

Application for Membership through March 31, 2024

Refer to Prorated Schedule of Dues below application. Must provide all information and sign and return this form with payment. 2023-2024 Dues Year ends March 31, 2024.

Please print and complete all information requested.	Areas	s of Interest (please check all that apply):
First Name: Last Name: Midd		ccounting Standards
	— L A	griculture, Forestry, Fishing, and Hunting rt, Entertainment, and Recreation
Date of Birth: Gender: Gender: Male Female Non-Binary		udit and Attest Services
Preferred Mailing Address: ☐ Home ☐ Business		ankruptcy, Insolvency, and Reorganization
Home Address:		roker-Dealer Jusiness Consulting (General)
	□ B	usiness Valuation
City:State/Province:Zip Code:Country:		onstruction orporate Accounting
Home Phone:Cell Phone:		orporate Accounting
Business Name:		ost Management ducational Services
Business Address:		mployee Benefit Plans
		inancial Institutions
City:State/Province:Zip Code:Country:		inancial Planning - Personal inancial Planning & Analysis
Business Phone:Business Fax:	_	raud and Forensics
	G	overnment
Your Current Position:		lealthcare Organizations Hospitals, HMOs, PPOs, Hospice)
Primary Email Address:	,	ospitality
Secondary Email Address:	_	luman Resources
		nitial Public Offerings (IPOs) Insurance
College/University:		nternational Business
State/Province:Zip Code:Country:		itigation Services Nanufacturing
Degree: Date Graduated:		landiacturing Mergers and Acquisitions
Degree:Date Graduated:	N	lining, Quarrying & Oil and Gas Extraction
(CPAs only) Primary State Certified:Date Certified:		lot-for-Profit Organizations ractice Management
Please choose one:		rofessional Service Firms
\square Black/African American \square Alaskan/Native American \square Asian/Pacific Islander \square White/Non-Hispanic		eal Estate
\square Hispanic/Latino \square Two or more races \square Other \square Prefer not to answer		etail
Are you an AICPA member? ☐ Yes ☐ No Have you been an ICPAS member before? ☐ Yes ☐ No		ecurities and Derivatives trategic Business Planning
	□ S	upply Chain Management
Check the box for the membership type which is applicable to you:		ax - Business
Membership Types		ax - Estate, Gift, and Trust ax - Flow-through Entities
Public - CPAs employed at firms whose primary business is public accounting		ax - Individual
Corporate Finance/Business - CPAs employed at companies whose primary business is not public accounting		ax - Practice and Procedures
☐ Education - CPAs employed by schools, colleges, or universities ☐ Government - CPAs employed by local, state, or federal agencies		ax - State and Local echnology
□ Not-for-Profit - CPAs employed by not-for-profit organizations		ransportation and Warehousing
□ Professional Affiliate (non-CPA) - Members who do not hold the CPA credential but are in the process of pursuing it or		reasury and Cash Management
have business relevancy to the accounting profession, provide products/services to CPAs, or hold positions such as		tilities
non-CPA accountants, managers, CEOs, CFOs	i n	Vaste Management and Remediation Services
PAYMENT INFORMATION. Signature required. Application will NOT be	a processed without sig	nature
r Armett in Onination organical required application will not be	processed without sig	naturer
METHOD OF PAYMENT: ☐ Check or Money Order (payable in U.S. Dollars to Illinois CPA Society)	AMOUNT OF	PAYMENT:
□ Visa □ MasterCard □ Discover Card □ American Express Card #:		_Exp.:CVV:
The Illinois CPA Society estimates that the nondeductible portion of your dues which is allocated to lobbying is 4.9%. \$5 of dues constitute portion of your dues. If you do not wish to make a contribution, you may deduct \$5 from your dues amount.	es a contribution to CPAs for Polit	tical Action and is included in the nondeductible
I acknowledge that I have read and agree to abide by Article II Sections 2.9-2.13, Articles VII (Code of Professional Conduct and Joint Enfor (Located on our website at www.icpas.org, under the Governance heading on the About ICPAS page).	cement of Ethical Standards with	h AICPA), VIII, IX and XII of the Society bylaws
Signature of Applicant:		Date:

PRORATED SCHEDULE OF DUES

April 1, 2023 through March 31, 2024

	ANNUAL DUES	1st Quarter Apr May Jun	2nd Quarter Jul Aug Sept	3rd Quarter Oct Nov Dec	4th Quarter Jan Feb Mar
CPA MEMBERS IN PUBLIC ACCOUNTING					
Certificate held 0-3 years	\$405	\$405	\$325	\$245	\$165
Certificate held 4+ years	\$490	\$490	\$393	\$296	\$199
CPA MEMBERS IN CORPORATE FINANCE					
Certificate held 0-3 years	\$320	\$320	\$257	\$194	\$131
Certificate held 4+ years	\$490	\$490	\$393	\$296	\$199
CPA MEMBERS IN EDUCATION/GOVERNMENT/NOT-FOR-PROFIT					
Certificate held 0-3 years	\$270	\$270	\$217	\$164	\$111
Certificate held 4+ years	\$370	\$370	\$297	\$224	\$151
OTHER					
Retired	\$145	\$145	\$117	\$89	\$61
AFFILIATE MEMBERS (Non CPA)					
Professional (0-3 years since college graduation)	\$320	\$320	\$257	\$194	\$131
Professional (4+ years since college graduation)	\$490	\$490	\$393	\$296	\$199

These rates are valid April 1, 2023 through March 31, 2024 Dues are subject to change. The Illinois CPA Society estimates that the nondeductible portion of your dues which is allocated to lobbying is 4.9%. \$5 of dues constitutes a contribution to CPAs for Political Action and is included in the nondeductible portion of your dues. If you do not wish to make a contribution, you may deduct \$5 from your dues amount.