

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No 1545-1150

2009

**Open to Public** Inspection

Dep	artment o	of the Treasury	assets less than \$1,250,000 at the  The organization may have to use a copy of the				i	Inspection			
A	A For the 2009 calendar year, or tax year beginning , and ending										
В							D Emp	loyer identification number			
	Address	Address change use IRS					·	•			
П	Name change label or print or ADA BOARD OF REALTORS, INC					73	-1254154				
	Initial ref	1'	Number and street (or P O box, if mail is not delivered to	street address	s)	Room/suite	E Tele	E Telephone number			
	Termina	tion See	P.O. BOX 2298				58	0-332-2439			
	Amende	Specific Instruc-	City or town, state or country, and ZIP + 4				F Grou	Group Exemption			
	Applicati	ion pending <b>tions</b> .	ADA	OK 7482	21		Num	ber <b>•</b>			
	• Sec	tion 501(c)(3) organi	zations and 4947(a)(1) nonexempt charitable true	sts must att	ach	G Accountin	g method	X Cash Accrual			
_			mpleted Schedule A (Form 990 or 990-EZ).			Other (specify)	<u> </u>				
I	Websit	te: <b>  WWW.US</b>	SAMLS.NET/ADA			H Check ▶		organization is not			
<u>1</u>		empt status (check only on	<del></del>	1947(a)(1) or				edule B (Form 990,			
K	Check	_	ganization is not a section 509(a)(3) supporting orga		-		=	ore than \$25,000 A			
_			turn is not required, but if the organization chooses					01 200			
느	<del></del>		to determine gross receipts, if \$500,000 or more, file Form				<u>▶ \$</u>				
	art I		rpenses, and Changes in Net Assets or	rung Bai	ances	(See the instru		or Paπ I.)			
	1		nts, and similar amounts received				1	2 150			
	2		enue including government fees and contracts	CEI	e em7	ATEMENT 1	2	2,150			
	3	Membership dues ar	nd assessments	SEI	e olr	SIEMENI I	3	88,813 376			
0	4 50	Investment income	nale of accets other than inventory	1	- 1		4	370			
2010	5a		sale of assets other than inventory asis and sales expenses	-	5a   5b						
ಞ	6		of assets other than inventory (Subtract line 5b from line 5a	م. ا	30 [						
	6	` '	vities (complete applicable parts of Schedule G) If any amor	•	mina cha	ck hara	1 30				
E	a	Gross revenue (not i		•	illing, che	CK Here	'				
Revenue	"	reported on line 1)	·								
	Ь	•	es other than fundraising expenses	F	6b						
Ω	C	•	from special events and activities (Subtract line 6b f	trom line 6a)	<u> </u>		<sub>6c</sub>				
Ž	7a		tory, less returns and allowances		7a		"				
	Ь	Less cost of goods s	• •	i i	7b						
SCANNED	1	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  8 Other revenue (describe )			─						
D	8				) 8	•					
	9	Total revenue. Add	lines 1, 2, 3, 4, 5c, 6c, 7c, and 8				9	91,339			
	10		mounts paid (attach schedule)			<u> </u>	10	3,500			
	11	Benefits paid to or fo	or members				11				
õ	12	Salaries, other comp	ner compensation, and employee benefits				12	21,459			
	13	Professional fees and	d other payments to independent contractors				13	600			
Expense	14	Occupancy, rent, util	ities, and maintenance				14	7,033			
Û	15	Printing, publications	postage, and shipping					287			
	16	Other expenses (des	Other expenses (describe SER STATEMENT 2  Total expenses. Add lines 40 through 16				) 16	61,478			
	17	_Total expenses. Add					<b>▶</b> 17	94,357			
w	18	Excess or (deficit) 40	the year (Subtract tine 17 from line 9)				18	<u>-3,018</u>			
set	19	Net assets or fund ba	alanceនៃ all beginning of year (២០)។ line 27, column (A	A)) (must agr	ee with						
Net Assets			ported on prior year's refurn)				19	26,768			
Š	20	Other changes in het	t assats of fine balances (attach explanation)				20	00 550			
_	21		alancee at end of year Combine lines 18 through 20				21	23,750			
	art II	Balance Sne	ets. If Total assets on line 25, column (B) are \$1,25	50,000 or mo	ore, file F						
20	(See the instructions for Part II )  (A) Beginning of year					<del></del>	(B) End of year				
		savings, and investmen	nis		<b>⊢</b>	25,60		23,867			
		nd buildings	SEE STATEMENT 3		\-	1,10	62 24	697			
	Total a	ssets (describe	JUN DIRILLIMINI J		—′ <b>├</b> ─	26,7		24,564			
		abilities (describe	SEE STATEMENT 4		\⊢	20,7	0 26	814			
		•	s (line 27 of column (B) must agree with line 21)		一′ 一	26,7		23,750			
			Reduction Act Notice, see the separate instruct	tions.			<u>, =-, </u>	Form <b>990-EZ</b> (2009)			

DAA

Form 990-EZ (2009) ADA BOARD OF REALTORS, INC	73	3-1254154			Page	
Part III Statement of Program Service Accomplishments (S			.)	E:	xpenses	
What is the organization's primary exempt purpose?				1	for section	
SEE STATEMENT 5				1 ' '	and 501(c)(4)	
Describe what was achieved in carrying out the organization's exempt purposes. In a	clear and concise			1	ions and section	
manner, describe the services provided, the number of persons benefited, or other re		4947(a)(1) trusts, option				
each program title				for others	•	
28 SEE STATEMENT 6		,		10.040.0	· · · · · · · · · · · · · · · · · · ·	
(Grants \$ 3,500) If this amount includes foreign grants, ch	ack here	•	$\Box$	28a	83,99	
29	ICON HEIC			200	05,55	
25						
10 to 0		_	<u></u>	_		
(Grants \$ ) If this amount includes foreign grants, ch	ieck nere	<b>&gt;</b>	<u> </u>	29a	<del></del>	
30						
(Grants \$ ) If this amount includes foreign grants, ch	eck here	<u> </u>		30a	<u></u>	
31 Other program services (attach schedule)				1 1		
(Grants \$ ) If this amount includes foreign grants, ch	eck here	<u> </u>		31a		
32 Total program service expenses (add lines 28a through 31a)			<b>•</b>	32	83,99	
Part IV List of Officers, Directors, Trustees, and Key Employees. List ea	ich one even if not co	mpensated (See t	he in	structions for	Part IV)	
(a) Nove and address	(b) Title and average hours per week	(c) Compensation (If not paid,		Contributions to byee benefit plans 8	(e) Expense	
(a) Name and address	devoted to position	enter -0)		rred compensation	account and other allowances	
CHERYL VAN HORN	EXEC.OFFICER					
	30.00	19,200	,	c		
KAREN SKIBSTED	PRESIDENT	,				
	3.00	o		C	,	
TAMMY RUDD	VICE-PRES.		1		<u></u>	
TATAL RODD	3.00	٥		d		
TODERMA BUGU			1		<u>'                                    </u>	
LORETTA BUSH	TREASURER		1			
	3.00	0	+	0	) 	
		<del></del>	╁──		<u> </u>	
				<del></del>		
			<u> </u>			
	-					
			ļ			
	-		$\vdash$	<del></del>	1	
		<del> </del>	$\vdash$			
	+		+		+	
	<del> </del>	<del></del>	$\vdash$		<del> </del>	
					1	
	1 1		ı		1	

Form **990-EZ** (2009)

	IT V Other information (Note the statement requirements in the instructions for F	ait v.)	<del>,                                     </del>	
			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	<del> </del>	X
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of			
	the changes	34	<del> </del>	X
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> re	еропеа		
	on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			!
а	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	+	X
	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	<b>├</b> ──	<del> </del>
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	ļ	X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr		1	
b	Did the organization file Form 1120-POL for this year?	<u>37b</u>	<b></b>	X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			l <u></u>
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	ļ	X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			ļ
39	Section 501(c)(7) organizations Enter			
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			•
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under	1	1	
	section 4911 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit	l l		
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified		1	
	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	ļ	<u> </u>
C	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on	i	1	
	organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958 ▶ _			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c			
	reimbursed by the organization		1	
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter	<u> </u>		
	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed   OK			
42a	The organization's books are in care of ► CHERYL VAN HORN	elephone no ▶ 580-33	32-2	439
	P.O. BOX 2298			
	Located at ► ADA, OK	ZIP+4 ▶ 74821		
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	<del></del>	Yes	No
	account)?	42b	<u> </u>	X
	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.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	<u> </u>	X
	If "Yes," enter the name of the foreign country			
43	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	<b>▶</b> 43		
				,
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		1	]
	Form 990-EZ	44	<u> </u>	X
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		X
		Form <b>9</b> 9	90-EZ	(2009)

05/04/10

Check if

employed >

EIN

Preparer's Identifying Number (See instr.)

73-1528318

580-310-0484

Yes No
Form 990-EZ (2009)

P00168276

Date

Here

Paid

Preparer's

**Use Only** 

Type or print name and title

D

BRENT LOWE, CPA

P.O. ADA,

May the IRS discuss this return with the preparer shown above? See instructions

LOWE & WEBB,

OK

BOX 1625

74821-1625

Preparer's

signature

Firm's name (or yours

address, and ZIP + 4

if self-employed),

Department of the Treasury Internal Revenue Service

#### **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No 1545-0172

Identifying number

► See separate instructions. Name(s) shown on return

► Attach to your tax return.

Attachment Sequence No

	ADA BOA	TKD OF KENT	TORS, INC	<u> </u>				_ / 3-	<u> 125</u>	4154
	ess or activity to which this form relates	ON				_				
	NDIRECT DEPRECIATI Int! Election To Expens		erty Under See	tion 1	70					
re	Note: If you have a					com	nlete Pa	rt I		
1	Maximum amount See the instructi				cioic you	00111	picte i a	1(1,	1	250,000
2	Total cost of section 179 property placed in service (see instructions)								2	
3	Threshold cost of section 179 prope			struction	s)				3	800,000
4	Reduction in limitation Subtract line				-,				4	
5	Dollar limitation for tax year Subtract line		•	ried filing	separately, see	e instru	ctions		5	
6	(a) Description				(business use			lected cost		
7	Listed property Enter the amount fr	rom line 29				7				
8	Total elected cost of section 179 pr	operty Add amounts	ın column (c), lines	6 and 7					88	
9	Tentative deduction Enter the sma	ller of line 5 or line 8							9	
10	Carryover of disallowed deduction f	from line 13 of your 2	008 Form 4562						10	
11	Business income limitation. Enter the		•		,	ee ins	tructions)		11	
12	Section 179 expense deduction Ad	ld lines 9 and 10, but	do not enter more	than line	11				12	
<u>13</u>	Carryover of disallowed deduction t				<b>•</b>	13				
	: Do not use Part II or Part III below t						4 15 4			<u> </u>
	rt II Special Depreciation						de listed	proper	ty.) (	See instr.)
14	Special depreciation allowance for		ner than listed prope	erty) plac	ced in service	Э			۱.,	
	during the tax year (see instructions								14	
15	Property subject to section 168(f)(1	•							15	465
<u>16</u>	Other depreciation (including ACRS		do listed propo	orty ) (S	Soo inotrii	otion	٠ )		16	403
P	ert III MACRS Depreciati	on (Do not inclu	<u>de listed prope</u> Secti		see ilistiu	Clion	s <u>)</u>			
	MACDS deductions for positioning	ad in acques in tay ve							17	0
17	MACRS deductions for assets place If you are electing to group any assets pl				aral accat acc	ounto d	book boro		<b>-</b> ''	
<u>18</u>		Assets Placed in Se						ciation Sv	stem	
		(b) Month and year	(c) Basis for depre	•	(d) Recovery			,		
	(a) Classification of property	placed in service	(business/investme only-see instruct		period	(e) (	Convention	(f) Meth	nod	(g) Depreciation deduction
<u>19a</u>	3-year property		<u></u>			<u> </u>		-		
b	5-year property					<u> </u>				
<u> </u>	7-year property	-				-				
<u>d</u>	10-year property					<u> </u>				
- 0	15-year property				1	<u> </u>				
f	20-year property					<del></del> -		0,1		
_ 9	25-year property				25 yrs	<del>  -</del>		S/L		
h	Residential rental property				27 5 yrs		MM	S/L		
<del>-</del>	<del></del>				27 5 yrs		MM MM	S/L		
i	Nonresidential real property				39 yrs	<del> </del>	MM	S/L S/L		
	<u></u>	ssets Placed in Sen	ice During 2009 T	Tay Year	Using the A	Altern:				<u></u>
200		33613 Flaced III 361	lice During 2003 i	ax roat	Using the z	T	ativo Bopi	T	youn	
<u>20a</u>	Class life 12-year	-		•	12 yrs			S/L S/L		
	40-year				40 yrs		MM	S/L		
	urt IV Summary (See ins	tructions )	<u> </u>		1 TO YIS		141141			l
21	Listed property Enter amount from								21	
22	Total. Add amounts from line 12, lin		es 19 and 20 in col	lumn (a)	and line 21	Enter	here		<del></del>	-
	and on the appropriate lines of your	<del>-</del>				•	· = · <del>· =</del>		22	465
23	For assets shown above and placed in service during the current year, enter the									· · · · · · · · · · · · · · · · · · ·
	portion of the basis attributable to s	-				23				
									_	

10630 ADA BOARD OF REALTORS, INC.

73-1254154

Federal Statements

5/4/2010

FYE: 12/31/2009

# Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

Description	 Amount
DUES	\$ 88,813
TOTAL	\$ 88,813

# Statement 2 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
EXPENSES	\$
ADVERTISING	165
BANK CHARGES	383
CLEANING	25
DUES - STATE & NATIONAL	22,596
EDUCATION	714
INSURANCE	350
LOCKBOX FEE	10,648
LUNCHEON & BANQUET	9,933
MLS FEES	15,166
OFFICE EXPENSE	175
SUPPLIES	923
TRAVEL	400
TOTAL	\$ 61,478

### Statement 3 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	eginning of Year	 End of Year
EQUIPMENT LESS ACCUMULATED DEPRECIATION	\$ 2,325 1,163	\$ 2,325 1,628
	 1,162	697

#### Statement 4 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year	 End of Year
PAYROLL LIABILITIES	\$	\$ 814
		 814

10630 ADA BOARD OF REALTORS, INC 73-1254154 **Fed**6

**Federal Statements** 

FYE: 12/31/2009

#### Statement 5 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

#### Description

THE PURPOSE OF THIS CORPORATION IS TO UNITE THOSE ENGAGED IN THE RECOGNIZED BRANCHES OF THE REAL ESTATE PROFESSION IN THEIR COMMUNITY FOR THE PURPOSE OF EXERTING A BENEFICIAL INFLUENCE UPON THE PROFESSION AND RELATED INTERESTS.

# Statement 6 - Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

#### Description

THE ORGANIZATION SUPPORTED 85 REALTORS IN THE GREATER ADA AREA IN MAINTAINING HIGH STANDARDS OF CONDUCT BY PROVIDING INFORMATION RELATED TO THE REAL ESTATE PROFESSION THROUGH MONTHLY MEETINGS AND NEWSLETTERS. THE ORGANIZATION PROVIDED INFORMATION TO THE COMMUNITY THROUGH NEWS RELEASES TO AREA NEWPAPERS.

5/4/2010