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Form **990****Return of Organization Exempt From Income Tax**

OMB No 1545-0047

2009**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2009 calendar year, or tax year beginning , 2009, and ending , 20	
B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization <u>Burlington Woods & Marsh Assoc.</u> Doing Business As <u>of Indianapolis, Inc</u> Number and street (or P.O. box if mail is not delivered to street address) Room/suite <u>135 W. MARKET STREET</u> <u>H249</u> City or town, state or country, and ZIP + 4 <u>INDIANAPOLIS, IN 46204</u>
	D Employer identification number <u>35-0203710</u>
	E Telephone number <u>317-632-4104</u>
	G Gross receipts \$
	F Name and address of principal officer:
I Tax-exempt status ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527	
J Website: ▶	
K Form of organization: ☐ Corporation ☐ Trust ☐ Association ☐ Other ▶	
L Year of formation: M State of legal domicile	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>1147 WOODWAY - EXCHANGE OF INFORMATION FOR MEMBERS OF THE COMMERCIAL REAL ESTATE INDUSTRY.</u>	
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3 Number of voting members of the governing body (Part VI, line 1a)	3 <u>16</u>
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4
	5 Total number of employees (Part V, line 2a)	5 <u>1</u>
	6 Total number of volunteers (estimate if necessary)	6 <u>50</u>
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a <u>0</u>
7b Net unrelated business taxable income from Form 990-T, line 34	7b <u>0</u>	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year <u>0</u> Current Year <u>0</u>
	9 Program service revenue (Part VIII, line 2g)	<u>209,580</u> <u>186,657</u>
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>17,434</u> <u>7,194</u>
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>182,812</u> <u>167,190</u>
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>408,826</u> <u>363,041</u>
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u>136,946</u> <u>132,974</u>
	16a Professional fundraising fees (Part IX, column (A), line 11e)	
	b Total fundraising expenses (Part IX, column (D), line 25) ▶	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<u>239,608</u> <u>191,660</u>	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u>366,554</u> <u>324,634</u>	
19 Revenue less expenses. Subtract line 18 from line 12	<u>42,272</u> <u>38,407</u>	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year <u>400,691</u> End of Year <u>436,748</u>
	21 Total liabilities (Part X, line 26)	
	22 Net assets or fund balances. Subtract line 21 from line 20	<u>400,691</u> <u>436,748</u>

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of officer <u>S. J. Borkman</u> Date <u>5/14/10</u>		Type or print name and title <u>Executive Director</u>	
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed ☐	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN	Phone no ()	

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☐ No

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

Cat No 11282Y

Form **990** (2009)

SCANNED JUL 07 2010

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Part III Statement of Program Service Accomplishments

- 1 Briefly describe the organization's mission:
 The mission of IDOMA Indianapolis is to actively and aggressively represent the interests of the commercial real estate industry through advocacy, networking, dissemination of information and professional development.
- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
 If "Yes," describe these new services on Schedule O.
- 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
 If "Yes," describe these changes on Schedule O.
- 4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 11,005 including grants of \$) (Revenue \$ 25,747)

Seminar - 1) Update on Commercial Real Estate
 2) Tenant Retention
 Expenses: Speaker fees, site & food expenses
 plus printing and postage for
 registration

4b (Code:) (Expenses \$ 22,084 including grants of \$) (Revenue \$ 77,950)

Trade Show - 2nd exhibit booth all
 relating to the commercial
 real estate industry. Providing
 members interested with
 industry and other information
 Expenses primarily site & food
 expense plus postage and
 printing for registration

4c (Code:) (Expenses \$ 47,449 including grants of \$) (Revenue \$ 77,800)

Annual Golf Outing which included
 dinner, drinks, prizes, etc.
 in a hotel in Indianapolis
 Expenses primarily for food & drink
 and other golf expenses plus site
 and postage for registration materials

4d Other program services (Describe in Schedule O.)
 (Expenses \$ 27,931 including grants of \$) (Revenue \$ 28,210)

4e Total program service expenses 110,519

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		☒
2 Is the organization required to complete Schedule B, Schedule of Contributors?		☒
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		☒
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		☒
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		☒
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		☒
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		☒
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		☒
9 Did the organization report an amount in Part X, line 21; 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		☒
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		☒
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		☒
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		☒
• 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.		☒
• 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.		☒
• 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.		☒
• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		☒
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		☒
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.		☒
12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.	Yes	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		☒
14a Did the organization maintain an office, employees, or agents outside of the United States?		☒
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		☒
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, Part II		☒
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, Part III		☒
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		☒
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		☒
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		☒
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		☒

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21	☒
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	☒
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23	☒
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a	☒
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	☒
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	☒
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	☒
25a Section 501(c)(3) 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	☒
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	25b	☒
26 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	☒
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27	☒
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):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a	☒
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28b	☒
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.	28c	☒
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.	29	☒
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.	30	☒
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.	31	☒
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	☒
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33	☒
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.	34	☒
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35	☒
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.	36	☒
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.	37	☒
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38	☒

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	☒	☐
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	☐	☐
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	☐	☒
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	☒	☐
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	☒	☐
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	☐	☒
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	☐	☐
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	☐	☒
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	☐	☐
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	☐	☒
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	☐	☒
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	☐	☐
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	☐	☒
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	☐	☐
7	Organizations that may receive deductible contributions under section 170(c).	☐	☐
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	☐	☒
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	☐	☐
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	☐	☒
d	If "Yes," indicate the number of Forms 8282 filed during the year	☐	☐
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐	☒
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	☐	☒
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	☐	☐
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	☐	☐
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?	☐	☐
9	Sponsoring organizations maintaining donor advised funds.	☐	☐
a	Did the organization make any taxable distributions under section 4966?	☐	☐
b	Did the organization make a distribution to a donor, donor advisor, or related person?	☐	☐
10	Section 501(c)(7) organizations. Enter:	☐	☐
a	Initiation fees and capital contributions included on Part VIII, line 12	☐	☐
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	☐	☐
11	Section 501(c)(12) organizations. Enter:	☐	☐
a	Gross income from members or shareholders	☐	☐
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	☐	☐
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	☐	☒
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	☐	☐

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 instructions.

Section A. Governing Body and Management

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body	16			
b Enter the number of voting members that 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?				✓
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?				✓
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?				✓
5 Did the organization become aware during the year of a material diversion of the organization's assets?			✓	
6 Does the organization have members or stockholders?			✓	
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?			✓	
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?				
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?				
b Each committee with authority to act on behalf of the governing body?				
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				✓

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ►
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☐ Another's website ☐ Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► 1111 North Main St, 1st Floor, Minneapolis, MN 55401
1111 North Main St, 1st Floor, Minneapolis, MN 55401

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Shirley J. [unclear]	50.5							75,048	0	0
1b Total								48,048	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual.
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3	☒	☐
4	☒	☐
5	☒	☐

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue				(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 Federated campaigns	1a	5				
	b Membership dues	1b	167,190				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions).	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f		167,190				
Program Service Revenue	2a	Business Code	42,480				
	b	30,467					
	c	35,460					
	d	77,800					
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		186,057				
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		9,194			
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6a Gross Rents		(i) Real	(ii) Personal				
b Less: rental expenses							
c Rental income or (loss)							
d Net rental income or (loss)							
7a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
b Less: cost or other basis and sales expenses							
c Gain or (loss)							
d Net gain or (loss)							
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		a					
b Less: direct expenses		b					
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19		a					
b Less: direct expenses		b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances		a					
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue		Business Code					
11a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions.			363,441				

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	56,952			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	27,250			
9 Other employee benefits	19,440			
10 Payroll taxes	29,332			
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	4,782			
14 Information technology	1,450			
15 Royalties				
16 Occupancy	3,900			
17 Travel	2,871			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	110,519			
20 Interest				
21 Payments to affiliates	35,437			
22 Depreciation, depletion, and amortization				
23 Insurance	2,300			
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a Postage 3,031				
b Printing 5,957				
c Mail 18,448				
d Supplies 3,521				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	384,574			
26 Joint costs. Check here ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	400,691	1	436,748
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	400,691	16	436,748	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		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. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25		26	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☐ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances		33	
34 Total liabilities and net assets/fund balances	400,691	34	436,748	

Part XI Financial Statements and Reporting

- 1 Accounting method used to prepare the Form 990: ☒ Cash ☐ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . .
- b Were the organization's financial statements audited by an independent accountant? . . .
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . .
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:
☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . .
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		
2b		
2c		
3a		
3b		

2009 BOMA YTD Financial Report

2009 Actuals

	Jan	Feb	March	April	May	June	July	August	Sept	October	Nov.	Dec.	TOTAL
INCOME													
Active Dues	32,115	18,090	9,045	1,005	1,005	6,045							67,305
Associate Dues	36,165	37,045	13,130	1,010	6,030	6,505							99,885
Seminars	11,640	2,817	3,375		95	4,975	2,845						25,747
Trade Show	6,600	10,300	12,500	9,200	2,850	4,550	1,000		450				47,450
Golf			11,250	5,000	6,675	26,710	18,165	1,550	4,250		4,200		77,800
Luncheons	3,627	1,986	5,425	815	375	1,586	1,600		1,296	2,250	1,250	8,000	28,210
Interest	412	1,567	350	505	3,330	507	617	506	350	350	350	350	9,194
Corp Dinner						5,000							5,000
Reserve Fund												2,450	2,450
Actual Monthly Income	90,559	71,805	55,075	17,535	20,360	55,878	24,227	2,056	6,346	2,600	5,800	10,800	
YearToDate Income		162,364	217,439	234,974	255,334	311,212	335,439	337,495	343,841	346,441	352,241	363,041	363,041
Budgeted Monthly Income	51,443	109,545	51,440	31,333	1,333	4,833	1,333	76,333	1,333	4,833	1,333	9,833	
Budgeted YearToDate Income		160,988	212,428	243,761	245,094	249,927	251,260	327,593	328,926	333,759	335,092	344,925	
EXPENSE													
Wages	4,746	4,746	4,746	4,746	4,746	4,746	4,746	4,746	4,746	4,746	4,746	4,746	56,952
Pay Tax	2,451	2,438	2,438	2,438	2,438	2,438	2,438	2,438	2,438	2,438	2,438	2,501	29,332
Staff SEP					10,250								17,000
Parking	0	0	0	0	0	0	0	0	0	0	0	0	0
Rent	500	500	500	500	500	500	500	400	0	0	0	0	3,900
Telephone	379	360	157	394	514	144	284	280	348	348	348	348	3,904
Supplies			156	80		257			325				818
Postage	530	666	55	25	210	39	828	220		60	400		3,031
Legislative													
Ins/Fees						350				350	1,600		2,300
Intl Dues	11,857	23,580											35,437
Travel		1,121					1,150						2,271
Printing	1,050		2,269	68	588	999	45		115	653	125	45	5,957
Health Ins	1,620	1,620	1,620	1,620	1,620	1,620	1,620	1,620	1,620	1,620	1,620	1,620	19,440
Misc	788	1,859	967	821	783	696	795	805	866	1,018	850	8,200	18,448
Seminars	198	2,121	4,628			3,705		324	29				11,005
Trade Show	143	233		19,020	2,688								22,084
Golf				171	1,800			43,588	1,800	140			47,499
Luncheons		4,814	4,417	5,500						6,700		8,500	29,931
Speakers	500									3,025			3,525
WebMain						450						1,000	1,450
Actual Monthly Expense	24,762	44,058	21,953	35,383	26,137	15,844	12,404	54,421	12,287	21,098	12,127	43,960	324,534
YearToDate Expense		68,820	90,773	126,156	152,293	168,237	180,641	235,062	247,349	268,447	280,574	324,534	
Budgeted Monthly Expense	35,992	43,221	43,841	28,910	21,410	23,660	20,160	58,660	12,410	24,760	11,160	20,172	
Budgeted YearToDate Expense		79,213	123,054	151,964	173,374	197,034	217,194	275,854	288,264	313,024	324,184	344,356	
Net Income	65,797	27,747	33,122	-17,848	-5,777	39,934	11,823	-52,365	-5,941	-18,498	-6,327	-33,160	38,507
Beginning 2009	400,691	466,488	494,235	527,357	507,059	501,282	541,216	553,039	500,674	494,733	476,235	469,908	-2,450
Actual Funds Total	466,488	494,235	527,357	507,059	501,282	541,216	553,039	500,674	494,733	476,235	469,908	436,748	

Note: Expenses approved for 1) Website Update 2) Member S Survey were approved at the December 2008 Board Meeting to be paid from reserves rather than reflected in the 2009 budget projections
 Sam Kayes - \$1,000.00 - People First Survey - \$1,450.00 Total 2,450

Note: 1,010 Allison -2010 Dues - 15 for 12 Not included in totals
 1,010 Thermo Scan - 15 for 12 - No t included in totals

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