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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning 11-01-2024 , and ending 10-31-2025

B Check if applicable:
- ☑ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
INTERNATIONAL FRANCHISE ASSOCIATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
1201 NY AVENUE NW 300A

City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 20005

D Employer identification number
36-6108621

E Telephone number
(202) 628-8000

G Gross receipts $ 26,871,717

F Name and address of principal officer:
AMY BROWN
1201 NY AVENUE NW 300A
WASHINGTON, DC 20005

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.

H(c) Group exemption number

I Tax-exempt status: ☐ 501(c)(3) ☑ 501(c) (6) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.FRANCHISE.ORG

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 1960

M State of legal domicile: IL

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
PROTECTS, ENHANCES AND PROMOTES FRANCHISING.

2 Check this box ☐

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	67
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	67
5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	**5**	60
6	Total number of volunteers (estimate if necessary)	**6**	74
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	2,962,810
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	**7b**	20,208

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	0	0
9	Program service revenue (Part VIII, line 2g)	24,206,729	25,950,933
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,583,741	833,135
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,968	54,336
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	25,793,438	26,838,404
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,000	703,885
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	10,209,229	12,465,230
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) 0		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	14,445,148	15,614,686
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	24,655,377	28,783,801
19	Revenue less expenses. Subtract line 18 from line 12	1,138,061	-1,945,397

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	28,715,260	54,610,942
21	Total liabilities (Part X, line 26)	10,310,326	36,479,992
22	Net assets or fund balances. Subtract line 21 from line 20	18,404,934	18,130,950

Part II Signature Block

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

Sign Here	Signature of officer AMY BROWN CHIEF FINANCIAL OFFICER Type or print name and title	2026-06-23 Date

Paid Preparer Use Only				
Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN P00288314
Firm's name GELMAN ROSENBERG & FREEDMAN			Firm's EIN 52-1392008	
Firm's address 4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 208142930			Phone no. (301) 951-9090	

May the IRS discuss this return with the preparer shown above? See Instructions. . . . . ☑ **Yes** ☐ **No**

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form **990** (2024)

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

IFA MISSION: TO PROTECT, ENHANCE AND PROMOTE FRANCHISING.IFA VISION: BE THE PREEMINENT VOICE AND ACKNOWLEDGED LEADER FOR FRANCHISING WORLDWIDE.IFA VALUES: INTEGRITY, RESPECT, TRUST, EXCELLENCE, DIVERSITYIFA STRATEGIC PRIORITIES: GOVERNMENT RELATIONS, PUBLIC RELATIONS, EDUCATION AND PROFESSIONAL DEVELOPMENT.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ including grants of $) (Revenue $)

THE PROGRAM AND CONFERENCE DEPARTMENT IS RESPONSIBLE FOR PLANNING AND ORGANIZING TRAINING PROGRAMS AND THE ANNUAL CONVENTION.

4b (Code:) (Expenses $ including grants of $) (Revenue $)

THE PUBLICATION DEPARTMENT PROVIDES PUBLICATIONS PROMOTING FRANCHISING TO SERVICE MEMBERS.

4c (Code:) (Expenses $ including grants of $) (Revenue $)

THE GOVERNMENT RELATIONS DEPARTMENT FUNCTIONS TO INFORM MEMBERS ON LEGAL AND LEGISLATIVE MATTERS WHICH WOULD IMPACT FRANCHISING AND CONDUCTS RESEARCH FOR MEMBERS.

4d Other program services (Describe in Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses**

Part IV **Checklist of Required Schedules**

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	**1**		No
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions. . . .	**2**		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	**3**	Yes	
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	**4**		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III* . .	**5**	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? *If "Yes," complete Schedule D,* Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D,* Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? *If "Yes," complete Schedule D, Part V*	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.			
a	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	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d	Yes	
e	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		No
12a	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? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I.* See instructions.	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, 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	Yes	

Part 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? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			

c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L,* Part I	25a		
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? *If "Yes," complete Schedule L,* Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L,* 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):			
a	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
c	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? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b	Yes	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		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	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	95		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	60		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a		Yes	
b	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	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				

See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).

5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		**5b**		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit 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).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		**7a**		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 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**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		**7f**		No
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.**				
a	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:				
a	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:				
a	Gross income from members or shareholders	**11a**			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	**11b**			
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.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O.		**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**			
c	Enter the amount of reserves on hand	**13c**			
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*		**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? If "Yes," see the instructions and file Form 4720, Schedule N.		**15**		No
16	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, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.		**17**		

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.*

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

Section A. Governing Body and Management

		Yes	No

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	**1a**	67		
	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**	67		
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:				
a	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? *If "Yes," provide the names and addresses in Schedule O*	**9**			No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed

18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
AMY BROWN CFO 1201 NY AVE NW STE 300A WASHINGTON, DC 20005 (202) 628-8000

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- 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 for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARY THOMPSON CHAIR, IFA BOARD	0.30	X		X				0	0	0
(2) SAM BALLAS VICE CHAIR, IFA BOARD	0.30	X		X				0	0	0
(3) STEVE HOCKETT IMMEDIATE PAST CHAIR, IFA BOARD	0.30	X		X				0	0	0
(4) GARY ROBINS SECOND VICE CHAIR, IFA BOARD	0.30	X		X				0	0	0
(5) TUSHAAR AGRAWAL MEMBER	0.30	X						0	0	0
(6) JERRY AKERS MEMBER	0.30	X						0	0	0
(7) TIFFANY ATWELL MEMBER	0.30	X						0	0	0
(8) TOM BABER MEMBER	0.30	X						0	0	0
(9) MARCUS BANKS MEMBER	0.30	X						0	0	0
(10) ROB BRANCA MEMBER & CHAIR, FRANCHISEE FORUM	0.30	X						0	0	0
(11) MITCH COHEN MEMBER	0.30	X						0	0	0
(12) ASHLEY CONEFF MEMBER	0.30	X						0	0	0
(13) ADAM CONTOS MEMBER	0.30	X						0	0	0
(14) JOHN CRAWFORD MEMBER	0.30	X						0	0	0
(15) RANDY CROSS	0.30									

(15) RANDY CROSS MEMBER		X						0	0	0
(16) KIMBERLY CROWELL MEMBER	0.30	X						0	0	0
(17) STEVE DANON MEMBER	0.30	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) EMMA DICKISON MEMBER	0.30	X						0	0	0
(19) JAY DUKE MEMBER	0.30	X						0	0	0
(20) LYNETTE EADDY SMITH MEMBER	0.30	X						0	0	0
(21) CLINT EHLERS MEMBER	0.30	X						0	0	0
(22) TIM EVANKOVICH MEMBER	0.30	X						0	0	0
(23) SHANE EVANS MEMBER	0.30	X						0	0	0
(24) SEAN FALK MEMBER	0.30 0.30	X						0	0	0
(25) RON FELDMAN CHAIR, IFA FOUNDATION BOARD OF TRUSTEES	0.30 0.30	X						0	0	0
(26) KAREN FINBERG MEMBER	0.30	X						0	0	0
(27) ROCCO FIORENTINO MEMBER	0.30	X						0	0	0
(28) GREG FLYNN MEMBER	0.30	X						0	0	0
(29) ROBIN GAGNON MEMBER & CHAIR, FRANCHISOR FORUM	0.30	X						0	0	0
(30) NATE GARN MEMBER	0.30	X						0	0	0
(31) MICHAEL GONDA MEMBER (UNTIL 7/25)	0.30	X						0	0	0
(32) DANIEL HALPERN MEMBER	0.30	X						0	0	0
(33) DUSTIN HANSEN MEMBER	0.30	X						0	0	0
(34) JON HIXSON MEMBER	0.30	X						0	0	0
(35) HARVEY HOMSEY	0.30									

MEMBER	0.30	X						0	0	0
(36) EARSA JACKSON MEMBER	0.30	X						0	0	0
(37) TAMRA KENNEDY MEMBER	0.30 0.30	X						0	0	0
(38) JESSE KEYSER VICE CHAIR, FRANCHISEE FORUM	0.30	X						0	0	0
(39) ASLAM KHAN MEMBER	0.30	X						0	0	0
(40) LILLIAN KIRSTEIN MEMBER	0.30	X						0	0	0
(41) ROLF LUNDBERG MEMBER	0.30	X						0	0	0
(42) NED LYERLY MEMBER	0.30	X						0	0	0
(43) DENNIS MAPLE MEMBER (UNTIL 3/25)	0.30	X						0	0	0
(44) MARCIA MEAD CHAIR, SUPPLIER FORUM ADVISORY BOARD	0.30	X						0	0	0
(45) CATHERINE MONSON VICE CHAIR, IFA FOUNDATION BOARD OF TRUSTEES	0.30 1.30	X						0	0	0
(46) DAVE MORTENSEN MEMBER	0.30	X						0	0	0
(47) DAVID OSTROWE MEMBER	0.30	X						0	0	0
(48) CAROLINE OYLER MEMBER	0.30	X						0	0	0
(49) SARAH POWELL MEMBER	0.30	X						0	0	0
(50) TODD RECKNAGEL MEMBER	0.30	X						0	0	0
(51) LAURA ROBERTS MEMBER	0.30	X						0	0	0
(52) MEG ROBERTS MEMBER	0.30	X						0	0	0
(53) AL RODRIGUEZ MEMBER	0.30	X						0	0	0
(54) AZIM SAJU MEMBER	0.30	X						0	0	0
(55) JYOTI SAROLIA MEMBER	0.30	X						0	0	0
(56) KAREN SATTERLEE MEMBER	0.30 0.30	X						0	0	0
(57) HEIDI SCHAUER MEMBER	0.30	X						0	0	0
(58) ABBY SCHMIDT VICE CHAIR, SUPPLIER FORUM	0.30	X						0	0	0
(59) MICHAEL SEID MEMBER	0.30	X						0	0	0
(60) STEPHEN SHIELDS MEMBER	0.30	X						0	0	0
(61) OMAR SIMMONS MEMBER	0.30 0.30	X						0	0	0
(62) CHRISTINE SON MEMBER	0.30	X						0	0	0
(63) JEFFREY SOPP MEMBER	0.30	X						0	0	0
(64) JOHN TEZA	0.30	X						0	0	0

MEMBER										
(65) CAROLYN THURSTON MEMBER	0.30	X						0	0	0
(66) CHARLES WATSON MEMBER	0.30	X						0	0	0
(67) STEVE WHITE MEMBER	0.30 0.30	X						0	0	0
(68) TIM WILLIAMS MEMBER (UNTIL 10/25)	0.30	X						0	0	0
(69) GABBY WONG MEMBER	0.30	X						0	0	0
(70) TONY ZACCARIO MEMBER	0.30	X						0	0	0
(71) MATTHEW HALLER PRESIDENT & CEO	35.00 10.00			X				1,009,480	0	135,947
(72) JENNIFER BRANDEEN COO	40.00			X				574,907	0	103,597
(73) MICHAEL LAYMAN CHIEF ADVOCACY OFFICER	40.00			X				493,898	0	66,072
(74) MICHAEL WILLIAMS CFO (THROUGH 2/25)	40.00			X				350,833	0	32,741
(75) AMY BROWN CFO (FROM 2/25)	40.00 2.00			X				276,166	0	10,261
(76) BILL HALL TREASURER (NON-VOTING)	0.30 0.30			X				0	0	0
(77) MICHAEL HANSCOM SVP, STATE & LOCAL GOVT RELATIONS	40.00					X		360,994	0	29,380
(78) ALAN CATLETT SVP, PROGRAMS & OPERATIONS	40.00					X		365,750	0	15,206
(79) SARAH DAVIES VP, GOVERNMENT RELATIONS & GENERAL COUNSEL	40.00 5.00					X		324,013	0	29,582
(80) PAUL ROCCHIO SVP, DEVELOPMENT & MEMBER SVCS	40.00					X		295,972	0	53,051
(81) ERICA FARAGE SVP, ADVOCACY & POLITICAL AFFAIRS	40.00					X		312,333	0	19,929
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A . .										
d Total (add lines 1b and 1c)								4,364,346	0	495,766

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 31

			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**		No
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? *If "Yes," complete Schedule J for such individual*	**4**	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?*If "Yes," complete Schedule J for such person*	**5**		No

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 address	(B) Description of services	(C) Compensation
MARY O'CONNOR & COMPANY 220 WEST RIVER DRIVE CHARLES, IL 60174	EVENT MANAGEMENT	791,417
TARGETED VICTORY LLC 2311 WILSON BLVD ARLINGTON, VA 22201	CONSULTING	559,409
LEADING AUTHORITIES 1725 I STREET NW	EVENT PRODUCTION	493,986

WASHINGTON, DC 20006		
MICHAEL WILLIAMS, 5307 WAPAKONETA ROAD BETHESDA, MD 20816	CONSULTING	350,833
VENABLE LLP 750 E PRATT STREET BALTIMORE, MD 21202	GENERAL COUNSEL	302,309

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization 32

Form **990** (2024)

Part VIII **Statement of Revenue**

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a :derated campaigns . .				
	1b :embership dues . .				
	1c :ndraising events . .				
	1d :lated organizations				
	1e :vernment grants (contributions)				
	1f All other contributions, gifts, grants, and similar amounts not included above				
	g Noncash contributions included in lines 1a - 1f:$ 1g				
	h **Total.** Add lines 1a-1f				
Program Service Revenue		Business Code			
	2a MEMBERSHIP DUES	900099	11,678,753	11,678,753	
	b PROGRAMS AND CONFERENCES	900099	9,877,187	9,877,187	
	c MARKETING AND PUBLIC RELATIONS	541800	2,966,501	7,767	2,958,734
	d ICFE INCOME	900099	1,157,584	1,157,584	
	e GOV. RELATIONS/PUBLIC AFFAIRS	900099	266,832	266,832	
	f All other program service revenue.		4,076		4,076
	g **Total.** Add lines 2a–2f.	25,950,933			
	3 Investment income (including dividends, interest, and other similar amounts)		800,397		800,397
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				

		(i) Real	(ii) Personal
6a Gross rents	6a		
b Less: rental expenses	6b		
c Rental income or (loss)	6c		
d Net rental income or (loss)			

Other Revenue

		(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory	7a	66,051					
b Less: cost or other basis and sales expenses	7b	13,154	20,159				
c Gain or (loss)	7c	52,897	-20,159				
d Net gain or (loss)				32,738			32,738
a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
		Business Code					
11a MISCELLANEOUS INCOME		900099		54,336			54,336
b							
c OtherRevenueMiscAmt							
d All other revenue							
e **Total.** Add lines 11a–11d				54,336			
12 Total revenue. See instructions				26,838,404	22,988,123	2,962,810	887,471

Form **990** (2024)

Part IX **Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	**(A)** Total expenses	**(B)** Program service expenses	**(C)** Management and general expenses	**(D)** Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	703,885			
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign 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	3,214,489			
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	7,628,212			
8 Pension plan accruals and contributions (include section	307,213			

	401(k) and 403(b) employer contributions)				
9	Other employee benefits	711,472			
10	Payroll taxes	603,844			
11	Fees for services (non-employees):				
a	Management				
b	Legal	588,040			
c	Accounting	88,163			
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	66,051			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,658,649			
12	Advertising and promotion	396,109			
13	Office expenses	362,352			
14	Information technology	519,312			
15	Royalties				
16	Occupancy	1,288,873			
17	Travel	586,252			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,340,196			
20	Interest	174,650			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,038,271			
23	Insurance	107,867			
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	PROFESSIONAL DUES & SUB	799,640			
b	MERCHANT FEES	447,951			
c	BAD DEBT	74,591			
d	TAXES	40,295			
e	All other expenses	37,424			
25	**Total functional expenses.** Add lines 1 through 24e	28,783,801			
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).				

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
Assets	1	Cash–non-interest-bearing		1	
	2	Savings and temporary cash investments	9,250,168	2	6,925,864
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	564,569	4	838,618
	5	Loans and other receivables from 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		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	1,716,980	9	2,054,493
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 5,077,418			

	b	Less: accumulated depreciation	10b	1,322,451	742,051	10c 3,754,967
	11	Investments—publicly traded securities			11,621,475	11 13,092,276
	12	Investments—other securities. See Part IV, line 11			3,695,529	12 4,224,617
	13	Investments—program-related. See Part IV, line 11				13
	14	Intangible assets				14 18,092,375
	15	Other assets. See Part IV, line 11			1,124,488	15 5,627,732
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)			28,715,260	16 54,610,942
Liabilities	17	Accounts payable and accrued expenses			2,226,494	17 8,468,190
	18	Grants payable				18
	19	Deferred revenue			6,953,570	19 10,018,411
	20	Tax-exempt bond liabilities				20
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				22
	23	Secured mortgages and notes payable to unrelated third parties				23 10,000,000
	24	Unsecured notes and loans payable to unrelated third parties				24
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D			1,130,262	25 7,993,391
	26	**Total liabilities.** Add lines 17 through 25			10,310,326	26 36,479,992
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☑ **and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions			18,404,934	27 16,585,216
	28	Net assets with donor restrictions			0	28 1,545,734
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ **and complete lines 29 through 33.**				
	29	Capital stock or trust principal, or current funds				29
	30	Paid-in or capital surplus, or land, building or equipment fund				30
	31	Retained earnings, endowment, accumulated income, or other funds				31
	32	Total net assets or fund balances			18,404,934	32 18,130,950
	33	Total liabilities and net assets/fund balances			28,715,260	33 54,610,942

Part XI **Reconcilliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	26,838,404
2	Total expenses (must equal Part IX, column (A), line 25)	2	28,783,801
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,945,397
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	18,404,934
5	Net unrealized gains (losses) on investments	5	1,671,413
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	18,130,950

Part XII **Financial Statements and Reporting**

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ 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
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			

	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	**2b**	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 ☑ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	**2c**	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	**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**		

Additional Data

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Software ID:

Software Version:

Form 990, Special Condition Description:

efile Public Visual Render | ObjectId: 20262174934930082 7 - Submission: 2026-06-23 | TIN: 36-6108621

SCHEDULE C (Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

OMB No. 1545-0047

2024

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization	Employer identification number
INTERNATIONAL FRANCHISE ASSOCIATION	36-6108621

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."	
2	Political campaign activity expenditures. See instructions ▶	$ 55,500
3	Volunteer hours for political campaign activities. See instructions	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955 ▶	$
2	Enter the amount of any excise tax incurred by organization managers under section 4955 ▶	$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV.	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶	$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶	$ 55,500
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶	$ 55,500
4	Did the filing organization file **Form 1120-POL** for this year?	☑ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1) REPUBLICAN STATE LEADERSHIP COMMITTEE	1201 F STREET NW STE 675 WASHINGTON, DC 20004	05-0532524	15,000	
(2) ELECTION FUND OF CRAIG COUGHLIN	12 NORTH STATE ROUTE 17 STE 320 PARAMUS, NJ 07652	01-0930328	5,000	
(3) DEMOCRATIC ASSEMBLY CAMPAIGN COMMITTEE	12 NORTH STATE ROUTE 17 STE 320 PARAMUS, NJ 07652	20-4354327	5,000	
(4) NEW JERSEY SENATE DEMOCRATIC MAJORITY	311 WEST HENRY STREET LINDEN, NJ 07036	27-4757751	5,000	
(5) SCUTARI FOR SENATE	12 CELLAR AVENUE CLARK, NJ 07066	22-3632480	5,000	
(6) ARIZONA SENATE VICTORY FUND	2211 EAST HIGHLAND SUITE 210 PHOENIX, AZ 85016	92-2191000	10,000	
(7) HOUSE VICTORY FUND	2211 EAST HIGHLAND SUITE 210 PHOENIX, AZ 85016	92-3834581	10,000	
(8) ACTBLUE	PO BOX 441146 SOMERVILLE, MA 02144	20-2517748	500	

Schedule C (Form 990) 2024 Page **2**

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-.		
i Subtract line 1f from line 1c. If zero or less, enter -0-.		

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.

j 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 Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2021	**(b)** 2022	**(c)** 2023	**(d)** 2024	**(e)** Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2024

Schedule C (Form 990) 2024 Page **3**

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	**(a)** Yes	**(a)** No	**(b)** Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			

b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
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			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did 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**	11,678,752
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	**2a**	1,450,000
b	Carryover from last year	**2b**	2,834,679
c	Total	**2c**	4,284,679
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	**3**	2,102,175
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?	**4**	2,182,504
5	Taxable amount of lobbying and political expenditures. See Instructions	**5**	

Part IV Supplemental Information

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

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

Schedule C (Form 990) 2024

Additional Data

Return to Form

Software ID:

Software Version:

efile Public Visual Render | ObjectId: 202621749349300827 - Submission: 2026-06-23 | TIN: 36-6108621

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
INTERNATIONAL FRANCHISE ASSOCIATION

Employer identification number
36-6108621

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

- ☐ Preservation of land for public use (e.g., recreation or education)
- ☐ Preservation of an historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

		Held at the End of the Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not 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, in Part XIII, the text of the footnote to its financial statements 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:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Schedule D (Form 990) (Rev. 1-2025) Page **2**

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- **a** ☐ Public exhibition
- **b** ☐ Scholarly research
- **c** ☐ Preservation for future generations
- **d** ☐ Loan or exchange programs
- **e** ☐ Other .....

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?. . . ☐ **Yes** ☐ **No**

Part IV Escrow and Custodial Arrangements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . . ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	**1c**	
d Additions during the year	**1d**	
e Distributions during the year	**1e**	
f Ending balance	**1f**	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . . ☐

Part V Endowment Funds.
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions . . .					
c Net investment earnings, gains, and losses					
d Grants or scholarships . . .					
e Other expenditures for facilities and programs . . .					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- **a** Board designated or quasi-endowment ▶ .....
- **b** Permanent endowment ▶ .....
- **c** Term endowment ▶ .....

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations . . . . . **3a(i)**		
(ii) Related organizations . . . . . **3a(ii)**		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? **3b**		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		2,711,480	37,922	2,673,558
d Equipment		1,842,782	1,197,336	645,446
e Other		523,156	87,193	435,963
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶				3,754,967

Schedule D (Form 990) (Rev. 1-2025)

Part VII Investments - Other Securities.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) ISHARES CORE S&P 500 ETF	2,111,194	F
(B) ISHARES RUSSELL MID CAP	2,113,423	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)*	4,224,617	

Part VIII Investments - Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-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 IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)DEFERRED COMPENSATION ASSETS	697,078
(2)OPERATING RIGHT-OF-USE ASSETS	4,774,911
(3)DUE FROM RELATED PARTY	155,743
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)*	5,627,732

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
DUE TO AFFILIATES	269,091

DEFERRED COMPENSATION OBLIGATION	697,078
OPERATING LEASE LIABILITIES	7,027,222
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	7,993,391

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) (Rev. 1-2025)

Page 4

Schedule D (Form 990) (Rev. 1-2025) Page **4**

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			**1**	28,443,766
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	**2a**	1,671,413		
b	Donated services and use of facilities	**2b**			
c	Recoveries of prior year grants	**2c**			
d	Other (Describe in Part XIII.)	**2d**			
e	Add lines **2a** through **2d**			**2e**	1,671,413
3	Subtract line **2e** from line **1**			**3**	26,772,353
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	**4a**	66,051		
b	Other (Describe in Part XIII.)	**4b**			
c	Add lines **4a** and **4b**			**4c**	66,051
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			**5**	26,838,404

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			**1**	28,717,750
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	**2a**			
b	Prior year adjustments	**2b**			
c	Other losses	**2c**			
d	Other (Describe in Part XIII.)	**2d**			
e	Add lines **2a** through **2d**			**2e**	0
3	Subtract line **2e** from line **1**			**3**	28,717,750
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	**4a**	66,051		
b	Other (Describe in Part XIII.)	**4b**			
c	Add lines **4a** and **4b**			**4c**	66,051
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			**5**	28,783,801

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation

Schedule D (Form 990) (Rev. 1-2025)

Additional Data

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Schedule I (Form 990)

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ **Attach to Form 990.**
▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
INTERNATIONAL FRANCHISE ASSOCIATION

Employer identification number
36-6108621

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) SEMAFOR 228 PARK AVE S NEW YORK, NY 10003			165,000	0			SPONSORSHIP OF PRINCIPALS LIVE EVENT
(2) AMERICAN COMPASS 300 INDEPENDENCE AVE SE WASHINGTON, DC 20003	84-4031579	501(C)(3)	50,000	0			GENERAL SUPPORT
(3) GEORGE WASHINGTON'S MOUNT VERNON LADIES' ASSOCIATION OF THE UNION 3200 MOUNT VERNON MEMORIAL HIGHWAY MOUNT VERNON, VA 22121	54-0564701	501(C)(3)	35,000	0			SPONSORSHIP OF SPIRIT OF MT. VERNON EVENT
(4) AMERICANS FOR TAX REFORM 722 12TH STREET NW WASHINGTON, DC 20005	52-1403587	501(C)(4)	25,000	0			GENERAL SUPPORT
(5) TASTE OF THE SOUTH PO BOX 2826 WASHINGTON, DC 20013	52-1343458	501(C)(3)	12,000	0			SPONSORSHIP
(6) ASAE 1575 I STREET NW WASHINGTON, DC 20005	53-0026940	501(C)(6)	7,000	0			SPONSORSHIP
(7) SAVE LOCAL RESTAURANTS 2350 KERNER BLVD STE 250 SAN RAFAEL, CA 94901	88-3957529	501(C)(4)	126,250	0			GENERAL SUPPORT
(8) COALITION TO SAVE LOCAL BUSINESS 1201 NEW YORK AVE NW STE 300A WASHINGTON, DC 20005	99-0935654	501(C)(4)	140,000	0			GENERAL SUPPORT
(9) INSTITUTE FOR THE AMERICAN WORKER 38274 ALFALFA COURT HAMILTON, VA 20158	46-3062521	501(C)(3)	25,000	0			GENERAL SUPPORT
(10) NATIONAL TAXPAYERS UNION 122 C STREET NW SUITE 700 WASHINGTON, DC 20001	52-1009116	501(C)(4)	25,000	0			GENERAL SUPPORT
(11) TAXPAYERS PROTECTION ALLIANCE 1101 14TH STREET NW SUITE 500 WASHINGTON, DC 20005	45-0702828	501(C)(4)	10,000	0			GENERAL SUPPORT
(12) ARIZONA SENATE VICTORY FUND 2211 EAST HIGHLAND SUITE 210 PHOENIX, AZ 85016	92-2191000	527	10,000	0			GENERAL SUPPORT
(13) HOUSE VICTORY FUND 2211 EAST HIGHLAND SUITE 210 PHOENIX, AZ 85016	92-3834581	527	10,000	0			GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 4

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 9

Part III Grants and Other Assistance to Domestic Individuals.

Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	THE ORGANIZATION DOES NOT MAKE GRANTS TO OTHER ORGANIZATIONS OR INDIVIDUALS. HOWEVER, IN CASES WHERE THE ORGANIZATION PROVIDES CONTRIBUTIONS DIRECTLY TO OTHER ENTITIES, IT MAINTAINS OVERSIGHT THROUGH THE FOLLOWING PROCEDURES: PRIOR TO DISBURSING ANY FUNDS, THE ORGANIZATION REQUIRES DOCUMENTATION SUBSTANTIATING THE NEED FOR SUCH ASSISTANCE. ALL DISBURSEMENTS ARE APPROVED BY THE DEPARTMENT HEAD, CONTROLLER AND CFO. IF THE AMOUNT IS OVER A CERTAIN THRESHOLD, IT IS ALSO APPROVED BY THE CEO AND BOARD TREASURER IN ACCORDANCE WITH THE ORGANIZATION'S FINANCIAL POLICIES.

Schedule I (Form 990) Rev. 1-2025

Additional Data

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Schedule J (Form 990)
(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
INTERNATIONAL FRANCHISE ASSOCIATION

Employer identification number
36-6108621

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax idemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☑ Compensation committee	☑ Written employment contract		
	☐ Independent compensation consultant	☐ Compensation survey or study		
	☐ Form 990 of other organizations	☐ Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	**5a**		
b	Any related organization?	**5b**		
	If "Yes," on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	**6a**		
b	Any related organization?	**6b**		
	If "Yes," on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	**8**		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50053T **Schedule J (Form 990) (Rev. 1-2025)**

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MATTHEW HALLER PRESIDENT & CEO	(i)	784,480	225,000	0	118,438	17,509	1,145,427	0
	(ii)	0	0	0	0	0	0	0
2 JENNIFER BRANDEEN COO	(i)	442,907	132,000	0	76,613	26,984	678,504	0
	(ii)	0	0	0	0	0	0	0
3 MICHAEL LAYMAN CHIEF ADVOCACY OFFICER	(i)	379,898	114,000	0	35,250	30,822	559,970	0
	(ii)	0	0	0	0	0	0	0
4 MICHAEL HANSCOM SVP, STATE & LOCAL GOVT RELATIONS	(i)	300,994	60,000	0	6,438	22,942	390,374	0
	(ii)	0	0	0	0	0	0	0
5 MICHAEL WILLIAMS CFO (THROUGH 2/25)	(i)	263,333	87,500	0	0	32,741	383,574	0
	(ii)	0	0	0	0	0	0	0

6 ALAN CATLETT SVP, PROGRAMS & OPERATIONS	(i)	282,500	83,250	0	13,630	1,576	380,956	0
	(ii)	0	0	0	0	0	0	0
7 SARAH DAVIES VP, GOVERNMENT RELATIONS & GENERAL C	(i)	289,013	35,000	0	12,413	17,169	353,595	0
	(ii)	0	0	0	0	0	0	0
8 PAUL ROCCHIO SVP, DEVELOPMENT & MEMBER SVCS	(i)	235,972	60,000	0	11,280	41,771	349,023	0
	(ii)	0	0	0	0	0	0	0
9 ERICA FARAGE SVP, ADVOCACY & POLITICAL AFFAIRS	(i)	262,333	50,000	0	9,439	10,490	332,262	0
	(ii)	0	0	0	0	0	0	0
10 AMY BROWN CFO (FROM 2/25)	(i)	214,166	62,000	0	8,878	1,383	286,427	0
	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) (Rev. 1-2025)

Page 3

Schedule J (Form 990) (Rev. 1-2025) Page **3**

Part III Supplemental Information

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

Return Reference	Explanation

Schedule J (Form 990) (Rev. 1-2025)

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SCHEDULE O
(Form 990)
(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
INTERNATIONAL FRANCHISE ASSOCIATION

Employer identification number
36-6108621

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 3	THE ORGANIZATION UTILIZED MIKE WILLIAMS AND ASSOCIATES, A THIRD-PARTY, TO PERFORM THE DUTIES OF CHIEF FINANCIAL OFFICER THROUGH FEBRUARY 28, 2025 WHEN THIS TRANSITIONED TO THE IN-HOUSE TEAM.
FORM 990, PART VI, SECTION A, LINE 6	THERE ARE 4 CATEGORIES OF MEMBERSHIP: FRANCHISOR MEMBER: ANY COMPANY ENGAGED IN FRANCHISING AS A FRANCHISOR OR SUB-FRANCHISOR IN THE UNITED STATES OF AMERICA OR ONE OR MORE OTHER COUNTRIES, OR THAT SATISFACTORILY DEMONSTRATES AN INTENTION TO ENGAGE IN FRANCHISING AS A FRACHISOR, SUBJECT TO THE CONTINUING SATISFACTION OF THIS CATEGORY'S REQUIREMENTS. FRANCHISEE MEMBER: THERE ARE 2 TYPES OF FRANCHISEE MEMBERS. (1) A FRANCHISEE ORGANIZATION MEMBER IS AN BONA FIDE ASSOCIATION OR ADVISORY COUNCIL COMPOSED PRIMARILY OF FRANCHISEES AND RECOGNIZED OR DESIGNATED BY A FRANCHISOR IS ELIGIBLE TO BE A FRANCHISEE ORGANIZATION MEMBER. A FRANCHISEE ORGANIZATION MEMBER MAY BE A NATIONAL OR REGIONAL ASSOCATION OR ADVISORY COUNCIL OF FRANCHISEE. (2) A FRANCHISEE MEMBER IS ANY SINGLE OR MULTIUNIT FRANCHISEE OPERATING HIS OR HER BUSINESS PURSUANT TO A FRANCHISE OR SIMILAR AGREEMENT IN EFFECT WITH A FRANCHISOR (INCLUDING AREA DEVELOPERS, DEVELOPMENT AGENTS AND AREA REPRESENTATIVES). SUPPLIER MEMBER: ANY FIRM, PARTNERSHIP OR COMPANY THAT SUPPLIES GOODS OR SERVICES TO MEMBERS OF THE ASSOCIATION IS ELIGIBLE TO BE A SUPPLIER MEMBER, SUBJECT TO THE CONTINUING SATISFACTION OF THE REQUIREMENTS SET FORTH IN THE BYLAWS. EMPLOYEE AFFINITY MEMBER: ANY EMPLOYEE OF A FRANCHISOR MEMBER, FRANCHISEE MEMBER, OR SUPPLIER MEMBER IS ELIGIBLE TO BE AN EMPLOYEE AFFINITY MEMBER.
FORM 990, PART VI, SECTION A, LINE 7A	THE ASSOCIATION'S BOARD OF DIRECTORS IS SELECTED WITH THE ASSISTANCE OF THE NOMINATING COMMITTEE, WHICH CONSISTS OF THE TWO MOST RECENT PAST CHAIRS OF THE BOARD OF DIRECTS ELIGIBLE AND WILLING TO SERVE AS A MEMBER OF THE NOMINATING COMMITTEE, THE CURRENT CHAIR OF THE BOARD OF DIRECTORS, THE CURRENT CHAIR OF THE WOMEN'S FRANCHISE COMMITTEE,A ND THE MOST RECENT PAST CHAIRS OF THE FRANCHISOR FORUM AND THE FRANCHISEE FORUM ELIGIBLE AND WILLING TO SERVE AS A MEMBER OF THE NOMINATING COMMITTEE. THE MOST RECENT PAST CHAIR OF THE BOARD OF DIRECTORS SHALL SERVE AS CHAIR, AND THE CHAIR OF THE BOARD OF DIRECTORS SHALL SERVE AS VICE CHAIR OF THE NOMINATING COMMITTEE. IT IS THE DUTY OF THE NOMINATING COMMITTEE TO PROPOSE TO THE BOARD OF DIRECTORS: (I) CANDIDATES FOR THE OFFICE OF DIRECTOR TO BE ELECTED BY THE BOARD OF DIRECTORS AT ITS REGULAR FALL MEETING AND (II) CANDIDATES FOR THE FOLLOWING OFFICERS OF THE ASSOCIATION TO BE ELECTED BY THE BOARD OF DIRECTORS AT ITS REGULAR FALL MEETING: CHAIR, FIRST VICE CHAIR, SECOND VICE CHAIR, SECRETARY, TREASURER AND ASSISTANT TREASURER, IF THE BOARD OF DIRECTORS HAS NOTIFIED THE NOMINATING COMMITTEE TO SLATE A CANDIDATE FOR THE OFFICE OF ASSISTANT TREASURER. THE NOMINATING COMMITTEE SHALL NOMINATE A NUMBER OF CANDIDATES FOR THE BOARD OF DIRECTORS SUFFICIENT TO FILL ALL THEN AND EXISTING VACANCIES ON THE BOARD OF DIRECTORS AND ALL VACANCIES THAT ARE PROJECTED TO OCCUR BY THE NEXT ANNUAL MEETING OF THE ASSOCIATION.
FORM 990, PART VI, SECTION B, LINE 11B	THE CHIEF FINANCIAL OFFICER REVIEWED THE FORM 990 AFTER PREPARATION BY AN OUTSIDE ACCOUNTING FIRM. A COPY OF THE 990 WAS PROVIDED TO THE BOARD FOR REVIEW AND APPROVAL PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 15A	THE COMPENSATION OF THE PRESIDENT/CEO IS REVIEWED AND APPROVED BY THE ORGANIZATION'S EXECUTIVE COMPENSATION COMMITTEE ANNUALLY. THE CONTRACT IS RE-NEGOTIATED EVERY 3 YEARS. THE COMPENSATION OF OTHER OFFICERS AND KEY EMPLOYEES IS REVIEWED BY THE PRESIDENT/CEO.
FORM 990, PART VI, SECTION C, LINE 19	COPIES OF ALL GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE PROVIDED UPON REQUEST.
FORM 990, PART VI, SECTION A, LINE 1A	IFA HAS AN EXECUTIVE COMMITTEE THAT MEETS THREE TIMES A YEAR: FEBRUARY, JUNE, AND SEPTEMBER. THE COMMITTEE CONSISTS OF THE BOARD CHAIR (WHO ALSO CHAIRS THE COMMITTEE), THE TWO MOST RECENT PAST CHAIRS ELIGIBLE TO SERVE, THE VICE CHAIR, THE TREASURER, THE SECRETARY, THE CHAIR OF THE FRANCHISOR FORUM, THE CHAIR OF THE FRANCHISEE FORUM, AND THE CHAIR OF THE SUPPLIER FORUM. THE COMMITTEE HAS THE AUTHORITY OF THE FULL BOARD IN THE MANAGEMENT OF THE ASSOCIATION DURING THE PERIODS BETWEEN FULL BOARD MEETINGS; EXCEPT THAT THE EXECUTIVE COMMITTEE HAS NO AUTHORITY REGARDING ACTS OR POWERS SPECIFICALLY RESERVED FOR THE BOARD BY OPERATION OF THE ILLINOIS NOT-FOR-PROFIT CORPORATION ACT, NOR BY BOARD RESOLUTION. ADDITIONALLY, THE EXECUTIVE COMMITTEE MAY NOT CONTRAVENE A SPECIFIC POLICY OR RESOLUTION PREVIOUSLY ADOPTED BY THE FULL BOARD.
FORM 990, PART IX, LINE 11G	CONSULTING 2,576,617. OTHER PROFESSIONAL FEES 1,082,032.

LINE 11G

Additional Data

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SCHEDULE R (Form 990)

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
INTERNATIONAL FRANCHISE ASSOCIATION

Employer identification number
36-6108621

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) FRANCHISE UPDATE INC 1201 NEW YORK AVE NW SUITE 300A WASHINGTON, DC 20005	EVENTS, PUBLICATIONS, AND MEDIA FOR FRANCHISE INDUSTRY	CA	0	0	IFA

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
(1)IFA FOUNDATION 1201 NEW YORK AVE NW SUITE 300A WASHINGTON, DC 20005 52-1358631	EDUCATION IN THE FRANCHISE INDUSTRY	IL	501(C)(3)	LINE 7	INTERNATIONAL FRANCHISE ASSOCIATION	Yes	
(2)INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING PAC INC 1201 NEW YORK AVE NW SUITE 300A WASHINGTON, DC 20005 54-2060982	POLITICAL ACTION COMMITTEE	DC	527		INTERNATIONAL FRANCHISE ASSOCIATION	Yes	
(3)COALITION TO SAVE LOCAL BUSINESS INC 1201 NEW YORK AVE NW SUITE 300A WASHINGTON, DC 20005 99-0935654	ADVOCACY	DE	501(C)(4)		INTERNATIONAL FRANCHISE ASSOCIATION	Yes	

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50135Y **Schedule R (Form 990) (Rev. 1-2025)**

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)

Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	Section 512(b)(13) controlled entity?	
								Yes	No

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

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

			Yes	No
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest, **(ii)**annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b		No
c	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1d		No
e	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o	Sharing of paid employees with related organization(s)	1o	Yes	
p	Reimbursement paid to related organization(s) for expenses	1p		No
q	Reimbursement paid by related organization(s) for expenses	1q	Yes	
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)IFA FOUNDATION	Q	2,048,000	BASED ON AMOUNTS INCURRED

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(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
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference	Explanation

Additional Data

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