

IOWA SOCIETY OF CPAS Membership Application



You may apply for ISCPA membership by completing and submitting this application form or completing the form online at www.iacpa.org/join.

Name _____ Preferred name _____
first middle initial last
(As you would like it to appear on your ISCPA record.)

Former last name (if applicable) _____ Gender (optional) Male Female

Date of birth _____ Preferred pronouns (optional) He/Him She/Her They/Them

Race/Ethnicity (optional) Black American Indian Asian/Pacific Islander Latino/a White Multiracial

Home address _____ PO Box _____

City _____ State _____ ZIP _____

Mobile phone # (_____) _____ May we text you? Yes No

Spouse _____

College/University _____ Year graduated _____

Advanced degrees/professional credentials (MBA, ABV, etc.) _____

If you are certified, please provide the following information from your original CPA certificate.

Original certificate number _____ Issued by the state of _____ Date issued _____

If you hold an Iowa reciprocal CPA certificate, provide certificate #: _____ Date issued _____

Are you a member of AICPA? Yes No If yes, AICPA member number _____

If not employed, please check one Full-time student Retired Other _____

Contact Information/Preferences

Preferred address for ISCPA mailings Office Home May we text you? Yes No

Preferred address for CPE mailings Office Home

May we send you ISCPA e-mail messages? Yes No

Preferred e-mail address _____

Secondary e-mail address _____

Include my information in online ISCPA membership directory (members only section of website) Yes No

Professional Information

Employer _____

Street address _____ PO Box _____

City _____ State _____ ZIP _____

Job title _____ Business Website _____

General office phone # (_____) _____ Direct phone # (_____) _____ ext. _____

Interests

This section will be used to help identify your areas of interest so we may provide you with relevant information and continuing professional education opportunities.

- Agribusiness
- Auditing
- Auto dealers
- Banking
- Bankruptcy/insolvency
- Broker/dealer
- Budgeting & forecasting
- Business valuation
- Career development
- Colleges & universities
- Construction
- Consulting
- Controllership
- Debt financing
- Employee benefit plans
- Financial planning
- Government
- Health care/hospitals
- Human resources
- Information technology
- Insurance
- Internal Audit
- International business
- Inventory control
- Investments
- Leadership
- Legal
- Litigation support
- Management - general
- Management of accounting practice (MAP)
- Manufacturing
- Mergers/acquisitions
- Nonprofits/associations
- PCAOB
- Real estate
- School districts
- Small business
- State & Local Tax
- Strategic planning
- Taxation - corporate
- Taxation - estate & gift
- Taxation - exempt organizations
- Taxation - individual
- Taxation - international
- Taxation - sales & use

Disciplinary & Criminal History

1. Please describe any professional licensure revocation and other professional disciplinary actions:

2. Please describe any conviction of a crime described in Iowa Code section 542.5(2):

IMPORTANT: Application to be a member of the ISCPA is subject to meeting the membership requirements of the ISCPA and Board of Directors approval. There is no right to appeal a membership denial.

ⁱ Iowa Code section 542.5(2) lists the following criminal convictions: forgery, embezzlement, obtaining money under false pretenses, theft, extortion, conspiracy to defraud, or other similar offense, or of any crime involving moral character or honesty, in a court of competent jurisdiction in this state, or another state, territory, or a district of the United States, or in a foreign jurisdiction, may be denied a certificate by the board on the grounds of the conviction. For purposes of this subsection, "conviction" means a conviction for an indictable offense and includes a guilty plea, deferred judgment from the time of entry of the deferred judgment until the time the defendant is discharged by the court without entry of judgement, or other finding of guilt by a court of competent jurisdiction.

Where did you hear about ISCPA?

Where did you hear about us?

- My employer I was a student member From a current ISCPA member (Name: _____)
- ISCPA continuing professional education course Social media (Platform: _____)

Payment Information

Total Amount Submitted \$ _____

(See back page for prorated dues schedule. Please note the amounts listed include the \$35 application fee.)

Check Type Personal Company

To pay by credit card, please join online at www.iacpa.org/join or call 515-223-8161.

To pay by ACH, please email form to iacpa@iacpa.org.

If paying by credit card, your membership with ISCPA will auto-renew annually in May. We'll remind you about the upcoming payment via email and you can update or cancel your auto-renewal at any time, online or by emailing iacpa@iacpa.org. If you do not wish to enroll in auto-renewal, please check the box below.

I do not wish to auto-renew my dues and will make annual payments.

Verification

- To the best of my knowledge, the information contained herein is accurate and I agree to be governed by the bylaws of the Iowa Society of CPAs.

Return this form with payment to Iowa Society of CPAs (ISCPA)
1415 28th St, Ste 450
West Des Moines, IA 50266-1419
515-223-8161 • 800-659-6375 (in Iowa)

Your membership will be processed upon receipt of this application and your payment.
Welcome! Watch your inbox for a welcome message from ISCPA and your mailbox for your New Member Packet!

ISCPA Prorated Dues Schedule

The prorated dues schedule below includes a one-time \$35 application fee

What to expect when applying for membership in January-May:

Individuals should follow the Jan-May section of the chart below. This will pay your membership through April 30, 2026.

Your prorated share of dues must be returned with your completed application.

Please note: Contributions, gifts, or dues paid to ISCPA are not deductible as charitable contributions for income tax purposes. However, they may be deductible as ordinary and necessary business expenses subject to restrictions imposed as a result of association lobbying activities.

Current Annual Dues						Associate	Affiliate
	\$325	\$300	\$275	\$225	\$100	\$325	\$175
Period	Class 1	Class 2	Class 3	Class 4	Class 5	Class 7	Class 8
Jan-May	\$360	\$335	\$310	\$260	\$135	\$360	\$210
June	\$335	\$312	\$289	\$243	\$127	\$335	\$198
July	\$310	\$288	\$268	\$226	\$119	\$310	\$185
Aug	\$285	\$265	\$248	\$209	\$110	\$285	\$173
Sept	\$260	\$242	\$227	\$192	\$102	\$260	\$160
Oct	\$235	\$218	\$206	\$175	\$94	\$235	\$148
Nov	\$210	\$195	\$185	\$158	\$86	\$210	\$135
Dec	\$185	\$172	\$164	\$140	\$77	\$185	\$123

For membership class information, see page 2.