S	See For	m 990, Pa	rt X, line 10	Э.	
	Description of property (a) Cost or (invest		t or other	basis (o	other) ((c) Accu	mulated o	lepreciation	(d) B	ook value	e
1a	Land										
b	Buildings										
	Leasehold improvements			1,20	5,274			879,349			325,925
	Equipment				0,457			1,107,502			612,955
	Other										
	I. Add lines 1a through 1e. (Column (d) mus	t equal Form 990, Part	t X, colur	nn (B)	, line 10)(c).) •		•			938,88

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021				Page 3
Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, F	Dart I\/	line 11h See For	m QQA Part Y	line 12
(a) Description of security or category (including name of security)	(b) Book value	Cost	(c) Method of va or end-of-year i	aluation:
(1) Financial derivatives				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related. Complete if the organization answered 'Yes' on Form 990, F	Part IV	line 11c See Fo	rm 990 Part Y	line 13
(a) Description of investment	art iv,	(b) Book value	(c) Meth	nod of valuation: of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)	•			
Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part	art IV I	ine 11d See For	m 990 Part X	line 15
(a) Description				(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.) Part X Other Liabilities.			🕨	

	Complete	IŤ	tł
1.			

he organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.See Form 990, Part X, line 25. (b) Book value (a) Description of liability

(1) Federal income taxes

165,078
165,078
eı

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII Schedule D (Form 990) 2021

	Page 4		
Sche	dule D (Form 990) 2021		Page 4
	Reconciliation of Revenue per Audited Financial Statements With Revenue per Re Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	eturn.	
1	Total revenue, gains, and other support per audited financial statements	1	20,532,508
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a -2,770,765		
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.) . . . 2d 549,787		
е	Add lines 2a through 2d	2e	-2,220,978
3	Subtract line 2e from line 1	3	22,753,486
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII.)		
с	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	22,753,486
Par	TXII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	Return.	
1	Total expenses and losses per audited financial statements	1	22,116,715
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
с	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	549,787
3	Subtract line 2e from line 1	3	21,566,928
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
с	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	21,566,928
Pa	rt XIII Supplemental Information		
	vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	V, line 4; F	art X, line 2; Part XI,
	Return Reference Explanation		
PART	X, LINE 2: IFA IS EXEMPT FROM INCOME TAXES ON ITS EXEMPT ACT	VITIES UN	DER THE PROVISIONS

IFA IS EXEMPT FROM INCOME TAXES ON ITS EXEMPT ACTIVITIES UNDER THE PROVISIONS OF SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE. ADVERTISING REVENUE EARNED FROM THE ASSOCIATION'S PUBLICATIONS AND WEBSITE IS SUBJECT TO UNRELATED BUSINESS INCOME TAXES. ESTIMATED FEDERAL AND DISTRICT OF COLUMBIA INCOME TAX WAS APPROXIMATELY \$0 AND \$1,000 FOR THE YEARS ENDED OCTOBER 31, 2022 AND 2021. IN ADDITION, MANAGEMENT HAS DETERMINED THAT A FULL ALLOWANCE SHOULD BE RECORDED AGAINST ITS EXISTING NET OPERATING LOSS AS OF OCTOBER 31, 2022 AND 2021, AS MANAGEMENT DOES NOT BELIEVE THERE WILL BE A FUTURE BENEFIT TO IFA. IFA IS ALSO SUBJECT TO TAXATION ON ITS POLITICAL

	EXPENDITURES. ESTIMATED FEDERAL TAX ON POLITICAL EXPENDITURES TOTALED APPROXIMATELY \$40,921 AND \$11,500 FOR THE YEARS ENDED OCTOBER 31, 2022 AND 2021, RESPECTIVELY.
PART XI, LINE 2D - OTHER ADJUSTMENTS:	PAC EXPENSES 549,787.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	PAC EXPENSES 549,787.

Schedule D (Form 990) 2021

Additional Data

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Software ID: Software Version:

efile Public Visua	l Render ObjectId: 20232	2269349	300922 - Submission: 2023-	08-14	TIN: 36-	6108	621			
Schedule J	Com	pensat	ion Information		OMB No.	OMB No. 1545-0047				
Form 990)	For certain Officers, D	irectors, 1	rustees, Key Employees, and Hig	jhest		-				
		Compens	ated Employees vered "Yes" on Form 990, Part IV		20	21				
		Attack	to Form 990.		Open t	- Dul	alia			
partment of the Treasury ernal Revenue Service	► Go to <u>www.irs.gov/Fo</u>	<u>rm990</u> for	instructions and the latest infor	mation.		ectio				
Name of the organiz				Employer ident	ification nu	mber				
INTERNATIONAL FRANC	HISE ASSOCIATION			36-6108621						
Part I Questi	ons Regarding Compensation									
						Yes	No			
 Check the appro 990, Part VII, S 	ppiate box(es) if the organization provection A, line 1a. Complete Part III to	vided any o provide ar	f the following to or for a person liste y relevant information regarding the	ed on Form se items.						
_	s or charter travel		Housing allowance or residence for	personal use						
0	companions		Payments for business use of perso							
0	nification and gross-up payments		Health or social club dues or initiat							
Discretion	ary spending account	\Box	Personal services (e.g., maid, chau	ffeur, chef)						
b If any of the borreimbursement	xes on Line 1a are checked, did the or or provision of all of the expenses des	rganization scribed abo	follow a written policy regarding pay ve? If "No," complete Part III to exp	ment or lain	· 1b					
Did the organiza	ation require substantiation prior to re	eimbursing	or allowing expenses incurred by all	1-2	2					
directors, truste	es, officers, including the CEO/Execut	tive Directo	r, regarding the items checked on Li	ne Ia?	· -					
organization's C	if any, of the following the filing organ EO/Executive Director. Check all that d organization to establish compensa	apply. Do r	not check any boxes for methods							
Compens	ation committee		Written employment contract							
	ent compensation consultant		Compensation survey or study							
□ Form 990	of other organizations		Approval by the board or compense	ation committee						
During the year, related organiza	did any person listed on Form 990, F ition:	Part VII, Se	ction A, line 1a, with respect to the f	iling organization	or a					
a Receive a sever	ance payment or change-of-control pa	ayment? .			4a		No			
b Participate in, o	r receive payment from, a supplemen	tal nonqua	ified retirement plan?		4b		No			
	r receive payment from, an equity-ba		5		4c		No			
If "Yes" to any o	of lines 4a-c, list the persons and prov	ide the app	plicable amounts for each item in Par	t III.						
), 501(c)(4), and 501(c)(29) orga	ninationa	must somelete lines F.O.							
For persons liste	ed on Form 990, Part VII, Section A, I contingent on the revenues of:		-							
a The organization	1?				5a					
b Any related orga	anization?				5b					
If "Yes," on line	5a or 5b, describe in Part III.									
	ed on Form 990, Part VII, Section A, I ontingent on the net earnings of:	ine 1a, did	the organization pay or accrue any							
a The organization	n?				6a					
	anization?				6b					
	6a or 6b, describe in Part III.									
payments not d	ed on Form 990, Part VII, Section A, l escribed in lines 5 and 6? If "Yes," de	scribe in Pa	rt III		7					
	nts reported on Form 990, Part VII, p iitial contract exception described in F			escribe						
If "Yes" on line	3, did the organization also follow the		presumption procedure described in	Regulations section	on 8					
53.4958-6(c)? .					9					

— Page 2 –

Schedule J (Form 990) 2021 Page **2** Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for for that individual (C) Retirement (E) Total of **(F)** Compensation in column (B) (B) Breakdown of W-2, 1099-MISC compensation, (D) Nontaxable (A) Name and Title and other deferred and/or 1099-NEC benefits columns (B)(i)-(D) (i) Base (ii) (iii) Other reported as deferred on prior compensation Bonus & compensation reportable incentive compensation Form 990 compensation 1 MATTHEW HALLER CHIEF EXECUTIVE OFFICER 447,172 (i) 157,500 0 45,000 16,423 666,095 0 - - - - ------(ii) - - - ------0 0 0 0 0 -0 2 JENNIFER BRANDEEN CHIEF REVENUE OFFICER 289,566 0 (i) 87,000 0 33,750 31,749 442,065 - - - -- - -- - - -----_ --------- -0 --------- - - - -----(ii) -0 3 MICHAEL WILLIAMS 292.000 0 0 (i) 72,000 38,687 402,687 0 CHIEF FINANCIAL OFFICER - - - -- - -- - - ------ - -0 (ii) - - - -- - - -- - - -- - - - -- - - -0 0 0 0 0 -0 216,491 4 MICHAEL LAYMAN 36,281 0 295,208 42,436 0 0 (i) 0 SVP, GOV'T RELATIONS AND PUBLIC AFFA - -0 (ii) ----- - - -0 ----

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-0

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		sociation inc					
(i)	255,082	0	0	0	30,784	285,866	0
(ii)	0	0	0	0	0		0
(i)	271,988	0	0	0	0	271,988	0
(ii)	0	0	0	0	0		0
(i)	207,690	30,000	0	0	21,798	259,488	0
(ii)	0	0		0	0		0
(i)	153,530	30,000	0	0	54,396	237,926	0
(ii)	0	0	0	0	0		0
(i)	194,135	28,644	0	0	10,180	232,959	0
(ii)	0	0	0	0	0		0
(i)	158,788	45,000	0	0	24,302	228,090	0
(ii)	0	0	0	0	0		
(i)	176,173	0	0	0	0	176,173	0
(ii)	0	0	0	0	0		0
					5	Schedule J (F	orm 990) 2021
	Pi	age 3 ———					
							Page 3
		- 5h 6- 6h 7 -	and 8 and for Part	II. Also complete	this part for any	additional info	rmation.
Part I, lines 1a 1	n. 3. 4a. 4n 4c 5						
Part I, lines 1a, 1	<u>10, 3, 4a, 4b, 4c, 5</u>		planation				
	(i) (i) (i) (i) (i) (i) (i) (i) (i) (i)	(i) $\frac{271,988}{0}$ (ii) $\frac{271,988}{0}$ (ii) $\frac{207,690}{0}$ (ii) $\frac{207,690}{0}$ (ii) $\frac{153,530}{0}$ (ii) $\frac{153,530}{0}$ (ii) $\frac{1153,530}{0}$ (ii) $\frac{1153,530}{0}$ (ii) $\frac{1194,135}{0}$ (iii) $\frac{1194,135}{0}$ (iii) $\frac{1176,173}{0}$ (ii) $\frac{1176,173}{0}$ (ii) $\frac{1176,173}{0}$ (ii) $\frac{1176,173}{0}$ (ii) $\frac{1176,173}{0}$ (iii) $\frac{1176,173}{0}$ (iii) $\frac{1176,173}{0}$ (iii) $\frac{1176,173}{0}$ (iii) $\frac{1176,173}{0}$	(i) $$ $$ (i) $-271,988$ 0 (ii) $-271,988$ 0 (ii) $-271,988$ 0 (ii) $-207,690$ $-30,000$ (ii) $-207,690$ $-30,000$ (ii) $-153,530$ $-30,000$ (ii) $-153,530$ $-30,000$ (ii) $-153,530$ $-30,000$ (ii) $-153,530$ $-30,000$ (ii) $-194,135$ $-28,644$ (iii) $-158,788$ $-45,000$ (iii) $-176,173$ 0 (iii) $-176,173$ 0	(i) $-271,988$ 0 0 (i) $-271,988$ 0 0 (i) $-271,988$ 0 0 (i) $-207,690$ $30,000$ 0 (i) $-207,690$ $30,000$ 0 (i) $-153,530$ $30,000$ 0 (i) $-153,530$ $30,000$ 0 (ii) $-153,530$ $30,000$ 0 (ii) $-158,788$ $-28,644$ 0 (ii) $-158,788$ $-45,000$ 0 (ii) $-158,788$ $-45,000$ 0 (ii) $-176,173$ 0 0 (iii) $-176,173$ 0 0 (iii) $-176,173$ 0 0 (iii) $-176,173$ 0 0 (iii) -10 -10 0 (iii) -10 0 0 (iii) -10 0 0 (iii) -10 0 0 0 0	(i) $$	(i) $$	(i)

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(Form 990) Department of the Trea	easury		Complete to provide information for responses to specific que Form 990 or 990-EZ or to provide any additional informa Attach to Form 990 or 990-EZ.	estions on ation.	2021 Open to Public		
Internal Revenue Serv Name of the org			► Go to <u>www.irs.gov/Form990</u> for the latest information		Inspection ification number		
Name of the org			ON	Employer identi 36-6108621	fication number		
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Return Reference			Explanation				
FORM 990, PART VI, SECTION A, LINE 1A	COMM CHAIR FORUM THE AU FULL E POWE CORPO	MITTEE CON RS ELIGIBLE JM, THE CHA AUTHORITY BOARD MEI ERS SPECIF PORATION A	CUTIVE COMMITTEE THAT MEETS THREE TIMES A YEAR: FEBRI INSISTS OF THE BOARD CHAIR (WHO ALSO CHAIRS THE COMM LE TO SERVE, THE VICE CHAIR, THE TREASURER, THE SECRET/ HAIR OF THE FRANCHISEE FORUM, AND THE CHAIR OF THE SUF Y OF THE FULL BOARD IN THE MANAGEMENT OF THE ASSOCIAT EETINGS; EXCEPT THAT THE EXECUTIVE COMMITTEE HAS NO A FICALLY RESERVED FOR THE BOARD BY OPERATION OF THE II ACT, NOR BY BOARD RESOLUTION. ADDITIONALLY, THE EXECU IS SPECIFIC POLICY OR RESOLUTION PREVIOUSLY ADOPTED BY	1ITTEE), THE TWO M ARY, THE CHAIR OF PPLIER FORUM. THE TION DURING THE P AUTHORITY REGARI ILLINOIS NOT-FOR-P JTIVE COMMITTEE M	OST RECENT PAST THE FRANCHISOR E COMMITTEE HAS PERIODS BETWEEN DING ACTS OR PROFIT		
FORM 990, PART VI, SECTION A, LINE 3	-		TION UTILIZED MIKE WILLIAMS AND ASSOCIATES, A THIRD PART AL OFFICER FOR THE TAX YEAR.	IY, TO PERFORM TH	E DUTIES OF THE		
FORM 990, PART VI, SECTION A, LINE 6	FRANC THAT S THE C OF FR ADVIS IS ELIC NATIO SINGL AGREE REPRE SERVIT CONTI EMPLO	ICHISOR OF SATISFACT CONTINUING RANCHISEE SORY COUN IGIBLE TO B DNAL OR RE LE OR MULT EMENT IN E EESENTATIV ICES TO ME TINUING SAT OYEE OF A	ATEGORIES OF MEMBERSHIP: FRANCHISOR MEMBER: ANY COI R SUB-FRANCHISOR IN THE UNITED STATES OF AMERICA OR C TORILY DEMONSTRATES AN INTENTION TO ENGAGE IN FRANCH IG SATISFACTION OF THIS CATEGORY'S REQUIREMENTS. FRAN E MEMBERS. (1) A FRANCHISEE ORGANIZATION MEMBER IS AN' NCIL COMPOSED PRIMARILY OF FRANCHISEES AND RECOGNIZ BE A FRANCHISEE ORGANIZATION MEMBER. A FRANCHISEE OF EGIONAL ASSOCIATION OR ADVISORY COUNCIL OF FRANCHISE TIUNIT FRANCHISEE OPERATING HIS OR HER BUSINESS PURS EFFECT WITH A FRANCHISOR (INCLUDING AREA DEVELOPERS VES). SUPPLIER MEMBER: ANY FIRM, PARTNERSHIP OR COMPA IEMBERS OF THE ASSOCIATION IS ELIGIBLE TO BE A SUPPLIER ATISFACTION OF THE REQUIREMENTS SET FORTH IN THE BYLA A FRANCHISOR MEMBER, FRANCHISEE MEMBER, OR SUPPLIER INITY MEMBER.	DNE OR MORE OTHE HISING AS A FRANCI NCHISEE MEMBER: T Y BONA FIDE ASSOC ZED OR DESIGNATE RGANIZATION MEMB EES. (2) A FRANCHIS SUANT TO A FRANCHIS ANY THAT SUPPLIES MEMBER, SUBJECT WS. EMPLOYEE AFF R MEMBER IS ELIGIB	ER COUNTRIES, OR HISOR, SUBJECT TO THERE ARE 2 TYPES CIATION OR D BY A FRANCHISOR BER MAY BE A SEE MEMBER IS ANY HISE OR SIMILAR GENTS AND AREA S GOODS OR T TO THE FINITY MEMBER: ANY BLE TO BE AN		
FORM 990, PART VI, SECTION A, LINE 7A	WHICH TO SE CURRE THE M TO SE DIREC OF THI DIREC REGUI BY THI SECRE NOMIN COMM	H CONSIST ERVE AS A M RENT CHAIR MOST RECE ERVE AS A M CTORS SHA HE NOMINAT CTORS: (I) C JLAR FALL M HE BOARD C RETARY, TRE NATING CO MITTEE SHA I AND EXIST	ON'S BOARD OF DIRECTORS IS SELECTED WITH THE ASSISTAN TS OF THE TWO MOST RECENT PAST CHAIRS OF THE BOARD C MEMBER OF THE NOMINATING COMMITTEE, THE CURRENT CH R OF THE DIVERSITY INSTITUTE, THE CURRENT CHAIR OF THE ENT PAST CHAIRS OF THE FRANCHISOR FORUM AND THE FRAN MEMBER OF THE NOMINATING COMMITTEE. THE MOST RECEN ALL SERVE AS CHAIR, AND THE CHAIR OF THE BOARD OF DIRE TING COMMITTEE. IT IS THE DUTY OF THE NOMINATING COMM CANDIDATES FOR THE OFFICE OF DIRECTOR TO BE ELECTED I MEETING AND (II) CANDIDATES FOR THE FOLLOWING OFFICER OF DIRECTORS AT ITS REGULAR FALL MEETING: CHAIR, FIRST EASURER AND ASSISTANT TREASURER, IF THE BOARD OF DIR DMMITTEE TO SLATE A CANDIDATE FOR THE OFFICE OF ASSIST ALL NOMINATE A NUMBER OF CANDIDATES FOR THE BOARD OI TING VACANCIES ON THE BOARD OF DIRECTORS AND ALL VAC. NEXT ANNUAL MEETING OF THE ASSOCIATION.	DF DIRECTORS ELIG HAIR OF THE BOARD WOMEN'S FRANCH NCHISEE FORUM EL NT PAST CHAIR OF T CTORS SHALL SERV MITTEE TO PROPOSE BY THE BOARD OF I RS OF THE ASSOCIAT VICE CHAIR, SECON RECTORS HAS NOTIF TANT TREASURER. T OF DIRECTORS SUFF	BIBLE AND WILLING OF DIRECTORS, THE ISE COMMITTEE, AND LIGIBLE AND WILLING HE BOARD OF VE AS VICE CHAIR, E TO THE BOARD OF DIRECTORS AT ITS TION TO BE ELECTED ND VICE CHAIR, FIED THE FIED THE FIED THE FIENT TO FILL ALL		
FORM 990, PART VI, SECTION B, LINE 11B			NCIAL OFFICER REVIEWED THE FORM 990 BEFORE IT WAS FIL				
FORM 990, PART VI, SECTION B, LINE 15			ATION OF THE PRESIDENT/CEO IS REVIEWED BY THE ORGANIZ IE COMPENSATION OF OTHER OFFICERS AND KEY EMPLOYEES				
FORM 990, PART VI, SECTION C, LINE 19	COPIE	S OF ALL C	GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE P	ROVIDED UPON RE	QUEST.		
FORM 990, PART IX,	OTHE	R IFA OUTS	SIDE SERVICES 7,215,558.				

FORM 990, PART XII, LINE 2C:

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

Cat. No. 51056K

Schedule O (Form 990) 2021

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Additional Data

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International Franchise Association Inc - Full Filing- Nonprofit Explorer - ProPublica

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(Form 990)			-	zations a					-					20	21	
(10111330)	Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35 Attach to Form 990.									or 37.			1	ZU	21	
Department of the Treasury		► Go to <u>ww</u>	<u>vw.irs.gov/</u>	Form990 for i			e latest i	nformati	on.					oen to Inspe		С
Internal Revenue Service Name of the organization									Er	nployer id	lentificat	ion nu			LIUII	
INTERNATIONAL FRANCHISE ASSOCIA	ATION									-6108621						
Part I Identification	of Disregarded Ent	ities Complete	if the orga	nization answ	arad "Vac	" on Forr	m 990 P:	art IV lir		0100021						
	(a)		in the orga	(b)			(c)	, in e i v, in	(d)		(e)			(f)		
Name, address, and E	IN (if applicable) of disrega	rded entity		Primary ac	ivity	Legal dor	nicile (state In country)	Tota	income		year assets		Di	irect con entit		
						_										
												_				
										_		_				
	f Related Tax-Exen		ons. Comp	ete if the orga	anization	answere	d "Yes" o	n Form 9	990, Par	IV, line	34 becau	ıse it h	ad or	ne or r	nore	
	pt organizations duri	ng the tax year.		(b)		(c)		(d)		(e)			(f)		(9	g)
Name, address, and I	EIN of related organization		Prim	ary activity	or foreig	nicile (state In country)	Exempt	Code secti	on Publ	ic charity st ction 501(c	atus)(3))	Direct e	ntity	ling	(13) co	n 512(b) ontrolled tity?
															Yes	No
(1)IFA FOUNDATION 1900 K STREET NW 700			EDUCATIO	N IN THE E INDUSTRY		IL	501(C)(3)	LINE	/					Yes	
WASHINGTON, DC 20006 52-1358631																
(2)INTERNATIONAL FRANCHISE ASS 1900 K STREET NW 700	OCIATION FRANCHISING PA	AC INC	POLITICAL			DC	527								Yes	
WASHINGTON, DC 20006			contraction													
54-2060982																1
For Paperwork Reduction Act	Notice, see the Instr	uctions for Form	990.		Ca	t. No. 501	35Y				S	chedul	e R (Form 9	90) 20)21
		Pag	je 2													
Schedule R (Form 990) 2021															Pag	je 2
Part III Identification o	f Related Organiza	tions Taxable a	s a Partn	ership. Comp	lete if th	e organiz	ation and	wered "	Yes" on	Form 990), Part IV	, line 3	34, be	ecause		-
	ed organizations trea															
Name, addre	a) ss, and EIN of ganization	(b) Primar			(e) Predom	inant S		(g) Share of	(I Disprop	tionate	(i) Code V-U		(j) Genera manac	al or	Perce	k) entage ership
Telated of	ganization	activit	y domici (state foreigi	or entity	income(r unrela excluded f	ted, i	ncome	end-of- year assets	alloca	10115 :	amount i box 20 o Schedule F	of	partne		Owne	:isilip
			countr		under se 512-5	ections					(Form 106					
									Yes	No		Y	es	No		
													-		-	
								ſ		_						_
			_										\dashv			
	f Related Organiza ne or more related or							zation a	nswered	"Yes" on	Form 99	0, Par	c IV, I	line 34		
(a) Name, address, and EI		(b)		(c)		(d) Direct contro		(e) of entity	(f) Share of t	otal Chr.	(g) e of end-of-		(h) ercenta	200	(i Section	i) 512(b)
related organization		Primary activit	· 7	Legal domicile (state or foreig		entity	(C cor	or entity p, S corp, trust)	incom	2	year year assets	0	wnersł	hip	(13) co	i 512(D) introlled ity?
		I	I 		I		I	,		I		I				

	Ì	country)	Í.	ĺ		1	Ì	Yes	No
(1)INSTITUTE OF CERTIFIED EXECUTIVES INC	CERTIFICATION PROGRAM	DC	IFA	с	611,484	116,703	100.000 %	Yes	
1900 K STREET NW 700 WASHINGTON, DC 20006 03-0407010									L
Schedule R (Form 990) 2021									

"

Page **3**

No

No No

No

No No No No No No

No

No No No

No No

	Page 3		-
Sche	lule R (Form 990) 2021		Pag
Pa	rt V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.		
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	Yes
b	Gift, grant, or capital contribution to related organization(s)	1b	
с	Gift, grant, or capital contribution from related organization(s)	1c	
d	Loans or loan guarantees to or for related organization(s)	1d	Yes
е	Loans or loan guarantees by related organization(s)	1e	
f	Dividends from related organization(s)	1f	
g	Sale of assets to related organization(s)	1g	
h	Purchase of assets from related organization(s)	1h	
i	Exchange of assets with related organization(s)	1 i	
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	
I	Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes
o	Sharing of paid employees with related organization(s)	10	
р	Reimbursement paid to related organization(s) for expenses	1p	
q	Reimbursement paid by related organization(s) for expenses	1q	
r	Other transfer of cash or property to related organization(s)	1r	
s	Other transfer of cash or property from related organization(s)	1s	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		
	(a) (b) (c) (d) Name of related encapitation Amount involved Mathed of determining am	ount i	involved

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved			
(1)IFA FOUNDATION	D	486,449	BASED ON AMOUNTS INCURRED			
(2)FRANPAC	L	631,169	FUNDS TRANSFERRED UNDER FEC RULES			
(3)IFA FOUNDATION	Ν	29,120	BASED ON USAGE			
(4)IFA FOUNDATION	0	364,338	SERVICES PERFORMED			
			Schodulo B (Form 000) 2021			

Schedule R (Form 990) 2021

Schedule R	(Form	990)	2021
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Page **4** 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. (d) Predominant income (related, unrelated, excluded from tax under (b) Primary activity (c) Legal domicile (f) Share of total (h) Disproprtionate allocations? (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) (j) General or managing partner? (k) Percentage ownership (a) Name, address, and EIN of entity (e) Are all partners section (g) Share of end-of-year assets (state or foreign country) 501(c)(3) organizations? income tax under sections 512-514) Yes No Yes No Yes No

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			Page 5 -									
edule R (Form 990) 2021												Page
art VII Supplemental Info	ormation											rage
Provide additional infor		es to questic	ons on Sche	dule R. See in	structions.							
Return Reference						Ex	planation					
										Schedu		

Additional Data

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