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Form 990-EZ

## Short Form

## Return of Organization Exempt From Income Tax

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

- Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form
- The organization may have to use a copy of this return to satisfy state reporting requirements.

2009

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

A For the 2009 calendar year, or tax year beginning 01-01-2009

, and ending 12-31-2009

B Check if applicable

- Address change
- Name change
- Initial return
- Terminated
- Amended return
- Application pending

Please use IRS label or print or type.  
See Specific Instructions.

C Name of organization Columbus Board of Realtors Inc	D Employer identification number 35-1177924
Number and street (or P O box, if mail is not delivered to street address) 430 5th Street	E Telephone number (812) 378-2626
City or town, state or country, and ZIP + 4 Columbus, IN 47201	F Group Exemption Number ►

\* Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method  Cash  Accrual  
Other (specify) ►

I Website: ► WWW.COLUMBUSINHOMES.COM

J Tax-Exempt status (check only one)  501(c) (6) (insert no)  4947(a)(1) or  527

K Check ► if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 349,028

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

1	Contributions, gifts, grants, and similar amounts received	1	
2	Program service revenue including government fees and contracts	2	104,192
3	Membership dues and assessments	3	216,992
4	Investment income	4	3,749
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	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ►	6a	
a	Gross revenue (not including \$ of contributions reported on line 1)	6b	
b	Less direct expenses other than fundraising expenses	6c	
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	7a	
7a	Gross sales of inventory, less returns and allowances	7b	
b	Less cost of goods sold	7c	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	8	24,095
8	Other revenue (describe ►)	9	349,028
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		
10	Grants and similar amounts paid (attach schedule) ►	10	1,600
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	56,358
13	Professional fees and other payments to independent contractors	13	31,350
14	Occupancy, rent, utilities, and maintenance	14	3,000
15	Printing, publications, postage, and shipping	15	78,292
16	Other expenses (describe ►)	16	175,160
17	<b>Total expenses.</b> Add lines 10 through 16	17	345,760
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	3,268
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	424,912
20	Other changes in net assets or fund balances (attach explanation)	20	
21	Net assets or fund balances at end of year Combine lines 18 through 20	21	428,180

## Part II Balance Sheets—If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

- 22 Cash, savings, and investments
- 23 Land and buildings
- 24 Other assets (describe ►)
- 25 **Total assets**
- 26 **Total liabilities** (describe ►)
- 27 **Net assets or fund balances** (line 27 of column (B) must agree with line 21)

(A) Beginning of year	(B) End of year
424,912	22 428,180
	23
0	24
424,912	25 428,180
0	26 0
424,912	27 428,180



Part V Other Information (Note the statement requirements in the instructions for Part V.)			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		33	No
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		34	No
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033 (e) notice, reporting, and proxy tax requirements?		35a	Yes
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		35b	Yes
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		36	No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ►	37a	0	
b	Did the organization file <b>Form 1120-POL</b> for this year?		37b	
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		38a	No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved		38b	
39	<b>Section 501(c)(7) organizations.</b> Enter		39a	
a	Initiation fees and capital contributions included on line 9		39b	
b	Gross receipts, included on line 9, for public use of club facilities			
40a	<b>Section 501(c)(3) organizations.</b> Enter amount of tax imposed on the organization during the year under section 4911 ► _____, section 4912 ► _____, section 4955 ► _____			
b	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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		40b	
c	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► _____			
d	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Enter amount of tax on line 40c reimbursed by the organization ► _____			
e	<b>All organizations.</b> 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	No
41	List the states with which a copy of this return is filed ► IN _____			
42a	The organization's books are in care of ► JAYNE HEGE _____ Telephone no ► (812) 378-2626			
	430 5TH STREET Located at ► COLUMBUS, IN _____ ZIP + 4 ► 47201			
b	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)?		42b	Yes
	If "Yes," enter the name of the foreign country ► _____			No
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</b>			
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?		42c	No
	If "Yes," enter the name of the foreign country ► _____			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here ► _____ and enter the amount of tax-exempt interest received or accrued during the tax year ► 43			
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ.		44	No
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ.		45	No

**Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.**

All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

		<b>Yes</b>	<b>No</b>
<b>46</b>	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	<b>46</b>	
<b>47</b>	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	<b>47</b>	
<b>48</b>	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<b>48</b>	
<b>49a</b>	Did the organization make any transfers to an exempt non-charitable related organization?	<b>49a</b>	
	<b>b</b> If "Yes," was the related organization a section 527 organization?	<b>49b</b>	
<b>50</b>	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."		

<b>(a)</b> Name and address of each employee paid more than \$100,000	<b>(b)</b> Title and average hours per week devoted to position	<b>(c)</b> Compensation	<b>(d)</b> Contributions to employee benefit plans & deferred compensation	<b>(e)</b> Expense account and other allowances

**50(f)** Total number of other employees paid over \$100,000 . . . . . ► \_\_\_\_\_

**51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

<b>(a)</b> Name and address of each independent contractor paid more than \$100,000	<b>(b)</b> Type of service	<b>(c)</b> Compensation

**51(d)** Total number of other independent contractors each receiving over \$100,000 . . . . . ► \_\_\_\_\_

<b>Please Sign Here</b>	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>JAYNE HEGE ASSOCIATION EXECUTIVE</u> Type or print name and title	Date 2010-11-13	Date 2010-11-13

<b>Paid Preparer's Use Only</b>	Preparer's signature Blue & Co LLC Firm's name (or yours if self-employed), address, and ZIP + 4 627 Washington St Columbus, IN 47201	Date 2010-11-13	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (See instructions) EIN Phone no (812) 376-9245

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ►  Yes  No

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 35-1177924  
**Name:** Columbus Board of Realtors Inc

**Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees**

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SANDY TEMPLE 430 5TH STREET COLUMBUS, IN 47201	PRESIDENT 5 00	0	0	0
JEFF JEWETT 430 5TH STREET COLUMBUS, IN 47201	PRESIDENT - ELECT 5 00	0	0	0
KATHY FINK 430 5TH STREET COLUMBUS, IN 47201	SECRETARY 5 00	0	0	0
NANCY STROIA 430 5TH STREET COLUMBUS, IN 47201	TREASURER 5 00	0	0	0
VICKY GELFIUS 430 5TH STREET COLUMBUS, IN 47201	PAST PRESIDENT 5 00	0	0	0
ROBERTA BOTTORFF 430 5TH STREET COLUMBUS, IN 47201	DIRECTOR 2 00	0	0	0
WADE MYERS 430 5TH STREET COLUMBUS, IN 47201	DIRECTOR 2 00	0	0	0
CLINT GOODIN 430 5TH STREET COLUMBUS, IN 47201	DIRECTOR 2 00	0	0	0
JEFF HILYCORD 430 5TH STREET COLUMBUS, IN 47201	DIRECTOR 2 00	0	0	0
RODNEY FINKE 430 5TH STREET COLUMBUS, IN 47201	DIRECTOR 2 00	0	0	0
JAN HEXAMER-GARDNER 430 5TH STREET COLUMBUS, IN 47201	DIRECTOR 2 00	0	0	0
JODI WRIGHT 430 5TH STREET COLUMBUS, IN 47201	STATE DELEGATE/DIRECTOR 2 00	0	0	0
CHERYL STUCKWISH 430 5TH STREET COLUMBUS, IN 47201	PRESIDENT - SCILEX 5 00	0	0	0
JEFF JEWETT 430 5TH STREET COLUMBUS, IN 47201	VICE PRESIDENT - SCILEX 5 00	0	0	0
JODI WRIGHT 430 5TH STREET COLUMBUS, IN 47201	SECRETARY - SCILEX 5 00	0	0	0
ANNETTE DONICA BLYTHE 430 5TH STREET COLUMBUS, IN 47201	TREASURER - SCILEX 5 00	0	0	0
DON DAVIDSON 430 5TH STREET COLUMBUS, IN 47201	MANAGER - SCILEX 2 00	0	0	0
VICKY GELFIUS 430 5TH STREET COLUMBUS, IN 47201	MANAGER - SCILEX 2 00	0	0	0
JEFF FINKE 430 5TH STREET COLUMBUS, IN 47201	MANAGER - SCILEX 2 00	0	0	0
JAN HEXAMER-GARDNER 430 5TH STREET COLUMBUS, IN 47201	MANAGER - SCILEX 2 00	0	0	0
TIM SCHEDIT 430 5TH STREET COLUMBUS, IN 47201	MANAGER - SCILEX 2 00	0	0	0
JAYNE HEGE 430 5TH STREET COLUMBUS, IN 47201	ASSOCIATION EXECUTIVE 40 00	56,358	0	0

## TY 2009 Grants and Similar Amounts Paid Schedule

**Name:** Columbus Board of Realtors Inc**EIN:** 35-1177924

<b>Item No.</b>	1
<b>Class of Activity</b>	CHARITABLE
<b>Donee's Name</b>	LOVE CHAPEL
<b>Donee's Address</b>	311 CENTER ST COLUMBUS, IN 47201
<b>Amount (FMV)</b>	1,500
<b>Purpose of Payment to Affiliate</b>	
<b>Relationship</b>	NONE
<b>Description</b>	
<b>Book Value</b>	
<b>How BV Determined</b>	
<b>How FMV Determined</b>	
<b>Date of Gift</b>	2009-12

<b>Item No.</b>	2
<b>Class of Activity</b>	CHARITABLE
<b>Donee's Name</b>	COLUMBUS ANIMAL SHELTER
<b>Donee's Address</b>	2730 ARNOLD ST COLUMBUS, IN 47203
<b>Amount (FMV)</b>	100
<b>Purpose of Payment to Affiliate</b>	
<b>Relationship</b>	NONE
<b>Description</b>	
<b>Book Value</b>	
<b>How BV Determined</b>	
<b>How FMV Determined</b>	
<b>Date of Gift</b>	2009-09

## TY 2009 Other Expenses Schedule

**Name:** Columbus Board of Realtors Inc**EIN:** 35-1177924

Description	Amount
ADVERTISING	25,368
MEETINGS	4,865
COMPUTER EXPENSES	2,162
DUES EXPENSE	50,376
EDUCATION EXPENSES	2,220
PARAGON EXPENSE	48,859
RPAC EXPENSE	2,282
SENTRILOCK EXPENSE	20,831
FEDERAL TAXES PAID	337
STATE ESTIMATED TAXES PAID	978
DIRECTOR EXPENSES	970
PRESIDENTS' EXPENSES	5,702
INAUGURAL EXPENSE	3,201
SUPPLIES	1,882
TELEPHONE	1,458
INSURANCE	1,154
MISCELLANEOUS EXPENSES	2,515

## TY 2009 Other Revenues Schedule

**Name:** Columbus Board of Realtors Inc

**EIN:** 35-1177924

Description	Amount
EDUCATION INCOME	2,105
SENTRILOCK INCOME	2,440
FINES	2,400
TAX REFUND	3,698
MISCELLANEOUS	13,452

## TY 2009 Transfers Personal Benefits Contracts Declaration

**Name:** Columbus Board of Realtors Inc

**EIN:** 35-1177924

**Declaration:** The organization did not, during the year, receive any funds, directly, or indirectly, to pay premiums on a personal benefit contract. The organization, did not, during the year, pay any premiums, directly, or indirectly, on a personal benefit contract.