									OMB No. 15	45-0047
Form 990			Return of C	Drganization I	Exempt	From I	ncor	ne Tax	664	0
Form	Ĵ	50	Under section 501(c),	•	•					IZ
			Under Section 501(c),	benefit trust or			soae (e	except black lung	Open to F	Public
		of the Treasury	The organization	may have to use a copy	•	,	oto ropor	ting roquiromonto	Inspecti	
		enue Service	ů	, .,				• •		on
А Г	orth		dar year, or tax year begi	-	/01, 2012 ,	anu enum	-	⊥ ∪ , D Employer identific	$/31, 20_{13}$	
B Ch	eck if ap	pplicable:	of organization SIFMA FOUN	NDATION FOR INV	ESTOR		'	Employer identific	auon number	
_	-	EDU	CATION (FIE), INC.							
	Addre chang	ge Doing	Business As					52-1087193		
	Name	e change Numb	er and street (or P.O. box if mail is	not delivered to street addre	ess)	Room/suite		E Telephone number		
	Initial	return 120	BROADWAY			35TH F	L.	(212) 313-1	251	
	Termi	inated City o	r town, state or country, and ZIP +	4						
	Amen		YORK, NY 10271				(Gross receipts \$	3,185	,206.
	Applic pendi	ration F Nar	ne and address of principal off	icer:MELANIE MORT	IMER		ŀ	Is this a group retur affiliates?	n for Yes	X No
		-	BROADWAY NEW YORK	, NY 10271			ŀ	f(b) Are all affiliates includes	uded? Yes	No
I .	Tax-ex	empt status:	X 501(c)(3) 501(c) () ┥ (insert no.)	4947(a)(1) c	or 527	7	If "No," attach a list.	(see instructions)	
J	Websi		IFMA.ORG/FOUNDATIC	DN			ŀ	I(C) Group exemption nu	ımber 🕨	
ĸ	Form o	of organization:	X Corporation Trust	Association Other	•	L Year of		n: 1976 M State		NY
Pa		Summary			-					
1 9										
	1		e the organization's mission of FOUNDATION IS DEI							
8			RSTANDING OF THE FI							
nan					5 FOR IN					
veri	-		NDS.(SEE SCHEDULE (
& Governance	2	Check this boy	v							1.0
<u>م</u>			ing members of the governing							13.
Activities	4	Number of inc	ependent voting members of	the governing body (Part	VI, line 1b)			4		13.
ti≺i	5	Total number	of individuals employed in cal	endar year 2012 (Part V,	line 2a)			5		10.
Ac			of volunteers (estimate if neces					6	3	,256.
	7a	Total gross un	related business revenue from	Part VIII, column (C), line	e 12			7a		0
			business taxable income from							0
								Prior Year	Current Ye	ear
æ	8	Contributions	and grants (Part VIII, line 1h)					3,034,300.	2,622	,226.
Revenue	9	Program servi	ce revenue (Part VIII, line 2g)					458,428.	421	,928.
eve	10	Investment ind	come (Part VIII, column (A), lin	es 3, 4, and 7d)	PUBLIC INS	SPECTION		110,897.	141	,052.
2			e (Part VIII, column (A), lines 5		a)			8,293.		0
			- add lines 8 through 11 (mus					3,611,918.	3,185	.206.
			nilar amounts paid (Part IX, col					8,000.		,633.
			o or for members (Part IX, colu					0		0
			r compensation, employee ben		lines 5-10)		1,448,519.	1,753	548	
Expenses					1,110,515.	1,755	<u>, , , , , , , , , , , , , , , , , , , </u>			
ben	IV a	Total fundraia	undraising fees (Part IX, columi ng expenses (Part IX, column (241 050					
Ä	D		ng expenses (Part IX, column ((D), line 25) ▶		·		950 075	1 010	E 2 1
	17		es (Part IX, column (A), lines 11	ia-iiu, iii-24i)				850,975.	1,012	·
			s. Add lines 13-17 (must equa					2,307,494.	2,968	·
<u>د</u> ۵	19	Kevenue less	expenses. Subtract line 18 fror	m line 12		<u></u>	D	1,304,424.		,494.
t Assets or d Balances	_						Beginni	ng of Current Year	End of Yea	
sset		•						5,457,608.	6,375	
лd В В			(Part X, line 26)					401,952.		,171.
Punc	22		fund balances. Subtract line 2	1 from line 20				5,055,656.	5,416	<u>,978.</u>
	rt II	Signature								
			declare that I have examined this laration of preparer (other than office						dge and belief, it i	s true,
Si	ign									
Here		Signature	e of officer					Date		
		Type or p	rint name and title							
		Print/Type pre	parer's name	Preparer's signature		Date		Check if	PTIN	
Paid		LATIRA KT	ELCZEWSKI	Jun Tent	Zml	9/10/2	014	self- employed	P007407	69
Prep	arer		GRANT THORNTO	N T.T.P	•	/ 1 U / Z			<u>5055558</u>	
Use	Only	Firm's name		NUE NEW YORK, 1	TV 10017	1057			-599-0100	
Max	the !!	Firm's address	s return with the preparer show							<u> </u>
					10)				X Yes	No
ISA	•		on Act Notice, see the separa	te instructions.					Form 990	(2012)
2E10	65 1.00	00								

Form 990 (2012)

Page 2

			t III	Х
Briefly descril ATTACHM	be the organization's mission	:		
ATTACHM				
			e year which were not listed on th	
•				Yes X
	ibe these new services on S		in here it conducts and means	
-		u	in how it conducts, any progra	
	ibe these changes on Scheo			
			of its three largest program serv	
		(4) organizations are required to r each program service reported.	report the amount of grants and	allocations to oth
the total expe	inses, and revenue, if any, to	each program service reported.		
a (Code:) (Expenses \$	and including grants of \$	202,633.) (Revenue \$	421,928.)
_ATTACHM		<u>338,328.</u> moldanig grante of ¢		421,928.
b (Code:) (Expenses \$	including grants of \$) (Revenue \$)
c (Code:) (Expenses \$	including grants of \$) (Revenue \$)
	/、 `		/、	,
	m services (Describe in Sche	-	•	
(Expenses \$	including gra		enue \$)	
e Total progra	n service expenses 🕨	2,338,328.		
				Form 990 (2

	990 (2012)		F	Page 3
Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		v
	candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			х
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	J		
U	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
-	complete Schedule D, Part III	8		х
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		Х
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		Х
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		X
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		X
С	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		X
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		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445	v	
40.	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"	120	Х	
h	complete Schedule D, Parts XI and XII	12a		<u> </u>
D	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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
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		X
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		X
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		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 9	990 (2012)		I	Page 4
Part	IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
25	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24 a	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 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) 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		X
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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		v
	entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	28a		х
a L	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	204		
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
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		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
~ .	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	24	х	
	or IV, and Part V, line 1.	34	A	v
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
07	related organization? If "Yes," complete Schedule R, Part V, line 2	36	X	
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,	27		v
20	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

SIFMA FOUNDATION FOR INVESTOR

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Par				
	Check if Schedule O contains a response to any question in this Part V			┙
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 13	-		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		37	
_	reportable gaming (gambling) winnings to prize winners?	1c	X	
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 10			v
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	2-		Х
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		
	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	30		
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	4a		x
h	account)?	40		
b	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
vu	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
-	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 and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	•		
•	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	9a		
	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 9	990 (2012) SIFMA FOUNDATION FOR INVESTOR 52-1087	193		Page 6
Part	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See in	struct	ions.	
	Check if Schedule O contains a response to any question in this Part VI		• •	Х
Sect	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
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		Х
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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
- 7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Х
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		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
0	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
Ũ	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	-	.)	·
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
Ň	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	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
Ň	rise to conflicts?	12b	Х	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
U	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by	17		
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
•	The organization's CEO, Executive Director, or top management official	15a	Х	
a h	Other officers or key employees of the organization	15a	X	
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130		
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
IUa	with a taxable entity during the year?	16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	Tua		
U	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?	16h		
Sect	ion C. Disclosure	100		
17	the design of the birds are a fifther France 2000 is not a first to be first by NV			
18	List the states with which a copy of this Form 990 is required to be filed \mathbf{P}_{-22}^{-22} . Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5			
10	<u>available for public inspection. Indicate how you made these available. Check all that apply.</u>		5)50	i iiy <i>)</i>
	X Own website Another's website X Upon request Other (explain in Schedule O)			
10		f into:	oct -	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o	inter	est p	oncy,
20	and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the	0		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ Mark Jeong 120 BROADWAY 35TH FL. NEW YORK, NY 10271 212-313-1251	ie		
JSA		Form	990	(2012)

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Part VII	Compensation of Officers, D	irectors, Trustees,	Key Employees,	Highest Compensated	Employees, and
	Independent Contractors				

Check if Schedule O contains a response to any question in this Part VII

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

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

					C)					
(A)	(B)	Position						(D)	(E)	(F)
Name and Title	Average hours per	(do not check more than one box, unless person is both an						Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any					or/trust		from	related	other
	hours for	9 5	Ē	Q	2	g ∓	Г	the	organizations	compensation from the
	related organizations	Individual trustee or director	nstitutional trustee	Officer	Key employee	ghes	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	below dotted	ual t	tiona	,	oldu	vee		()		and related
	line)	ruste	l tru		/ee	mpe				organizations
		ě	stee			Highest compensated employee				
						ă				
(1) RICHARD BRUECKNER	2.00									
CHAIR	+	x						0	0	0
(2) THOMAS GUBA	2.00									
TREASURER		Х						0	0	0
(3) BERNARD BEAL	1.00	-								
DIRECTOR		X						0	0	0
(4) TODD DIGANCI	1.00									
DIRECTOR	1 00	X						0	0	0
(5) G. DOUGLAS EDWARDS	1.00							0	0	0
DIRECTOR	1 00	X						0	0	0
(6) JOHN GIDMAN DIRECTOR	1.00	x						0	0	0
(7) JAY HERSHENSON	1.00	- 21						0	0	0
DIRECTOR		x						0	0	0
(8) NOE HINOJOSA, JR.	1.00									
DIRECTOR	+	x						0	0	0
(9) DONNA PETERMAN	1.00									
DIRECTOR		Х						0	0	0
(10)WARD RING	1.00	-								
DIRECTOR		X						0	0	0
(11) MATTHEW SCOGIN	1.00	-								
DIRECTOR		Х						0	0	0
(12) JOAN STEINBERG	1.00									2
DIRECTOR	1 00	X						0	0	0
(13) LAWRENCE THOMAS DIRECTOR	1.00	x						0	0	0
(14) ERIN BUDDE (THRU 5/2013)	1.00								0	0
DIRECTOR	+	x						0	0	0
21110101								0	0	0

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Page	8
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	(A) Name and title	(B) Average hours per week (list any hours for related	box, office	not ch unles r and	s pe I a d	ition more rson lirect	e than c is both or/trust	an ee)	(D) Reportable compensation from the organization	(E) Reportal compensatio related organizat (W-2/1099-	n from I ons	(F) Estimated amount of other compensation from the
		organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(** 2/1000		organization and related organizations
.5) MELANIE MORTIMER EXECUTIVE DIRECTOR	40.00			x				306,935.		0	39,32
6) MARIA SUGGETT ASSISTANT VICE PRESIDENT	40.00					х		108,442.		0	29,87
· —												
0	 Sub-total Total from continuation sheets to Part VII, Set Total (add lines 1b and 1c) 	ection A				• • •	· · ·		0 415,377. 415,377.		0	69,19 69,19
	Total number of individuals (including but not l reportable compensation from the organizatior	limited to tl		isteo				o re		\$100,000 c	-	
3	Did the organization list any former office											Yes I
4	employee on line 1a? <i>If "Yes," complete Schedu</i> For any individual listed on line 1a, is the sorganization and related organizations gre	sum of rep	ortab	le c	om	pen	satio	n ai	nd other compens	sation from	the	3
5	<i>individual</i> . Did any person listed on line 1a receive or	accrue coi	mpen	satio	n f	from	n any	un	related organization	on or indivi	dual	4 X
Se	for services rendered to the organization? If "Yest to the organization of the section B. Independent Contractors	es," comple	te Sch	nedu	le J	l for	such	per	son	<u></u>		5
1	Complete this table for your five highest com compensation from the organization. Report co year.											
	(A) Name and business add	ress							(B) Description of se	rvices	Co	(C) ompensation
	TTACHMENT 3											
<u>A'</u>												

Form	990	(201)	2)
1 01111	330	(201	<u></u>

Pa	rt VII	Statement of Revenue		ion in this Dort VIII			
		Check if Schedule O contains a res	sponse to any quest	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b	Federated campaigns 1 Membership dues 1					
	c d	Fundraising events 1 Related organizations 1	d 10,000.				
	e f	Government grants (contributions) 1 All other contributions, gifts, grants, and similar amounts not included above . 1					
	g h	Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f		2,622,226.			
Program Service Revenue	2a b c	SMG PROCESSING FEES SALE OF PROGRAM MATERIALS	Business Code 611710 611710	421,809. 119.	421,809. 119.		
rogram Se	d e f	All other program service revenue	-				
<u> </u>	<u>g</u> 3	Total. Add lines 2a-2f Investment income (including dividends, i	nterest, and	421,928.			
	4 5	other similar amounts) Income from investment of tax-exempt bo Royalties	nd proceeds	141,052. 0 0			141,052.
	6a b c	Gross rents					
	d 7a	Net rental income or (loss) Gross amount from sales of assets other than inventory		0			
	b c	Less: cost or other basis and sales expenses Gain or (loss)					
Other Revenue	d 8a	Net gain or (loss)		0			
Othe	b c	Less: direct expenses Net income or (loss) from fundraising even		0			
Ū	9a	Gross income from gaming activities. See Part IV, line 19					
	b c	Less: direct expenses Net income or (loss) from gaming activities		0			
	10a	Gross sales of inventory, less returns and allowances					
	b C	Less: cost of goods sold	b y► Business Code	0			
	11a						
	b						
	c d	All other revenue		0			
	е 12	Total revenue. See instructions		3,185,206.	421,928.		141,052.

SIFMA FOUNDATION FOR INVESTOR

BB, 9D, and 7 to or Part VIII. epenase generation of the statements and organizations in the United States. See Part IV, line 21. 202, 633. 202, 643 for for membrance for for for membrance for for membrane for many for for for for for membrance for for f	
Bb, 3b, and 10b of Part Vil. Total expenses Program serve pepsison Management pepsison Management personal accents 1 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16,	
organizations in the United States. See Part IV, line 21. 202, 633. 202, 633. 202, 633. 2 Grants and other assistance to individuals in the United States. See Part IV, line 21. 0 0 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, line 15 and 16. 0 0 4 Benefits paid to or for members	(D) Fundraising expenses
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	
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organizations and individuals outside individuals individuals outside individuals outside individuals outside individuals individuals outside individuals indiduals indiduals <thindid< td=""><td></td></thindid<>	
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9 Benefits paid to or for members 0 6 Compensation of current officers, directors, trustees, and key employees 358,897. 107,669. 143,559. 6 Compensation not included above, to disqualified persona described in sectina 4980((1)) and persona described in sectina 4980((3)). 972,066. 758,895. 57,101. 7 Other salaries and wages 972,066. 758,895. 57,101. 9 Person descributions 236,449. 162,363. 30,317. 9 Other employee benefits 0 316,340. 106,340. 100,219. 68,818. 12,850. 106,340. 9 Other employee benefits 0 8,120. 16,340. 100,219. 68,218. 12,850. 10,634. 100,219. 68,218. 12,050. 16,340. 100,219. 68,218. 12,050. 16,340. 100,219. 68,218. 10,634. 16,340. 1010,110. 16,340. 16,340. 16,340. 16,340. 100,110. 16,340 16,340 16,340.	
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b	
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d	
e All other expenses	
	3/1 05
 5 Total functional expenses. Add lines 1 through 24e 2,968,712. 2,338,328. 288,425. 6 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 	341,959

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SIFMA FOUNDATION FOR INVESTOR

Page 1	1
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	't X	Balance Sheet			Fage II
		Check if Schedule O contains a response to any question in this Par	t X		<u></u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	(
	2	Savings and temporary cash investments	1,731,857.	2	2,036,416.
	3	Pledges and grants receivable, net	496,200.	3	22,500
	4	Accounts receivable, net	21,199.	4	4,318
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
	_	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section	0	5	
	6	4958(f)(1)), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary	0	6	(
ts	7	organizations (see instructions). Complete Part II of Schedule L	0	7	
Assets	7	Notes and loans receivable, net	0	7 8	(
Ä	8	Inventories for sale or use Prepaid expenses and deferred charges	0	8 9	(
	9		0	9	
	10 a	Land, buildings, and equipment: cost or			
	h	other basis. Complete Part VI of Schedule D 10a 10b	0	10c	(
	11 11	Less: accumulated depreciation 10b 10b		11	4,311,915.
	12	Investments - publicly traded securities Investments - other securities. See Part IV, line 11		12	<u>, , , , , , , , , , , , , , , , , , , </u>
	13	Investments - program-related. See Part IV, line 11		12	(
	14			14	(
	15	Intangible assets Other assets. See Part IV, line 11		15	(
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	6,375,149.
	17	Accounts payable and accrued expenses		17	289,587.
	18	Grants payable		18	37,361.
	19	Deferred revenue		19	428,000.
	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 current and former officers, directors,	-		
lide		trustees, key employees, highest compensated employees, and			
Ľ		disqualified persons. Complete Part II of Schedule L	0	22	(
	23	Secured mortgages and notes payable to unrelated third parties		23	(
	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	32,061.	25	203,223.
	26	Total liabilities. Add lines 17 through 25	401,952.	26	958,171.
es		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	4,993,859.	27	5,191,978.
Bal	28	Temporarily restricted net assets	61,797.	28	225,000.
p	29	Permanently restricted net assets	0	29	(
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ΪÞ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Nei	33	Total net assets or fund balances	5,055,656.	33	5,416,978.
	34	Total liabilities and net assets/fund balances	5,457,608.	34	6,375,149.

Form 990 (2012)

SIFMA FOUNDATION	FOR	INVESTOR
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Form 9	90 (2012)				Pa	ge 12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,1	85,2	206.
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,9	68,7	712.
3	Revenue less expenses. Subtract line 2 from line 1	3		2	16,4	494.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5,0	55,6	556.
5	Net unrealized gains (losses) on investments	5		1	44,8	328.
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
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					
	33, column (B))	10		5,4	16,9	978.
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	in			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	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	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi					
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs	sight				
	of the audit, review, or compilation of its financial statements and selection of an independent account	•		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, e					
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	in			
	the Single Audit Act and OMB Circular A-133?			3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo	the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	0	-	3b		

SCHEDULE A

(Form	990	or	990-EZ))
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Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 000 or Form 000 E7 See congrate instructions

Department of the Treasury

OMB No. 1545-0047 20 2 Open to Public

Internal Re	venue Service	Allaci	1 to Form 990 of Form 990-	EZ. 🕨	- Jee 5	eparate	mstruct				spection	
Name of	the organization	SIFMA FOUNDATION	I FOR INVESTOR					Emplo	yer iden	tification n	umber	
EDUCAI	TION (FIE),									-108719	93	
Part I	Reason for	Public Charity Status	s (All organizations mu	ist con	nplete	e this pa	art.) Se	e instr	uctions			
The orga	anization is not a	a private foundation bee	cause it is: (For lines 1 th	rough	11, che	eck only	one bo	x.)				
1	A church, con	vention of churches, or	association of churches of	describ	ed in s	section	170(b)(1)(A)(i)	-			
2	A school desc	ribed in section 170(b)	(1)(A)(ii). (Attach Schedul	e E.)								
3	A hospital or a	a cooperative hospital s	ervice organization descri	ibed in	sectio	on 170(b	o)(1)(A)	(iii).				
4	A medical res	search organization op	erated in conjunction wi	th a h	nospita	l descr	ibed in	sectio	n 170(k	o)(1)(A)(ii	i i). Enter	the
	hospital's nam	e, city, and state:										
5	5 An organization operated for the benefit of a college or university owned or operated by a governmental unit describ											ed in
	section 170(b)(1)(A)(iv). (Complete F	Part II.)									
6	A federal, stat	e, or local government	or governmental unit des	cribed	in sect	tion 170)(b)(1)(/	A)(v).				
7	An organizatio	on that normally receive	es a substantial part of it	s supp	ort fro	om a go	vernme	ental ur	nit or fro	om the g	eneral p	ublic
	described in s	ection 170(b)(1)(A)(vi).	(Complete Part II.)									
8	A community t	trust described in secti	on 170(b)(1)(A)(vi). (Com	plete F	Part II.)							
9 X	An organizatio	on that normally receive	es: (1) more than 331/3%	6 of its	suppo	ort from	contrib	outions,	memb	ership fee	es, and g	ross
	receipts from	activities related to its	exempt functions - subj	ject to	certai	in exce	ptions,	and (2)	no mo	re than	331/3% c	of its
	support from	gross investment inco	ome and unrelated busi	ness t	axable	incom	e (less	sectio	n 511	tax) fron	n busine	sses
	acquired by th	e organization after Jur	ne 30, 1975. See section	509(a)(2) . ((Complet	te Part I	II.)				
10	An organizatio	on organized and opera	ted exclusively to test for	public	safety.	See se	ction 5	09(a)(4).			
11	An organizati	on organized and ope	rated exclusively for the	bene	fit of,	to perf	orm the	e funct	ions of	, or to c	arry out	the
	purposes of o	ne or more publicly su	apported organizations de	escribe	d in s	ection 8	509(a)(⁻	1) or se	ection 5	09(a)(2).	See sec	tion
	509 <u>(a)(</u> 3). Che	eck the box that describ	es the type of supporting	organ	ization	and co	mplete	lines 1	1e throu	ugh 11h.		
	a 🔄 Type I	b Type II	c Type III-Function	nally in	tegrate	ed	d	Type II	I-Non-fu	unctionall	y integrat	ted
е	By checking	this box, I certify that	the organization is not	contr	olled	directly	or ind	irectly	by one	or more	e disqual	ified
	persons other	than foundation mana	gers and other than one	or mo	re pub	olicly su	pported	d organ	izations	describ	ed in see	ction
	509(a)(1) or s	ection 509(a)(2).										
f	If the organiz	ation received a writte	n determination from the	e IRS	that it	is a T	уре I, Т	ype II,	or Typ	e III sup	porting	
	organization, o	check this box										
g	Since August	17, 2006, has the organ	nization accepted any gift	t or co	ntributi	ion from	n any of	the				
	following perse	ons?										
	(i) A person	who directly or indire	ectly controls, either alor	ne or t	ogethe	er with	person	s desc	ribed in	i (ii)	Yes	No
	and (iii) be	elow, the governing boo	dy of the supported organ	ization	?					11	g(i)	
	(ii) A family r	nember of a person des	scribed in (i) above?							11	g(ii)	
			on described in (i) or (ii) a							11	g(iii)	
h	Provide the fo	llowing information abo	ut the supported organization	ation(s)).							
(i) N	lame of supported	(ii) EIN	(iii) Type of organization		ls the zation in		ou notify		Is the		unt of mon	etary
	organization		(described on lines 1-9 above or IRC section	col. (i)	listed in		anization I. (i) of		zation in organized	s	upport	
			(see instructions))	your go docu	overning ment?		upport?		Ŭ.S.?			
				Yes	No	Yes	No	Yes	No			
(A)												
(~) 												
(B)												
(=)												
(C)												
. ,												
(D)												

Total

(E)

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012

Part II

Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support	, , ,			, piedee eemp	,	
	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6	Public support. Subtract line 5 from line 4.						
	tion B. Total Support	(-) 2008	(1) 2000	(-) 2010	(4) 2011	(2) 2012	(f) Tatal
_	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	,				12	
$\frac{13}{8}$	First five years. If the Form 990 is for organization, check this box and stop here	<u></u>					
	tion C. Computation of Public Sup		-	11 a a b u a a b u a a b b u a a b b b a b b b b b b b b b b		44	
14 15	Public support percentage for 2012 (li		•			14 15	<u>%</u> %
15	Public support percentage from 2011 331/3% support test - 2012. If the o						
104	this box and stop here. The organization	•					
h	331/3% support test - 2011. If the or						
	check this box and stop here. The orga	-					
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization	-					
	Part IV how the organization meets t					-	-
	organization			-	-		
b	10%-facts-and-circumstances test - 2						
	15 is 10% or more, and if the orga	-	-				
	Explain in Part IV how the organization						-
	supported organization						
18	Private foundation. If the organization						
	instructions						<u></u> ►□

Schedule A (Form 990 or 990-EZ) 2012

52-1087193

Schedule A (Form 990 or 990-EZ) 2012

Page 3

Schedule A	
Part III	Support Schedule for Organizations Described in Se

ection 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	4,077,103.	2,935,769.	2,439,523.	3,034,300.	2,622,226.	15,108,921
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	496,254.	515,483.	502,941.	458,428.	421,928.	2,395,034
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	4,573,357.	3,451,252.	2,942,464.	3,492,728.	3,044,154.	17,503,955
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b.						
8	Public support (Subtract line 7c from						
	line 6.)						17,503,955
Sec	tion B. Total Support	I					1,1000,100
	ndar year (or fiscal year beginning in) >	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	4,573,357.	3,451,252.	2,942,464.	3,492,728.	3,044,154.	17,503,955
	Gross income from interest, dividends,	1,575,557.	5,151,252.	2,912,101.	5,152,720.	5,011,151.	1,,505,755
	payments received on securities loans,						
	rents, royalties and income from similar	10,100	142 640	117 ((1	110 007	141 050	
h	sources Unrelated business taxable income (less	12,102.	143,640.	117,661.	110,897.	141,052.	525,352
	· ·						
	section 511 taxes) from businesses						
	section 511 taxes) from businesses acquired after June 30, 1975						
с	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	12,102.	143,640.	117,661.	110,897.	141,052.	525,35
с	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business	12,102.	143,640.	117,661.	110,897.	141,052.	525,35
с	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	12,102.	143,640.	117,661.	110,897.	141,052.	525,35
с	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	12,102.	143,640.	117,661.	110,897.	141,052.	525,35
с 11	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly	12,102.	143,640.	117,661.	110,897.	141,052.	525,35
с 11	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	12,102.	143,640.	117,661.	110,897.	141,052.	525,35
с 11	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or	12,102. 77,964.	143,640. 59,944.	117,661.	110,897.	141,052.	
с 11 12	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets			117,661.	110,897.	141,052.	
с 11 12	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1.			117,661.	110,897.	141,052.	137,90
c 11 12 13	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1 Total support. (Add lines 9, 10c, 11,	77,964. 4,663,423.	59,944. 3,654,836.	3,060,125.	3,603,625.	3,185,206.	137,90
c 11 12 13	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1. Total support. (Add lines 9, 10c, 11, and 12.)	77,964. 4,663,423. the organization	59,944. 3,654,836. 's first, second,	3,060,125. third, fourth, or	<u>3,603,625.</u> fifth tax year a:	3,185,206. s a section 501(137,90
c 111 12 13 14	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1. Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for	77,964. 4,663,423. the organization	59,944. 3,654,836. 's first, second,	3,060,125. third, fourth, or	<u>3,603,625.</u> fifth tax year a:	3,185,206. s a section 501(137,90 18,167,21 c)(3)
c 11 12 13 14 Sec	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1 Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here	77,964. 4,663,423. the organization port Percenta	59,944. 3,654,836. 's first, second, ge	3,060,125. third, fourth, or	3,603,625. fifth tax year a	3,185,206. s a section 501(137,90 18,167,21 c)(3) ▶
c 111 12 13 14 Sec 15	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1 Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sup	77,964. 4,663,423. the organization port Percenta , column (f) divide	59,944. 3,654,836. 's first, second, ge d by line 13, colum	3,060,125. third, fourth, or	3,603,625. fifth tax year a	3,185,206. s a section 501(137,90 18,167,21 c)(3) ▶ 96.35 %
c 11 12 13 14 <u>Sec</u> 15	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1. Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Supp Public support percentage for 2012 (line 8,	77,964. 4,663,423. the organization port Percenta column (f) divide edule A, Part III, lin	59,944. 3,654,836. 's first, second, ge d by line 13, colum e 15	3,060,125. third, fourth, or	3,603,625. fifth tax year a	3,185,206. s a section 501(15	137,90 18,167,21 c)(3) ▶ 96.35 %
c 11 12 13 14 <u>Sec</u> 15 16 Sec	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1 Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sup Public support percentage for 2012 (line 8, Public support percentage from 2011 Sche tion D. Computation of Investmer	77,964. 4,663,423. the organization port Percenta , column (f) divide idule A, Part III, linu t Income Percent	59,944. 3,654,836. 's first, second, ge d by line 13, colum e 15 centage	3,060,125. third, fourth, or	3,603,625. fifth tax year a	3,185,206. s a section 501(15	137,90 18,167,21 c)(3) ▶ 96.35% 96.64%
c 111 12 13 14 <u>Sec</u> 17	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1 Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sup Public support percentage for 2012 (line 8 Public support percentage from 2011 Sche tion D. Computation of Investmer Investment income percentage for 2012 (line	77,964. 4,663,423. the organization port Percenta , column (f) divide idule A, Part III, line the Income Percent ne 10c, column (f)	59,944. 3,654,836. 's first, second, 	3,060,125. third, fourth, or nn (f)) 3, column (f))	3,603,625. fifth tax year a	3,185,206. s a section 501(137,90 18,167,21 c)(3) 96.35% 96.64% 2.89%
c 111 12 13 14 <u>Sec</u> 15 16 17 18	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1 Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sup Public support percentage for 2012 (line 8, Public support percentage from 2011 Sche tion D. Computation of Investment Investment income percentage from 2012	77,964. 4,663,423. the organization p ort Percenta column (f) divide dule A, Part III, lin t Income Perc ne 10c, column (f Schedule A, Part I	59,944. 3,654,836. 's first, second, ge d by line 13, colum e 15. centage) divided by line 13 II, line 17	3,060,125. third, fourth, or nn (f)) 3, column (f))	<u>3,603,625.</u> fifth tax year a	3,185,206. s a section 501(15 16 17 18	137,90 18,167,21 c)(3) 96.35% 96.64% 2.89% 2.12%
c 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u> 17	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1. Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Supp Public support percentage for 2012 (line 8, Public support percentage for 2011 Sche tion D. Computation of Investment Investment income percentage for 2012 (line 331/3% support tests - 2012. If the org	77,964. 4,663,423. the organization port Percenta , column (f) divide adule A, Part III, line the 10c, column (f Schedule A, Part I ganization did no	59,944. 3,654,836. 's first, second, ge d by line 13, colum e 15. :entage) divided by line 13 II, line 17 t check the box	3,060,125. third, fourth, or nn (f)) 3, column (f)) on line 14, and	3,603,625. fifth tax year a	3,185,206. s a section 501(15 16 17 18 e than 331/3%, a	137,90 18,167,21 c)(3) 96.35% 96.64% 2.89% 2.12% and line
c 11 12 13 14 <u>Sec</u> 17 18 19 a	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1. Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here. tion C. Computation of Public Supp Public support percentage for 2012 (line 8, Public support percentage for 2011 Sche tion D. Computation of Investment Investment income percentage for 2012 (line 331/3% support tests - 2012. If the org 17 is not more than 331/3%, check th	77,964. 4,663,423. the organization port Percenta , column (f) divide idule A, Part III, line t Income Perc ne 10c, column (f Schedule A, Part I ganization did no is box and stop	59,944. 3,654,836. 's first, second, ge d by line 13, colume e 15. centage) divided by line 13 ll, line 17 t check the box here. The orga	3,060,125. third, fourth, or nn (f)) 3, column (f)) on line 14, and nization qualifies	3,603,625. fifth tax year a line 15 is more as a publicly s	3,185,206. s a section 501(15 16 17 18 e than 331/3%, a supported organiz	137,901 18,167,215 c)(3) 96.35% 96.64% 2.89% 2.12% and line zation ► X
c 11 12 13 14 <u>Sec</u> 17 18 19 a	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1. Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here. tion C. Computation of Public Supp Public support percentage for 2012 (line 8, Public support percentage for 2012 (line 8, Public support percentage for 2011 Sche tion D. Computation of Investment Investment income percentage for 2012 (line 331/3% support tests - 2012. If the org 17 is not more than 331/3%, check th 331/3% support tests - 2011. If the org	77,964. 4,663,423. the organization port Percenta , column (f) divide adule A, Part III, line the 10c, column (f) Schedule A, Part I ganization did no is box and stop nization did not	59,944. 3,654,836. 's first, second, ge d by line 13, colum e 15. :entage) divided by line 13 :entage) divided by line 13 II, line 17 t check the box here. The orga check a box on li	3,060,125. third, fourth, or nn (f)) 3, column (f)) on line 14, and nization qualifies ne 14 or line 19:	3,603,625. fifth tax year a line 15 is more as a publicly a, and line 16 is	3,185,206. s a section 501(15 16 17 18 e than 331/3%, a supported organiz more than 331/3	137,901 18,167,215 c)(3) ► 96.35% 96.64% 2.89% 2.12% and line zation► X 3%, and
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Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

				1	ATTACHMENT 1				
SCHEDULE A, PART III - OTHER INCOME									
DESCRIPTION	2008	2009	2010	2011	2012	TOTAL			
OTHER	77,964.	59,944.				137,908.			
TOTALS	77,964.	59,944.				137,908.			

SCHEDULE D	OMB No. 1545		
(Form 990)	Supplemental Financial Statements Complete if the organization answered "Yes," to Form 99	(2)(0) 1	2
Department of the Treasur	Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or	or 12b. Open to Pu	
Internal Revenue Service	► Attach to Form 990. ► See separate instructions.	Employer identification number	
Name of the organization EDUCATION (FIE	SIFMA FOUNDATION FOR INVESTOR	52-1087193	
	zations Maintaining Donor Advised Funds or Other Similar Funds or A		
	ation answered "Yes" to Form 990, Part IV, line 6.		
	(a) Donor advised funds	(b) Funds and other accounts	
1 Total number a	end of year		
	ributions to (during year)		
	ts from (during year)		
	e at end of year	dener odvised	
	ation inform all donors and donor advisors in writing that the assets held in d ganization's property, subject to the organization's exclusive legal control?] No
	ation inform all grantees, donors, and donor advisors in writing that grant funds		
•	ble purposes and not for the benefit of the donor or donor advisor, or for any c		_
] <u>No</u>
Part II Conse	rmissible private benefit?	rm 990, Part IV, line 7.	
	onservation easements held by the organization (check all that apply).		
		an historically important land ar	ea
		a certified historic structure	
	on of open space 2a through 2d if the organization held a qualified conservation contribution in t	the form of a conservation	
	e last day of the tax year.		
		Held at the End of the Tax	Year
a Total number of	conservation easements	2a	
		2b	
		2c	
	ervation easements included in (c) acquired after 8/17/06, and not on a		
		2d	
	ervation easements modified, transferred, released, extinguished, or terminat	ted by the organization during the	9
	s where property subject to conservation easement is located		
	ization have a written policy regarding the periodic monitoring, inspection, han		
	enforcement of the conservation easements it holds?		No
	eer hours devoted to monitoring, inspecting, and enforcing conservation ease		
▶			
	nses incurred in monitoring, inspecting, and enforcing conservation easement	ts during the year	
▶\$			
	servation easement reported on line 2(d) above satisfy the requirements of sec		٦
	70(h)(4)(B)(ii)? cribe how the organization reports conservation easements in its revenue and e		_ No
	and include, if applicable, the text of the footnote to the organization's financia	•	
	ccounting for conservation easements.		
Part III Organi	zations Maintaining Collections of Art, Historical Treasures, or Other state if the organization answered "Yes" to Form 990, Part IV, line 8.	Similar Assets.	
· · ·			
1a If the organiza works of art, public service,	ion elected, as permitted under SFAS 116 (ASC 958), not to report in its re istorical treasures, or other similar assets held for public exhibition, educa rovide, in Part XIII, the text of the footnote to its financial statements that desc	evenue statement and balance ation, or research in furtheran ribes these items.	sheet nce of
works of art,	ion elected, as permitted under SFAS 116 (ASC 958), to report in its revision istorical treasures, or other similar assets held for public exhibition, education rovide the following amounts relating to these items:		
	cluded in Form 990, Part VIII, line 1		
.,	ded in Form 990, Part X		
•	tion received or held works of art, historical treasures, or other similar as	•	le the
	nts required to be reported under SFAS 116 (ASC 958) relating to these items:		
 a Revenues inclu b Assets included 	ded in Form 990, Part VIII, line 1	····· ► \$	
	ion Act Notice, see the Instructions for Form 990.	Schedule D (Form 99	

SIFMA FOUNDATION FOR INVESTOR

Schee	dule D (Form 990) 2012											age 2
Par	rt III Organizations Maintain	ing Collections of	of Art, His	storical	Treasu	res,	or Of	her Sim	ilar Ass	ets (cont	tinue	əd)
3	Using the organization's acquisitic collection items (check all that app		other reco	rds, cheo	k any o	f the	follow	ving that	are a sigr	nificant us	e of	its
а	Public exhibition	.,	d	Loan	or excha	ande	progra	ms				
b	Scholarly research		e									
c	Preservation for future gene	rations	•									
4	Provide a description of the organ		s and expl	ain how	they fur	ther	the or	nanizatior	n's exemp	t purpose	in F	Part
•	XIII.				they run			gamzation	ie exemp	t puipeee		art
5	During the year, did the organization	on solicit or receive	donations of	of art his	torical tr	easu	res or	other sim	ilar			
•	assets to be sold to raise funds rath								_	Yes		No
Par	rt IV Escrow and Custodial										Part	
	line 9, or reported an am	ount on Form 99	0, Part X, I	ine 21.								
15	Is the organization an agent, truste	e custodian or oth	ar intermedi	iany for c	ontributi		or other	r accote n	ot			
Ia	included on Form 990, Part X?			-					_	Yes		No
b	If "Yes," explain the arrangement in								• • • • L	163		NO
				e ning ta					Amount			
с	Beginning balance					1c						
d	Additions during the year					1d						
е	Distributions during the year					1e						
f	Ending balance					1f						
2a										Yes		No
b	If "Yes," explain the arrangement ir	Part XIII. Check he	ere if the ex	planatior	has be	en pr	ovided	in Part XII	· · · · · ·			
	rt V Endowment Funds. Con											
		(a) Current year	(b) Prio		(c) Two				years back	(e) Four ye	ears b	ack
1a	Beginning of year balance											
b	Contributions											
С	Net investment earnings, gains,											
	and losses											
d	Grants or scholarships											
е	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	e (line 1g	, column	(a))	held as	:				
а	Board designated or quasi-endown	nent ►	%									
b	Permanent endowment	%										
С	Temporarily restricted endowment	▶%	1									
	The percentages in lines 2a, 2b, ar	nd 2c should equal '	100%.									
3a	Are there endowment funds not in	the possession of t	the organiza	ation that	are held	d and	d admir	nistered fo	r the	_		
	organization by:										es	No
	(i) unrelated organizations									3a(i)		
	(ii) related organizations									3a(ii)		
b	If "Yes" to 3a(ii), are the related org		-							3b		
4	Describe in Part XIII the intended u	-										
Par	rt VI Land, Buildings, and Equ	ipment. See For	m 990, Pa	irt X, line	e 10.				1			
	Description of property		or other basis stment)		or other ba other)	sis		cumulated reciation	(0	d) Book value	e	
1a	Land											
b	Buildings											
С	Leasehold improvements	[
d	Equipment	[
_	Other					T						
Tota	al. Add lines 1a through 1e. (Column	(d) must equal For	m 990, Part	X, colum	n (B), lin	e 10	(c).).	<u></u>				

(a) Description of security or category (c) Book value (b) Book value (c) Method of valuation: Cost of end-of-year market value (1) Financial derivatives	Schedule D (F				Page 3
(including name of security) Cost or end-of-year market value (2) Closely-hold equity interests	Part VII	Investments - Other Securities. See F	orm 990, Part X, lin	ie 12.	
(2) Closely-held equily interests		 (a) Description of security or category (including name of security) 	(b) Book value		
(2) Closely-held equily interests	(1) Financia	al derivatives			
(A)					
(19)					
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(i)					
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Total (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Part VIII Investments - Program Related. See Form 990, Part X, line 13. (c) Method of valuation: Cost or end-of-year market value (1) (c) (c) Description of investment type (b) Book value (c) Method of valuation: Cost or end-of-year market value (2) (a) (b) (c) (c) (c) (3) (c) (c) (c) (c) (c) (4) (c) (c) (c) (c) (c) (6) (c) (c) (c) (c) (c) (c) (7) (c)					
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(4) (5) (5) (6) (7) (7) (8) (9) (10) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.). ► Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (b) Book value (1) Federal income taxes 203, 223. (3) (4) (5) (6) (7) (7) (8) (9) (10) (10) (11) (11)	(2)				
(5) (6) (7) (7) (8) (9) (10) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.). ► Part X Other Liabilities. See Form 990, Part X, line 25. • 1. (a) Description of liability (b) Book value (1) Federal income taxes (b) Book value (2) DUE TO SIFMA 203, 223. (3) (4) (5) (6) (7) (8) (9) (10) (11) (11)					
(6) (7) (7) (8) (9) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)					
(7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)					
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.). Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (1) Federal income taxes (b) Book value (2) DUE TO SIFMA 203, 223. (3) (4) (5) (6) (7) (7) (8) (9) (10) (11)					
(9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)					
(10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)					
Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes		(m) (b) must sound Form 000 Port V asl (P)	line (F)		<u> </u>
1. (a) Description of liability (b) Book value (1) Federal income taxes			-		
(1) Federal income taxes (2) DUE TO SIFMA 203,223. (3) (4) (4) (5) (6) (6) (7) (7) (8) (9) (10) (11)				e	
(2) DUE TO SIFMA 203,223. (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (10) (11)					
(3) (4) (4) (5) (5) (6) (6) (7) (7) (7) (8) (10) (10) (11)			203,	223.	
(4) (5) (5) (6) (7) (7) (8) (10) (10) (11)					
(5) (6) (7) (8) (9) (10) (11)					
(6) (7) (8) (9) (10) (11)					
(7) (8) (9) (10) (11)					
(8) (9) (10) (11)					
(9) (10) (11)					
(10) (11)					
(11)	(10)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ≥ 203, 223.					
	Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 203,	223.	

2. FIN 48 (ASC 740) Footnote. 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

Schedu	le D (Form 990) 2012		Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu	ırn	
1	Total revenue, gains, and other support per audited financial statements	_ 1	3,775,707.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	-	
а	Net unrealized gains on investments 2a 144,828		
b	Donated services and use of facilities 2b 445,673		
с	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	590,501.
3	Subtract line 2e from line 1	3	3,185,206.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	-	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	-	
	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 12.</i>)		3,185,206.
Part			
1	Total expenses and losses per audited financial statements	1	3,414,385.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	•	
а	Donated services and use of facilities 2a 445,673		
b	Drier voor ediustmonte	-	
c		_	
d	Other (Describe in Part VIII)		
e		2e	445,673.
3	Subtract line 2e from line 1	. 3	2,968,712.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	·	2,500,712.
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b		_	
	Add lines 4a and 4b	- 40	
5	Total expenses. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 18.</i>)	. 4c	2 069 712
5 Part		. 5	2,968,712.
	XIII Supplemental Information lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	t IV lino	s 1h and 2h:
Part V inform	line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p	rovide a	iny additional
-			
SE	E PAGE 5		

FIN 48

PART X

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. ACCORDINGLY, THE FOUNDATION IS NOT SUBJECT TO INCOME TAXES TO THE EXTENT IT HAS TAXABLE INCOME FROM ACTIVITIES THAT ARE NOT RELATED TO ITS EXEMPT PURPOSES. THE FOUNDATION UTILIZES A THRESHOLD FOR MORE LIKELY THAN NOT FOR RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. NO PROVISIONS FOR INCOME TAXES WAS REQUIRED FOR FISCAL YEAR 2013 OR 2012.

THE FOUNDATION CONFORMS WITH THE PROVISIONS OF ASC 740, "INCOME TAXES." UNDER ASC 740, AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFITS ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION BY A TAXING AUTHORITY. THE IMPLEMENTATION OF ASC 740 HAD NO IMPACT ON THE FOUNDATION'S FINANCIAL STATEMENTS. THE FOUNDATION DOES NOT BELIEVE IT HAS TAKEN ANY MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, IT HAS NOT RECORDED ANY LIABILITY FOR UNCERTAIN TAX POSITIONS. THE FOUNDATION HAS FILED FOR AND RECEIVED INCOME TAX EXEMPTIONS IN INFORMATION RETURNS, AS REQUIRED, AND ALL OTHER APPLICABLE RETURNS IN JURISDICTIONS WHERE SO REQUIRED. THE TAX YEARS ENDING OCTOBER 31, 2010, 2011, 2012 AND 2013 ARE STILL OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES.

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

Open to Public

Inspection

No

Employer identification number

52-1087193

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Name of the organization SIFMA FOUNDATION FOR INVESTOR

EDUCATION (FIE), INC.

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?

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 Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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.

1 (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 non-cash assistance	(h) Purpose of grant or assistance
(1) BESTPREP							
7100 NORTHLAND CIR N, MINNEAPOLIS, MN 55428	41-1265355	501(C)(3)	160,000.				STOCK MARKET GAME
(2) MISSOURI COUNCIL ON ECONOMIC EDUCATION							
5100 ROCKHILL ROAD, KANSAS CITY MO 64110	23-7112100	501(C)(3)	27,068.				STOCK MARKET GAME
_(3) JUMPSTART_COALITION							
919 18TH STREET, NW, WASHINGTON, DC 20006	52-2031287	501(C)(3)	8,000.				FINANCIAL EDUCATION
_(4)	-						
(5)	-						
(6)	-						
_(7)	-						
(8)	_						
	-						
(10)	_						
(11)	_						
(12)	_						
2 Enter total number of section 501(c)(3) and g							<u> </u>
3 Enter total number of other organizations liste For Paperwork Reduction Act Notice, see the Inst			<u></u>	<u></u>	<u></u>		ule I (Form 990) (2012)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of (e) Method of valuation (book, (f) Description of non-cash assistance recipients , cash grant non-cash assistance FMV, appraisal, other) 1 2 3 4 5 6 7 Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional Part IV information. SCHEDULE I THE SIFMA FOUNDATION CONDUCTS DUE DILIGENCE ON ORGANIZATIONS TO ENSURE THAT THEY ARE OFFICIAL 501(C)(3) TAX EXEMPT, IN GOOD FINANCIAL STANDING, WITH A TRACK RECORD OF DELIVERING ON MISSION, AND, TO THE EXTENT THIS

INFORMATION IS AVAILABLE, COMPLYING WITH THEIR LEGAL AND FIDUCIARY

REQUIREMENTS. THE FOUNDATION SEEKS OUT INFORMATION ON GUIDESTAR, CHARITY

WATCH, AND MORE GENERALLY ON THE INTERNET PRIOR TO MAKING GRANTS. GRANTS

ARE MADE ON A VERY LIMITED BASIS FOR SELECT ORGANIZATIONS AND/OR PROJECTS

THAT COMPLEMENT THE WORK OF THE SIFMA FOUNDATION INCLUDING, IN

PARTICULAR, HELPING TO ADVANCE THE FIELD/CAUSE OF FINANCIAL EDUCATION.

JSA

SCH	EDULE J	Comper	nsation Information	0	MB No.	1545-0	047
		For certain Officers, Dire	ectors, Trustees, Key Employees, and Highest		എന	19	
			mpensated Employees janization answered "Yes" to Form 990,		ZU		
	Department of the Treasury		Part IV, line 23.	C	pen to		
	Revenue Service of the organization	SIFMA FOUNDATION FOR IN	990. See separate instructions.	Employer identification		ectio	n
	CATION (FI		NVESIOR	52-108719			
Part		ns Regarding Compensation		52 100719	5		
i ait	Quootio					Yes	No
1a	Check the ap	propriate box(es) if the organization pr	ovided any of the following to or for a pers	on listed in Form			
	990, Part VII,	Section A, line 1a. Complete Part III to	o provide any relevant information regarding	g these items.			
	First-cla	ss or charter travel	Housing allowance or residence for	personal use			
	Travel fo	or companions	Payments for business use of perso	nal residence			
	Tax inde	emnification and gross-up payments	Health or social club dues or initiation	on fees			
	Discretio	onary spending account	Personal services (e.g., maid, chauff	eur, chef)			
b	If any of the	boxes on line 1a are checked, did the	ne organization follow a written policy re openses described above? If "No," com	egarding payment			
	explain				1b		
2	Did the organ	nization require substantiation prior to	reimbursing or allowing expenses incurr				
	directors, trus	stees, and the CEO/Executive Director,	regarding the items checked in line 1a?		2		
2	Indiaata whial	, if any, of the following the filing area	nization used to establish the companyati	an of the			
3			nization used to establish the compensation at apply. Do not check any boxes for methor				
	-		ne CEO/Executive Director, but explain in P	-			
		nsation committee	Written employment contract				
		dent compensation consultant	X Compensation survey or study				
		90 of other organizations	X Approval by the board or compensa	ation committee			
4		-	Part VII, Section A, line 1a, with respect to				
4		or a related organization:	Fait VII, Section A, line Ta, with respect to				
а			ayment?		4a		Х
b	Participate in	, or receive payment from, a suppleme	ental nonqualified retirement plan?		4b		X
С			ased compensation arrangement?		4c		X
	If "Yes" to an	y of lines 4a-c, list the persons and p	rovide the applicable amounts for each it	em in Part III.			
_	-	501(c)(3) and 501(c)(4) organizations	-				
5	•		line 1a, did the organization pay or accrue a	any			
2		n contingent on the revenues of:			5a		х
a b	Any related o	rganization?			5a 5b		X
~		e 5a or 5b, describe in Part III.			55		
6			line 1a, did the organization pay or accrue a	any			
-	-	n contingent on the net earnings of:	, , , , , , , , , , , , , , , , , , , ,				
а					6a		Х
b	Any related o	rganization?			6b		Х
	If "Yes" to line	e 6a or 6b, describe in Part III.					
7			n A, line 1a, did the organization provi				
			escribe in Part III		7	X	
8	-		l, paid or accrued pursuant to a contract				
		-	Regulations section 53.4958-4(a)(3)? If		_		37
•					8		X
9			low the rebuttable presumption proced				
		ection 53.4958-6(c)?	· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • •	9		

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Schedule J (Form 990) 2012

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 in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MISC	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
MELANIE MORTIMER	(i)	279,435.	27,500.		0 30,000.	9,325.	346,260.	
1 EXECUTIVE DIRECTOR	(ii)	0	0		o0	0	C	
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)		+					
4	(ii)							
	(i)		+		+			
5	(ii)							
_	(i)		+					
6	(ii)							
_	(i)		+		+			
7	(ii)							
	(i) (ii)		+		+			
8	(i)							
9	(i) (ii)		+		+·			
5	(i)							
10	(i) (ii)		+		+			
	(i)							
11	(ii)		+		+			
	(i)							
12	(ii)		+					
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)	L			╡╡			
15	(ii)							
	(i)	L			┥─────┤			
16	(ii)							

Page 3

Schedule J (Form 990) 2012

Part III Supplemental Information

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

SCHEDULE J, PART I, LINE 7

THE BONUS IS BASED ON PERFORMANCE WHICH IS EVALUATED DURING ANNUAL

EMPLOYEE REVIEW PROCESS WHICH IS THEN REVIEWED AND APPROVED BY THE

BOARD.

SCHEDULE O (Form 990 or 990-EZ)

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.



Name of the organization SIFMA FOUNDATION FOR INVESTOR EDUCATION (FIE), INC.

NUMBER OF EMPLOYEES REPORTED ON FORM W-3

FORM 990, PART V, LINE 2A

THE FOUNDATION'S EMPLOYEES ARE INCLUDED IN THE W-3 FILING OF SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOCIATION.

FORM 990 REVIEW PROCESS FORM 990, PART VI, SECTION B, LINE 11 THE ACCOUNTING DEPARTMENT OF THE ORGANIZATION PREPARES THE FORM 990 BASED ON AUDITED FINANCIAL INFORMATION. THE DRAFT FORM 990 IS THEN REVIEWED BY MANAGEMENT AND AN EXTERNAL INDEPENDENT ACCOUNTING FIRM. THE AUDIT AND FINANCE COMMITTEE WILL REVIEW THE FINAL DRAFT SIGNED OFF BY THE EXTERNAL INDEPENDENT ACCOUNTING FIRM. THIS REVIEW WILL BE NOTED AS AN AGENDA ITEM AT AN AUDIT AND FINANCE COMMITTEE MEETING AND WILL BE DULY NOTED IN THE MINUTES. THE FORM 990 WILL BE PROVIDED TO ALL VOTING MEMBERS OF THE BOARD OF TRUSTEES PRIOR TO SUBMISSION TO THE IRS.

CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT

FORM 990, PART VI, SECTION B, LINE 2

ANY EMPLOYEE IN A POSITION WHERE HIS OR HER OBJECTIVITY MAY BE QUESTIONED BECAUSE OF AN INDIVIDUAL INTEREST OR FAMILY OR PERSONAL RELATIONSHIP IS REQUIRED TO NOTIFY GENERAL COUNSEL. SIMILARLY, ANY EMPLOYEE AWARE OF ANY TRANSACTION OR RELATIONSHIP THAT COULD REASONABLY BE EXPECTED TO GIVE RISE TO A PERSONAL CONFLICT OF INTEREST IS REQUIRED TO DISCUSS THE MATTER PROMPTLY WITH GENERAL COUNSEL. IN ADDITION, ONCE EVERY YEAR DIRECTORS AND ALL EMPLOYEES OF THE FOUNDATION ARE REQUIRED TO REVIEW A COPY OF THE CONFLICT OF INTEREST POLICY AND TO ACKNOWLEDGE IN WRITING THAT HE OR SHE

Page 2

IS COMPLIANT.

PROCESS FOR DETERMINING COMPENSATION FORM 990, PART VI, SECTION B, LINE 15 THE EXECUTIVE COMMITTEE AND THE BOARD ACTING AS A COMPENSATION COMMITTEE HIRES CONSULTANTS TO REVIEW COMPARABLE PACKAGES FOR ANY NEW INCOMING EXECUTIVE DIRECTORS. THE CONSULTANT PRESENTS DATA FOR COMPARABLE POSITIONS BOTH LOCALLY AND NATIONALLY AND THE BOARD'S EXECUTIVE COMMITTEE MAKES THE FINAL DECISIONS FOR THE SALARY PACKAGE.

AVAILABILITY OF DOCUMENTS TO THE PUBLIC

FORM 990, PART VI, SECTION C, LINE 19

THE FOUNDATION'S AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC VIA THE FOUNDATION'S WEBSITE AND ANY REQUEST FOR GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY WILL BE PROVIDED UPON REQUEST AT MANAGEMENT'S

DISCRETION.

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE SIFMA FOUNDATION IS DEDICATED TO FOSTERING KNOWLEDGE AND UNDERSTANDING OF THE FINANCIAL MARKETS FOR INDIVIDUALS OF ALL BACKGROUNDS. DRAWING ON THE SUPPORT AND EXPERTISE OF SIFMA MEMBER FIRMS, THE SIFMA FOUNDATION PROVIDES FINANCIAL EDUCATION PROGRAMS AND TOOLS THAT STRENGTHEN ECONOMIC OPPORTUNITY ACROSS COMMUNITIES AND INCREASE INDIVIDUALS' ACCESS TO THE BENEFITS OF THE GLOBAL MARKET PLACE.

ATTACHMENT 1

ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

THE SIFMA FOUNDATION'S ACCLAIMED STOCK MARKET GAME ("SMG") PROGRAM IS AN ONLINE SIMULATION OF THE GLOBAL CAPITAL MARKETS THAT ENGAGES STUDENTS GRADE 4-12 IN THE WORLD OF ECONOMICS, INVESTING AND PERSONAL FINANCE, AND PREPARES THEM FOR FINANCIALLY INDEPENDENT FUTURES. NEARLY 600,000 STUDENTS TAKE PART EVERY SCHOOL YEAR ACROSS ALL 50 STATES AND AROUND THE GLOBE. THE STOCK MARKET GAME HAS REACHED 15 MILLION STUDENTS SINCE ITS INCEPTION IN 1977. THE SIFMA FOUNDATION'S INVESTWRITE NATIONAL ESSAY COMPETITION IS A CULMINATING ACTIVITY FOR THE STOCK MARKET GAME STUDENTS, EXTENDING WHAT THEY HAVE LEARNED IN SMG BY CHALLENGING THEM TO ANALYZE. THINK CRITICALLY AND PROBLEM SOLVE. STUDENTS ADDRESS REAL-WORLD FINANCIAL ISSUES AND SITUATION BY ANSWERING A QUESTION ABOUT LONG-TERM SAVING AND INVESTING. THE CAPITOL HILL CHALLENGE MATCHES MEMBERS OF CONGRESS WITH SCHOOL ACROSS THE COUNTRY PARTICIPATING IN THE STOCK MARKET GAME. WINNERS RECEIVE A PAID TRIP TO WASHINGTON, D.C. TO MEET THEIR MEMBER OF CONGRESS, TOUR FINANCIAL LANDMARKS, AND LEARN FIRST-HAND ABOUT FINANCIAL POLICY MAKING. SINCE THE CAPITOL HILL CHALLENGE BEGAN IN 2004, MORE THAN 2,200 MEMBER OF CONGRESS MATCHES HAVE BEEN MADE TO 61,000 MIDDLE AND HIGH SCHOOL STUDENTS IN ALL 50 STATES.

ATTACHMENT 3 990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION Schedule O (Form 990 or 990-EZ) 2012 JSA

2E1228 1.000 1877FO 700J

V 12-7.12

Schedule O (Form 990 or 990-EZ) 2012						
Name of the organization	SIFMA FOUNDATION FOR INVESTOR	Employer identification number				
EDUCATION (FIE), INC.		52-1087193				
		ATTACHMENT 3 (CONT'D)				

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
THE PATRICK COLLINS GROUP LLC 4100 MONUMENT CORNER DRIVE, SUITE 300	CONSULTING	122,228.
FAIRFAX, VA 22030		

52-1087193

SCHEDULE R (Form 990)									
Department of the Treasury Internal Revenue Service									
Name of the organization	SIFMA FOUNDATION FOR INVESTOR				Employer ic	lentification number			
EDUCATION (FIE)), INC.				52-108	7193			
Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)									
N	(a) lame, 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			

		or foreign country)		entity
_(1)				
_(2)				
_(3)				
_(4)				
_(5)				
_(6)				

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to 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	ng Section 512(controlle entity?	
						Yes	No
(1) SECURITIES IND. & FINANCIAL MARKETS ASSN							
120 BROADWAY, 35TH FLOOR NEW YORK, NY 10271	TRADE ASSN.	DE	501(C)(6)	N/A	N/A		Х
_(2)	-						
_(3)	-						
_(4)	-						
_(5)	-						
_(6)	-						
_(7)	_						

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

Schedule R (Form 990) 2012

Page **2**

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

	nore related orga	mzauona	s li calcu as a pa		ian year.)	1						
(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	Disprop alloca	ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	j) eral or aging ner?	(k) Percentage ownership
							Yes	No		Yes	No	
<u>(1)</u>												
(2)												
(3)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percen- tage ownership	512(b contr ent
(1)							Yes
(2)							
<u>(3)</u>							
(4)							
(5)							
(6)							
(7)							

SIFMA FOUNDATION FOR INVESTOR

52-1087193

Schedule R (Form 990) 2012

	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes No
	During the tax year, did the organization engage in any of the following transactions with or	ne or more related organizations	isted in Parts II-IV?			
	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	Σ
b	Gift, grant, or capital contribution to related organization(s)				1b	2
C	Gift, grant, or capital contribution from related organization(s)				1c	2
d	Loans or loan guarantees to or for related organization(s)				1d	2
e	Loans or loan guarantees by related organization(s)				1e	Σ
i	Dividends from related organization(s)				1f	
g	Sale of assets to related organization(s)				1g	Σ
n	Purchase of assets from related organization(s)				1h	Σ
	Exchange of assets with related organization(s)				1i	Σ
	Lease of facilities, equipment, or other assets to related organization(s)				1j	Σ
(Lease of facilities, equipment, or other assets from related organization(s)				1k	2
	Performance of services or membership or fundraising solicitations for related organization(s)			11	Σ
n	Performance of services or membership or fundraising solicitations by related organization(s	s)			1m	х
า	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	,			1n	x
5	Sharing of paid employees with related organization(s)				10	x
-						
þ	Reimbursement paid to related organization(s) for expenses				1p	x
	Reimbursement paid by related organization(s) for expenses					
1					1 a	1 2
9					1q	2
r	Other transfer of cash or property to related organization(s)				1r	X
r s	Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s)		· · · · · · · · · · · · · · · · · · ·	 	1r 1s	X X
r s	Other transfer of cash or property to related organization(s)		· · · · · · · · · · · · · · · · · · ·	 	1r 1s	X X
5	Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s) If the answer to any of the above is "Yes," see the instructions for information on who must	t complete this line, including cov (b) Transaction	vered relationships and transa	action thres	1r 1s sholds (d) of dete	X X S.
5	Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s) If the answer to any of the above is "Yes," see the instructions for information on who must (a)	complete this line, including cov	/ered relationships and transa	action thres	1r 1s sholds (d)	X X S.
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r <u>s</u>	Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s) If the answer to any of the above is "Yes," see the instructions for information on who must (a) Name of other organization	t complete this line, including cov (b) Transaction type (a-s)	/ered relationships and transa (c) Amount involved	Action three Method amou	1r 1s sholds (d) of dete unt invo	X X S.
r s)	Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s). If the answer to any of the above is "Yes," see the instructions for information on who must (a) Name of other organization SECURITIES INDUSTRY & FINANCIAL MARKETS ASSN.	t complete this line, including cov (b) Transaction type (a-s) P, R M, S	/ered relationships and transa (c) Amount involved 1,824,794. 1,652,632.	ACTUAI	1r 1s sholds (d) of dete unt invo	X X S.
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r s])	Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s). If the answer to any of the above is "Yes," see the instructions for information on who must (a) Name of other organization SECURITIES INDUSTRY & FINANCIAL MARKETS ASSN.	t complete this line, including cov (b) Transaction type (a-s) P, R M, S	/ered relationships and transa (c) Amount involved 1,824,794. 1,652,632.	ACTUAI	1r 1s sholds (d) of dete unt invo	X X S.
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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	Are all sec 501	e) partners tion c)(3) ations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) ortionate ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	j) eral or aging ner?	(k) Percentage ownership
			section 512-514)	Yes	No			Yes	No	(1 0111 1000)	Yes	No	
<u>(1)</u>													
(2)													
(3)													
(4)													
(5)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Schedule	R	(Form	990)	2012	

Part VII Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).