TAX RETURN FILING INSTRUCTIONS

FORM 990-EZ

FOR THE YEAR ENDING

December 31, 2022

Pre	рa	rec	١F	or	:
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International School Psychology Association Inc 10 MICHAEL GIORGALLA ST Egkomi Cyprus 1095

Prepared By:

Wipfli LLP 1502 London Road, Suite 200 Duluth, MN 55812

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-TE to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-TE to us as soon as possible

Internal Revenue Code Section 6104(d) requires that Form 990 should be made available for public inspection during regular business hours at the organization's principal office. The return must also be available for public inspection at any regional or district offices having three or more employees. Inspection of this return must be allowed for three years from the due date specified above. The inspection requirement applies to all portions of the return except for the names and addresses of any contributors to the organization. The inspection requirement also applies to your organization's application for tax-exempt status (Form 1023 or 1024) and the Internal Revenue Service determination letter approving exempt status.

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Type or Taxpayer identification number (TIN) INTERNATIONAL SCHOOL PSYCHOLOGY print ASSOCIATION INC 20-3317540 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 10 MICHAEL GIORGALLA ST return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. EGKOMI CYPRUS 1095 Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) PETROS STRATIS The books are in the care of ► 10 MICHAEL GIORGALLA ST - EGKOMI CYPRUS 1095 Telephone No. \triangleright 3572259190 Fax No. ● If the organization does not have an office or place of business in the United States, check this box
X If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 🦳 and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 2023, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2022 or ___ tax year beginning , and ending | Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

223841 04-01-22

LHA

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

EXTENDED TO NOVEMBER 15, 2023 **Short Form**

Form **990-EZ**

Return of Organization Exempt From Income Tax

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

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form, as it may be made public.

Go to www.irs.gov/Form990EZ for instructions and the latest information.

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		2022 calendar year, or tax year beginning , 2022, and ending		
В	Check if applicat	le: C Name of organization	D Employer id	entification number
	Addr	ess change INTERNATIONAL SCHOOL PSYCHOLOGY		
	Nam	e change ASSOCIATION INC		317540
	Initia	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telephone r	number
	— Final	return/ 10 MICHAEL GIORGALLA ST	35722	259190
Ē	=	City or town, state or province, country, and ZIP or foreign postal code	F Group Exen	
Ē	=	EGKOMI CYPRUS 1095	Number	•
G		iting Method: Cash X Accrual Other (specify)	_	X if the organization is
	Websi		l l	d to attach Schedule B
-		empt status (check only one) $ X$ 501(c)(3) $-$ 501(c) () (insert no.) $-$ 4947(a)(1) or $-$ 52		
		f organization: X Corporation Trust Association Other	7 (101111000)	·
		es 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Par	+ II	
				68,101.
	art I	(8)) are \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the ins	Ψ tructions for Part	1)
	t I	Check if the organization used Schedule 0 to respond to any question in this Part I		
_	1	Contributions, gifts, grants, and similar amounts received		1,534.
	2	Program service revenue including government fees and contracts		16,028.
	1			35,544.
	3	Membership dues and assessments Investment income SEE SCHEDULE O	3	14,995.
	4	1 1	4	14,333.
	5a	Gross amount from sale of assets other than inventory 5a		
	b	Less: cost or other basis and sales expenses 5b		
	C	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events:		
e	a	Gross income from gaming (attach Schedule G if greater than		
Revenue	١.	\$15,000)		
æ	b	Gross income from fundraising events (not including \$ of contributions		
		from fundraising events reported on line 1) (attach Schedule G if the sum of such		
		gross income and contributions exceeds \$15,000) 6b		
	C	Less: direct expenses from gaming and fundraising events 6c		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
	7a	Gross sales of inventory, less returns and allowances 7a		
	b	Less; cost of goods sold		
	C	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)		
	8	Other revenue (describe in Schedule 0)		60 404
_	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		68,101.
	10	Grants and similar amounts paid (list in Schedule 0)	10	
	11	Benefits paid to or for members	11	
S	12	Salaries, other compensation, and employee benefits		
Expenses	13	Professional fees and other payments to independent contractors		36,085.
άx	14	Occupancy, rent, utilities, and maintenance	14	2,954.
Ш	15	Printing, publications, postage, and shipping	15	12,007.
	16	Other expenses (describe in Schedule 0) SEE SCHEDULE O	16	18,342.
_	17	Total expenses. Add lines 10 through 16		69,388.
'n	18	Excess or (deficit) for the year (subtract line 17 from line 9)	18	-1,287.
sets	19	Net assets or fund balances at beginning of year (from line 27, column (A))		
Asŧ		(must agree with end-of-year figure reported on prior year's return)	19	290,562.
Net Assets	20	Other changes in net assets or fund balances (explain in Schedule 0) SEE SCHEDULE O	20	-1,432.
_	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	287,843.

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2022)

	990-EZ (2022) ASSOCIATION INC		2	0 –	<u>33175</u>	40	Page 2
Pa	rt II Balance Sheets (see the instructions for Part II)						
	Check if the organization used Schedule O to resp	oond to any question	in this Part II				. X
		()	A) Beginning of year		. ,	nd of yea	
22	Cash, savings, and investments		252,534.	22		289,	288.
23	Land and buildings			23			
24	Other assets (describe in Schedule 0) SEE SCHEDULE O) <u> </u>	96,394.	24		40,	637.
25	Total assets		348,928.	25			925.
26	Total liabilities (describe in Schedule 0) SEE SCHEDULE O) <u> </u>	58,366.	26			082.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)		290,562.	27		287 <u>,</u>	843.
Pa	rt III Statement of Program Service Accomplishmen	its (see the instruction	ons for Part III)			penses	
	Check if the organization used Schedule O to resp		in this Part III	X	(Required 501(c)(3)		
What	is the organization's primary exempt purpose? SEE SCHEDULE O	<u> </u>			organizatio		
	ibe the organization's program service accomplishments for each of its three largest program s er, describe the services provided, the number of persons benefited, and other relevant informa		In a clear and concise		others.)		
	CONFERENCES, SUPPORT AND PUBLICATION	NS TO ACCOMPL	ISH THE				
]	EXEMPT PURPOSES.			_			
-	(Grants \$) If this amount includes foreign of	arants, check here	Γ	_	28a	49,	216.
29	,	, a. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.					
-				_			
((Grants \$) If this amount includes foreign of	grants, check here			29a		
30 _		,					
-				_			
((Grants \$) If this amount includes foreign of	grants, check here			30a		
31	Other program services (describe in Schedule O)						
((Grants \$) If this amount includes foreign of	grants, check here			31a		
32	Total program service expenses (add lines 28a through 31a)				32	49,	216.
Pa	rt IV List of Officers, Directors, Trustees, and Key E	mployees (list each one e	ven if not compensated - see	e the i	nstructions for	Part IV)	
	Check if the organization used Schedule O to resp	ond to any question	in this Part IV				
		(b) Average hours	(C) Reportable compensation (Forms	d) He	alth benefits,	(e) Es	timated
	(a) Name and title	per week devoted to	W-2/1099-MÌSC/	emplo	ibutions to byee benefit and deferred		t of other
		position	(if not paid, enter -0-)		pensation	compe	ensation
	RONIQUE LE MEZEC						
_	ESIDENT	1.00	0.		0.		0.
	. CHRYSE HATZICHRISTOU						
	ST PRESIDENT	1.00	0.		0.		0.
	. KRISTEN VARJAS	1					
	ESIDENT ELECT	1.00	0.		0.		0.
	CHAEL SHEEHAN						
	EASURER	1.00	0.		0.		0.
	ETH BLOEMBERG CRETARY	1.00	0.		0.		0.
250	CRETARI	1.00	0.		<u> </u>		<u> </u>
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Page 3

Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule 0 33	Pa	irt V Other Information (Note the Schedule A and personal benefit contract statement requirements	in the	9	g
30 Did the cognization engage in any significant activity not previously reported to the IRS7 If Yes," provide a detailed description of each activity in Schedule 0 See distriction of the IRS7 If Yes," attach a conformed copy of the amended doubless of the organizating or governing documents? If Yes, "attach a conformed copy of the amended on the organization in the wind activity in Schedule 0. See instructions of the IRS7 If Yes," attach a conformed copy of the amended on the IRS7 If Yes," and activity in Schedule 0. See instructions of the IRS7 If Yes," and IRSR and 7a, among others 37. 34 If Yes's 10 time 52, 5b, and 7a, among others 37. 35 If Yes's 10 time 52, 5b, and 7a, among others 37. 36 If Yes 10 time 52, 5b, and 7a, among others 37. 36 If Yes 10 time 52, 5b, and 7a, among others 37. 37 If Yes 10 time organization activity in the Yes 10 time 52, 5b, and 7a, among others 37. 38 Did the organization school (10)(14), 50 (10)(15), or 50 (10)(15), organization subject to section 603(2)(6) notice, reporting, and proxy tax requirements form the year? If Yes," complete school (4), 50 (10)(14), 50 (10)(15), or 50 (10)(16), 50		instructions for Part V.) Check if the organization used Sch. O to respond to any question in this	Part	V	X
actively in Schedule D Were any significant changes made to the organization of powering documents? If "ves," attach a conformed copy of the amended documents if they reflect a change to the organization of some Otherwise, opplain the change on Schedule O. See Instructions 34				Yes	No
34 We any significant changes made to the organization among the water and accordinated contents of the prefect a change to the organization have unrelated besiness gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6s, and 7s, among others)? 85 If If Yes's from the year? (Fig. 6s), 501(c)(6), or 501(c)(6) or solicitation than the prefect of the prefect of the prefect of the year? (If Yes), 501(c)(6), or 501(c)(6), or 501(c)(6) or solicitation subject to section 503(c)(e) not solicitation subject to section 503(c)(e) not solicitation subject to section 503(c)(e) not solicitation, dissolution, large the organization absoluted to section 503(c)(e) not solicitation or significant disposition of net assess the programment of the organization and provided in the instructions and provided the year? (If Yes, 5) (in the organization before the 2000 flow) that the organization flow from the prefer the year? (If Yes, 5) (in the organization flow) that organization flow from the prefer the year of the year? (If Yes, 5) (in the organization flow) that the organization flow from the prefer the year of year o	33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each			
about the regiment a change to the organization's name. Otherwise, explain the change on Schedule 0. See instructions a Did the organization have unrelated businesse gross income of \$1,000 or more during the year from business activities (such as those reported on nines 2, 6a, and 7a, among others)? b If Yes' to line 53a, has the organization field a Form 990-T for the year? If Yis', provide an explanation in Schedule 0. Was the organization assection 50 (10(4), 50 (10(5)), 50 50 (10(6)) organization subject to section 6053(6) notice, reporting, and proxy tax reporting, and proxy tax reporting application parts of Schedule 0, Part III B Did the organization section 50 (10(4), 50 10(5)), 50 50 (10(6)) organization on splintiated disposition of net assets during the year? If Yes, complete application parts of Schedule 0, Part III B Did the organization heroir of non-or make any beams to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b If Yes, Complete Schedule 1, Part II, and enter the total amount involved 39 b If Yes, Complete Schedule 1, Part II, and enter the total amount involved 39 b If Yes, Complete, Schedule 1, Part II, and enter the total amount involved 39 b If Yes, Complete, II, noticed on line 9 30 b If Yes, Complete, II, noticed on line 9, for public use of obtain facilities 39 b If Yes, Complete, II, noticed on line 9, for public use of obtain facilities 40 b If Yes, Complete in the special or the public variety of obtain facilities 40 b If Yes, Complete in the public variety of obtain facilities 40 b If Yes, Complete in the public in the public interval of the organization engage in any section 4995 0 c Seation 50 (10(3), 50 (10(4), 4) and 50 (10(29) organizations. Enter amount of tax imposed on organization managers of disqualified pressors furnity the year under sections 4912, 4955, and 4958 10 c Seation 50 (10(3), 50 (10(4), 4) and 50 (10(28) organizations. Ente			33		X
35a Dit the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on filmes 2, 6is, and 7a, among others/?)	34				
on lines 2, Su, and 7a, among others?? b If "Yes" to line 35a, has the organization filed a form 990-1 for the year? If "Yo," provide an explanation in Schedule 0 Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 603(e) motion, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule 6, Part II B Did the organization under por a liquidation, dissolution, thermisation, or significant disposition of net assets during the year? If "Yes," section 92 in 1962 and 1962			34		X
b I "Yes" to line 35a, has the organization field a Form 990-1 for the year? If "No," provide an explanation in Schedule O 35b N/A 18 color was the organization asscribed ost (0)(4), 401(6)(5), 501(6)(6) organization subject to scholar 0833(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 35c N/A 18 complete applicable parts of Schedule N 18 complete parts of Sch	35 a				7.7
c West the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule (), Part II 36		on lines 2, 6a, and 7a, among others)?		BT /	
requirements during the year? If "Yes," complete Schedule C, Part III 8 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete spinicable parts of Schedule N 8 Japan 27 a first amount of political expenditures, direct or indirect, as described in the instructions 8 Japan 27 a little amount of political expenditures, direct or indirect, as described in the instructions 8 Japan 28 Japan 28 Japan 28 Japan 29 Ja			35b	IN/	A
Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Either amount of tax imposed on organization managers or disqualition for length great organizations. At any time during the ease with which a copy of finis return is field. CA Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Either amount of tax on line 40c reimbursed by the organization managers or disqualition for the completed instead of 10 MICHAEL GIORGALLA ST, EGKOMI CYPRUS Telephone no. 357.2.259.19.0	C		250		v
as a policiable parts of Schedule N a Enter amount of political expenditures, direct or indirect, as described in the instructions bid the organization file Form 1120-POL for this year? a Political expenditures, direct or indirect, as described in the instructions bid the organization file Form 1120-POL for this year? a Political direct organization file Form 1120-POL for this year? bid the organization file Form 1120-POL for this year? bid the organization file Form 1120-POL for this year? bid the organization file Form 1120-POL for this year? bid the organization file Form 1120-POL for this year? bid the organization file Form 1120-POL for this year? bid the organization file Form 1120-POL for this year? bid the organization file Form 1120-POL for this year? bid the organization file Form 1120-POL for this year? consider the organization file Form 1120-POL for this year year of the file organization file for the organization file for the organization file for the organization file year under section 4911 organization. Section 4911 organization organization organization file year under section 4912 organization. Section 4912 organization organiz	36		336		21
87a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0 .	00		36		х
b Did the organization file Form 1120-PDL for this year? 32 b Did the organization for Form 1120-PDL for this year? 33 b Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employer, or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b 1 "Yes," complete Schedule L, Part II, and enter the total amount involved 38 b Sections 010(3) organizations. Enter: a initiation fees and capital contributions included on line 9 39 Sections 010(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 O .; section 4912 O .; section 4955 O . b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Bid the organization engage in any section 4958 b cesses benefit transaction during the year, or did if engage in an excess benefit transaction of in a prior year that has not been reported on any or special organization of the organizations of the organization engage in any section 4958 O . c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 O . d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organizations managers or disqualified persons during the year under sections 4912, 4955, and 4958 O . d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. First amount of tax imposed on organizations. Any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete from 886F O . 40 Extra 501(c) (3), 501(c)(4), and 501(c)(29) organizations. First amount of tax organizations. Any time during the calendar year, did the organizations. Any time during the calendar year, did the organization was a bank account, securities account, or other financial Accounts (FBAR). 1 If Yes, or inter the name of the foreign country organization in a foreign	37 a				
38a Dit the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b If Yes," complete Schedule L, Part II, and enter the total amount involved 38b N/A 38 Section 501(c)(7) organizations. Enter: 39a N/A 39 Section 501(c)(3) organizations. Enter: 39a N/A 39a N/A 39b N/A 39c Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: 39a N/A 39b N/A 39c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization during the year under: 39a N/A 39c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization during the year under: 40b SECTION 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year under sections. 4912 4,4955, and 4958 40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections. 4912,4955, and 4958 40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. And 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. And 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. And 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. And 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. And 501(c)(29) organizations. Enter amount of tax overlands. And 501(c)(29) organizations. Enter amount of tax organization. And 501(c)(29) organizations. And 501(c)(29) organization. And			37Ь		Х
in a prior year and still outstanding at the end of the tax year covered by this return? 38 X					
Section 501(c)(7) organizations. Enter: a initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9 (by public use of club facilities section 4911 0			38a		Х
a Initiation fees and capital contributions included on line 9 b Gross receipts, Included on line 9, for public use of club facilities 9 aga N/A 39b N/A 39b N/A 40 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911	b	If "Yes," complete Schedule L, Part II, and enter the total amount involved			
b Gross receipts, included on line 9, for public use of club facilities 39b N/A 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911	39	Section 501(c)(7) organizations. Enter:			
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911	a				
section 4911			-		
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If Yes, complete Schedule L, Part I c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization e All organization and any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8886-T List the states with which a copy of this return is filed CA 10 MICHAEL GIORGALLA ST, EGKOMI CYPRUS Located at 10 MICHAEL GIO	40 a				
transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule I, Part I . c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization and the part of the properties of the properties of the part of the properties of t					
of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 40e 1 List the states with which a copy of this return is filed 1 The organization's books are in care of PETROS STRATIS 1 List the states with which a copy of this return is filed 2 The organization's books are in care of PETROS STRATIS 1 Located at 10 MICHAEL GIORGALLA ST, EGKOMI CYPRUS 5 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 accounts (FBAR). c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country NETHERLANDS See the instructions for exceptions and filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country NETHERLANDS 3 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 4 Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ d If "Yes" to line 44c, h	b				
c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			406		v
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	IJ		45h		
				90-EZ	(2022)

Page 4

								Yes	No
	organization engage, directly or indirectly, in pol			• • •	•		40		Х
Part VI	complete Schedule C, Part I Section 501(c)(3) Organizations	Only					46		
1 0.11 01	All section 501(c)(3) organizations must a		49b and 52, and	d complete the	ables for lines	s 50 and 51.			
	Check if the organization used Schedule	•	•	•					
			•					Yes	No
47 Did the	organization engage in lobbying activities or have	ve a section 501(h) elect	tion in effect durir	ng the tax year?					
If "Yes,"	complete Sch. C, Part II						47		X
	rganization a school as described in section 170						48		X
49a Did the	organization make any transfers to an exempt n	on-charitable related or	ganization?				49a		X
	was the related organization a section 527 orga						49b	a i a al .	
	te this table for the organization's five highest co 00,000 of compensation from the organization.		,	ers, airectors, trus	lees, and key er	npioyees) who e	acii rec	eiveu i	nore
пан ф	(a) Name and title of each employee	ir there is none, enter in	(b) Average	e hours (C) Reportable	(d) Health benefi	s. (e) Estim	nated
	(a) Name and this or each employee		per week de	voted to com	pensation (Forms -2/1099-MISC/	contributions to employee benef	l om	ount of	
	NON	ΙE	positio	on "	1099-NEC)	plans, and deferre compensation	ed co	mpens	ation
							4		
							+-		
- Total nu	umber of other employees paid over \$100,000								
	ımber of other employees paid over \$100,000 te this table for the organization's five highest co	nmneneated independer			 ore than \$100 (100 of compane	ition fro	m tha	
	ation. If there is none, enter "None." NON		it contractors with	o each received in	ore man proo,	oo or compense	ונוטוו ווינ	1111 1116	
	Name and business address of each independent			(b) Type	of service	(c)	Compe	nsatio	 n
	·			\ / J.					
d Total nu	ımber of other independent contractors each rec	paiving over \$100,000							
	organization complete Schedule A? Note: All se		ations must attac	h a					
	to d. Calandula A						ΧΥ	s [□ No
	es of perjury, I declare that I have examined this								
-	and complete. Declaration of preparer (other tha					-		,	
		·							
Sign	Signature of officer					Date			
Here	VERONIQUE LE MEZEC,	ISPA PRESI	IDENT						
	Type or print name and title								
	Print/Type preparer's name	Preparer's signature		Date	Check	if PTIN			
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Preparer	CPA	PETERSON,	CPA	10/02/2	'		833		
Use Only	Firm's name WIPFLI LLP		nn 000		Firm's EIN	040 =0			
	Firm's address 1502 LONDON		LE 500		Phone no.	218.72	∠. 4	/05	
Marrish - IDO	DULUTH, MN					Г	v		
iviay the IRS (discuss this return with the preparer shown above	ver See instructions					X Ye		<u>No</u>
							Form 9	an-F7	(2022)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

INTERNATIONAL SCHOOL PSYCHOLOGY **Employer identification number** Name of the organization ASSOCIATION INC 20-3317540 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed n your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990) 2022

ASSOCIATION INC Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	(Complete only if you checke fails to qualify under the tests				on failed to qualify	under Part III. If the	e organization
Sec	ction A. Public Support	71		,			
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	(4) 2010	(5) 2010	(0) 2020	(4) 2021	(6) 2022	(i) rotal
·	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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)						
	Public support. Subtract line 5 from line 4.						
		(-) 0010	(1-) 0040	(-) 0000	(-1) 0004	(-) 0000	(6) T-+-1
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
8	Amounts from line 4 Gross income from interest,						_
0	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 VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stop						
	ction C. Computation of Publi						
	Public support percentage for 2022 (I					14	<u>%</u>
							%
16a	33 1/3% support test - 2022. If the c						
	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the						
47-	and stop here. The organization qual						
1/a	10% -facts-and-circumstances test and if the organization meets the fact						
	meets the facts-and-circumstances te						
h	10% -facts-and-circumstances test	-			-	 17a_and line 15 is	
	more, and if the organization meets the	_					. 570 01
	organization meets the facts-and-circle		•		• •		
18	Private foundation. If the organization			•			

Schedule A (Form 990) 2022

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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.)

qualify under the tests listed by Section A. Public Support	pelow, please comp	lete Part II.)						
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
1 Gifts, grants, contributions, and	(-),:-	(-, : :	(-,	(-)	(-,	(-)		
membership fees received. (Do not								
include any "unusual grants.")	34,565.	44,911.	30,329.	32,122.	37,078.	179,005.		
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	25,675.	42,169.	3,000.	11,782.	16,028.	98,654.		
3 Gross receipts from activities that								
are not an unrelated trade or bus- iness 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	60,240.	87,080.	33,329.	43,904.	53,106.	277,659.		
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.		
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						0.		
c Add lines 7a and 7b						0.		
8 Public support. (Subtract line 7c from line 6.)						277,659.		
Section B. Total Support								
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
9 Amounts from line 6	60,240.	87,080.	33,329.	43,904.	53,106.	277,659.		
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		23,153.	28,486.	31,438.	14,995.	98,072.		
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
c Add lines 10a and 10b		23,153.	28,486.	31,438.	14,995.	98,072.		
11 Net income from unrelated business activities not included on 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 VI.)								
13 Total support. (Add lines 9, 10c, 11, and 12.)	60,240.	110,233.	61,815.	75,342.	68,101.	375,731.		
14 First 5 years. If the Form 990 is for t	he organization's fir	st, second, third, fo	ourth, or fifth tax y	ear as a section 5	01(c)(3) organizatio	on,		
Section C. Computation of Publ	ic Support Per	centage						
15 Public support percentage for 2022 (line 8, column (f), di	ivided by line 13, co	olumn (f))		15	73.90 %		
16 Public support percentage from 202					16	79.26 %		
Section D. Computation of Inve	stment Income	Percentage						
17 Investment income percentage for 2	022 (line 10c, colun	nn (f), divided by lin	e 13, column (f))		17	26.10 %		
18 Investment income percentage from	2021 Schedule A, I	Part III, line 17			18	20.74 %		
19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not								
more than 33 1/3%, check this box a b 33 1/3% support tests - 2021. If the	nd stop here. The	organization qualifi	es as a publicly su	upported organizat	tion	X		
line 18 is not more than 33 1/3%, che								
20 Private foundation. If the organization								

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
_		
20		
3a		
3b		
3с		
4a		
415		
4b		
4c		
50		
5a		
5b		
5c		
6		
-		
7		
8		
9a		
9b		
9с		
30		
10a		
10b		
ıle A (Forn	n 990)	2022
-		

232024 12-09-22

Pai	rt IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
		elow, the governing body of a supported organization?	11a		
b		ily member of a person described on line 11a above?	11b		
		6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	112		
•		in Part VI.	11c		
Sec	tion E	B. Type I Supporting Organizations			
		<i>y</i> 11 5 5		Yes	No
1	Did th	e governing body, members of the governing body, officers acting in their official capacity, or membership of one or		100	110
•		supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported			
_		ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		, , , , , , , , , , , , , , , , , , , ,	2		
Sec	tion C	vised, or controlled the supporting organization. C. Type II Supporting Organizations			
				Yes	No
1	Wora.	a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	140
•		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		· ·			
		nagement of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	tion C	pported organization(s). D. All Type III Supporting Organizations			
		<i>y</i>		Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
•		ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	-	(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	•	ization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	-	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_					
		ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2		
3	•	ganization maintained a close and continuous working relationship with the supported organization(s). ason of the relationship described on line 2, above, did the organization's supported organizations have a			
3		cant voice in the organization's investment policies and in directing the use of the organization's			
	-	· · · · · · · · · · · · · · · · · · ·			
		e or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Sec	<u>suppo</u> tion E	rted organizations played in this regard. E. Type III Functionally Integrated Supporting Organizations			
1 a		the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below.	ı		
b		The organization satisfied the Activities rest. <i>Complete line 2 below.</i> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
C		The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins		اء	
2		ties Test. Answer lines 2a and 2b below.	struction	Yes	No
a		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of		103	140
u		apported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		supported organization(s) to which the organization was responsive: If Tes, then if I art Vindentity supported organizations and explain how these activities directly furthered their exempt purposes,			
		he organization was responsive to those supported organizations, and how the organization determined	2a		
b		nese activities constituted substantially all of its activities. e activities described on line 2a, above, constitute activities that, but for the organization's involvement,	<u> </u>		
D		r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		If the reasons for the organization's position that its supported organization(s) would have engaged in	2h		
2		activities but for the organization's involvement.	2b		
3		t of Supported Organizations. Answer lines 3a and 3b below.			
а		e organization have the power to regularly appoint or elect a majority of the officers, directors, or	За		
b		es of each of the supported organizations? If "Yes" or "No" provide details in Part VI. e organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
D		supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		
	U1 160 0				

ASSOCIATION INC

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations				
1	Check here if the organization satisfied the Integral Part Test as a qualify	ng trust on N	ov. 20, 1970 (<i>explain in</i> l	Part VI). See instructions.			
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3.	4					
5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
_	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
a	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,						
	see instructions).	4					
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
_6	Multiply line 5 by 0.035.	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
4	Enter greater of line 2 or line 3.	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-function	ally integrated	Type III supporting orga	nization (see			
	instructions).	- -		·			

Schedule A (Form 990) 2022

ASSOCIATION INC

Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Secti	on D - Distributions			Current Year				
1	Amounts paid to supported organizations to accomplish exe	mpt purposes	1					
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported						
	organizations, in excess of income from activity		2					
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3					
4	Amounts paid to acquire exempt-use assets		4					
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5					
_6	Other distributions (describe in Part VI). See instructions.		6					
7	Total annual distributions. Add lines 1 through 6.		7					
8	Distributions to attentive supported organizations to which the	ne organization is responsive						
	(provide details in Part VI). See instructions.		8					
9	Distributable amount for 2022 from Section C, line 6		9					
10	Line 8 amount divided by line 9 amount		10					
		(i)	(ii)	(iii)				
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2022	Distributable Amount for 2022				
1	Distributable amount for 2022 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2022 (reason-							
	able cause required - explain in Part VI). See instructions.							
3	Excess distributions carryover, if any, to 2022							
a	From 2017							
b	From 2018							
c	From 2019							
d	From 2020							
e	From 2021							
f_	Total of lines 3a through 3e							
g	Applied to underdistributions of prior years							
<u>h</u>	Applied to 2022 distributable amount							
<u>i</u>	Carryover from 2017 not applied (see instructions)							
<u>j_</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.							
4	Distributions for 2022 from Section D,							
	line 7: \$							
<u>a</u>	Applied to underdistributions of prior years							
<u> </u>	Applied to 2022 distributable amount							
<u> </u>	Remainder. Subtract lines 4a and 4b from line 4.							
5	Remaining underdistributions for years prior to 2022, if							
	any. Subtract lines 3g and 4a from line 2. For result greater							
	than zero, explain in Part VI. See instructions.							
6	Remaining underdistributions for 2022. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2023. Add lines 3j							
	and 4c.							
8	Breakdown of line 7:							
	Excess from 2018							
	Excess from 2019							
	Excess from 2020							
<u>a</u>	Excess from 2021 Excess from 2022							

Schedule A (Form 990) 2022

INTERNATIONAL SCHOOL PSYCHOLOGY ASSOCIATION INC

20-331<u>7540 Page 8</u> ASSOCIATION INC Schedule A (Form 990) 2022 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, Part VI line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

232028 12-09-22 Schedule A (Form 990) 2022

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL SCHOOL PSYCHOLOGY ASSOCIATION INC

Employer identification number 20-3317540

ADDOCIATION INC	1 20	3317340
FORM 990-EZ, PART I, LINE 4, OTHER INVESTMENT	INCOME:	
DESCRIPTION OF PROPERTY:		AMOUNT:
ROYALTIES		14,995.
FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:		
DESCRIPTION OF OTHER EXPENSES:		
COMMITTEES		
BANK FEES		
INTEREST & DIVIDEND INCOME EXPENSES		
EXCHANGE DIFFERENCES		
JCC CHARGES		
TOTAL TO FORM 990-EZ, LINE 16		
FORM 990-EZ, PART I, LINE 20, CHANGES IN NET A		
CHANGES IN NET ASSETS OR FUND BALANCES:		
PRIOR PERIOD ADJUSTMENT CURRENCY TRANSLATION		
CURRENCY TRANSLATION EXCHANGE GAIN (LOSS)		
TOTAL TO FORM 990-EZ, LINE 20		-1,432.
TOTAL TO TORE 330 EE, BIRL 20		1,102.
FORM 990-EZ, PART II, LINE 24, OTHER ASSETS:		
DESCRIPTION	BEG. OF YEAR	END OF YEAR
RECEIVABLES/ PREPAYMENTS/ACCRUED INCOME	96,394.	40,637.
EODW 000 EG DADW II IINE 06 OWIED IIADIII	TEG.	
FORM 990-EZ, PART II, LINE 26, OTHER LIABILITI		באם סם עם יי
DESCRIPTION	BEG. OF YEAR	END OF YEAR

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

Schedule O (Form 990) 2022

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Name of the organization	INTERNATIONAL SCHOOL PSYCHOLOGY ASSOCIATION INC		Employer id	Page 2 entification number L 7 5 4 0
ACCOUNTS PAYABLE	3	18,6	54.	20,388.
PREPAID MEMBERSH	HIP FEES	24,7	12.	16,331.
CAPITAL CAMPAIGN	N FUND PROVISION	15,0	00.	0.
ACCOUNTING FEES	ACCRUALS		0.	5,363.
TOTAL TO FORM 99	90-EZ, LINE 26	58,3	66.	42,082.
FORM 990-EZ, PAF	RT III, PRIMARY EXEMPT PURPOSE - 1	.PROMOTE	THE USE	OF SOUND
PSYCHOLOGICAL PR	RINCIPLES WITHIN THE CONTEXT OF EL	DUCATION		
INTERNATIONALLY.	•			
2.PROMOTE COMMUN	NICATION AMONG PROFESSIONALS WHO A	ARE COMMIT	TED TO	HE
IMPROVEMENT OF T	THE MENTAL HEALTH OF CHILDREN IN T	THE WORLD'	S SCHOOL	is.
3.ENCOURAGE THE	TRAINING AND EMPLOYMENT OF SCHOOL	PSYCHOLO	GISTS IN	1
COUNTRIES WHERE	THERE ARE NONE OR TOO FEW.			
4.PROMOTE THE PS	SYCHOLOGICAL RIGHTS OF ALL CHILDRE	EN THROUGH	OUT THE	
WORLD.				
5.INITIATE AND E	PROMOTE COOPERATION WITH OTHER ORG	SANIZATION	S WORKIN	IG FOR
THE PURPOSES SIM	MILAR TO THOSE OF ISPA IN ORDER TO	HELP CHI	LDREN.	
FORM 990-EZ, PAR	RT V, INFORMATION REGARDING PERSON	NAL BENEFI	T CONTRA	ACTS:
THE ORGANIZATION	N DID NOT, DURING THE YEAR, RECEIV	/E ANY FUN	DS, DIRE	ECTLY,
OR INDIRECTLY, T	TO PAY PREMIUMS ON A PERSONAL BENE	FIT CONTR	ACT.	
THE ORGANIZATION	N, DID NOT, DURING THE YEAR, PAY A	ANY PREMIU	MS, DIRE	ECTLY,
	ON A PERSONAL BENEFIT CONTRACT.		-	