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Department of the Treasury Internal Revenue Service

## 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)

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

<u> 2009</u> Open to Public Inspection

OMB No 1545-0047

|                                    | For the 200                             | 09 câlendar v        | ear, or tax year beginning 07/01/09 , and ending 06/30/10   |                   |                               |   |
|------------------------------------|---|----------------------|---|-------------------|-------------------------------|---|
|                                    | Check if applica                        |                      | C Name of organization Coliseum Central Business  | ι                 | ) Emplo                       | yer identification number                           |
|                                    | Address change                          | use IRS              | Improvement District, Inc.  |                   | -                             |   |
| $\equiv$                           | Name change                             | label or print or    | Doing Business As   |                   | 54-                           | 1791888   |
| $\equiv$                           | •                                       | type.                |   | om/suite E        | Telepho                       | one number  |
| 닏                                  | Initial return                          | See                  | 4410 E. Claiborne Sa. Sulte 211   |                   | 757                           | -826-6 <u>351</u>                                   |
|                                    | Termination                             | Specific<br>Instruc- | City or town, state or country, and ZIP + 4   | C                 | Gross recei                   | pts \$ 1,164,048                                    |
|                                    | Amended return                          |                      | Hampton VA 23666  |                   |                               |   |
| $\Box$                             | Application pen                         | iania i -            | e and address of pnncipal officer   | ۲                 | 1(a) Is this a                | group return for                                    |
|                                    | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | El                   | izabeth McCoury   | ١.                | affiliate:                    |   |
|                                    |   |                      | Ho E. Claiborne Sq. Suite211  | "                 | <b>1(b)</b> Are all a include |   |
|                                    |   |                      | mpton VA 23666  |                   | If "No,"                      | attach a list (see instructions)                    |
|                                    | Tax-exempt                              |                      | 501(c) ( <b>6</b> ) <b>◄</b> (insert no ) 4947(a)(1) or 527   |                   |                               |   |
|                                    | Website:                                |                      | coliseumcentral.com   |                   |                               | exemption number                                    |
| ******                             | Type of organi                          |                      |   | f formation 19    | 96                            | M State of legal domicile VA                        |
|                                    | Part I                                  | Summa                |   |                   |                               |   |
|                                    |   | •                    | he organization's mission or most significant activities  |                   |                               |   |
| e                                  | 1                                       | _                    | te, develop and market the economic development of  | ı                 |                               |   |
| Jan                                |   |                      | seum Central Business Improvement District within   |                   |                               |   |
| Veri                               | l                                       | -                    | of Hampton, Virginia.   |                   |                               |   |
| Activities & Governance            |   | ck this box ▶        |   | s net assets      | اما                           | 18  |
| රේ<br>ග                            |   | -                    | members of the governing body (Part VI, line 1a)  |                   | 3 4                           | 18  |
| ij                                 |   | •                    | endent voting members of the governing body (Part VI, line 1b) employees (Part V, line 2a)  |                   | 5                             | 4   |
| ÷                                  | 1                                       |                      | volunteers (estimate if necessary)  |                   | 6                             | 150   |
| ĕ                                  |   |                      | ated business revenue from Part VIII, column (C), line 12   |                   | 7a                            |   |
|                                    |   | _                    | siness taxable income from Form 990-T, line 34  |                   | 7b                            | 0   |
|                                    | D NCC                                   | um ciatoa ba         | Siness taxable income from 500 1, into 54   | Prior Year        |                               | Current Year  |
| a                                  | 8 Conf                                  | tributions and       | d grants (Part VIII, line 1h)   | 1,152             | ,612                          | 1,155,025   |
| Revenue                            | 9 Prog                                  | gram service         | revenue (Part VIII, line 2g)  |                   |                               |   |
| ě                                  | 10 Inve                                 | stment incor         | ne (Part VIII, line 2g)  RECEIVED  RECEIVED   |                   | ,488                          | 7,523   |
| œ                                  | 11 Othe                                 | er revenue (F        | Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   |                   | ,352                          | 1,500   |
| 20 11                              |   |                      | add lines 8 through 11 (must equal Part A), column (A), line (3)  | 1,165             | <u>,452</u>                   | 1,164,048   |
| $\approx$                          | 13 Gran                                 | nts and simila       | ar amounts paid (Part IX, column (A), lines 1–3)  |                   | $\longrightarrow$             |   |
| ක                                  | 14 Bend                                 | efits paid to        | or for members (Part IX, column (A) the the large and the |                   |                               |   |
| e§⊃                                | 15 Sala                                 | iries, other c       | ompensation, employee beri <del>efits (Part IX, Tolumhi (A) firles</del> 5–10)  | 298               | ,781                          | 275,711   |
| GH‱                                |   |                      | draising fees (Part IX, column (A), line 11e)   | <del></del>       |                               |   |
| ≥¥                                 | <b>b</b> Tota                           | •                    | expenses (Part IX, column (D), line 25)   | 720               | 100                           | 006 060   |
|                                    | 17 Othe                                 | •                    | (Part IX, column (A), lines 11a–11d, 11f–24f)   | 1,036             | ,123                          | 886,869   |
|                                    | 18 Tota                                 | •                    | Add lines 13–17 (must equal Part IX, column (A), line 25)   |                   | ,548                          | 1,162,580<br>1,468                                  |
| <del>Z</del> ,                     | 19 Rev                                  | enue less ex         | penses. Subtract line 18 from line 12   | ginning of Curre  |                               | End of Year   |
| Net Asset And NEDE AND FIND BANGES | 20 Tota                                 | al assets (Pa        |   |                   | ,167                          | 956,959   |
| 18.5                               | 21 Tota                                 | •                    | rart X, line 26)  |                   | ,904                          | 54,228  |
| 횔                                  | 22 Net                                  | •                    | nd balances Subtract line 21 from line 20   | 901               | ,263                          | 902,731   |
| F                                  | Part II                                 | Signatu              | re Block  |                   |                               |   |
|                                    |   | Under pena           | ties of perjury, I declare that I have examined this return, including accompanying schedules and sta   | tements, and to   | the best of                   | my knowledge  |
|                                    |   | and belief, if       | is true, correct, and complete. Declaration of preparer (other than officer) is based on all information  | i of which prepai |                               |   |
| Sig                                | gn                                      | <u> X.</u>           | Clifabeth McCoun  |                   | <u>  2-</u>                   | 11-11   |
| He                                 | re                                      | - 3                  | ure of officer  |                   | Date                          |   |
|                                    |   | <u>L.</u>            | Elizabeth McCoury Executive   | <u>ve Dire</u>    | ctor                          |   |
|                                    |   | Type o               | r print name and title  |                   |                               | Tadicilla (1)                                       |
| Pa                                 | id                                      | Preparer's           | Date   Date   | Check if self-    |                               | Preparer's identifying number<br>(see instructions) |
|                                    |   | signature            | Diane 4. Smith, CPA 02/11/1   | 11 employed       | <u> </u>                      | , i   |
|                                    | eparer's<br>se Only                     | Firm's name          | or yours Diane Y. Smith CPA, PC   |                   | EIN ▶                         | 20-3760975  |
| US                                 | of Office                               | ıf self-emplo        | yed) 11832 Rock Landing Dr Ste 301  |                   | Phone                         |   |
|                                    |   | address, an          |   |                   | no 🕨                          | 757-223-9602  |
| _                                  |   |                      | turn with the preparer shown above? (see instructions)  |                   |                               | Yes No  |
| For<br>DA/                         |   | ct and Pape          | rwork Reduction Act Notice, see the separate instructions.  |                   |                               | Form <b>990</b> (2009)                              |

| orm 990 (2009) Coliseum Central Business  | 54-1/91888                                  | Page Z    |
|---|---|-----------|
| Part III Statement of Program Service Accomplishments                             |   |           |
| Briefly describe the organization's mission                                       |   |           |
| To promote, develop and market the econ-  | omic development of                         |           |
| the Coliseum Central Business Improvement   |   |           |
|   |   |           |
| the City of Hampton, Virginia.  |   |           |
|   |   |           |
| 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 X No  |
| If "Yes." describe these new services on Schedule O                               |   |           |
| ,   | aducts, any program                         |           |
| 3 Did the organization cease conducting, or make significant changes in how it co | nducts, any program                         | Yes X No  |
| services?   |   | Yes A 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  |   |           |
| allocations to others, the total expenses, and revenue, if any, for each program  | solvice reported                            |           |
| 200 040   |   |           |
| 4a (Code. ) (Expenses \$ 307,249 including grants                                 |   | )         |
| Image Development - Maintain a high leve  | el of security, safety and                  |           |
| cleanliness within the District. Work to  | Promote beautification a                    | nd        |
| physical enhancement to buildings and s   |   |           |
|   |   |           |
| Communicate to the public that the Dist   |   | 1 01      |
| security, safety, cleanliness and beauty  | ₹•  |           |
|   |   |           |
|   |   |           |
|   |   |           |
|   |   |           |
|   |   |           |
|   |   |           |
|   |   |           |
|   |   |           |
| 4b (Code. ) (Expenses \$ 18,310 including grants                                  | of \$ ) (Revenue \$                         |           |
| 4b (Code. ) (Expenses \$ 18,310 including grants                                  | ) (Revenue 5                                | ,<br>,    |
| Recruitment, Retention and Development  | - Recruit and retain high                   | quality   |
| businesses within the District and help   | existing businesses expan                   | d their   |
| operations in the District.   |   |           |
| •   |   |           |
|   |   |           |
|   |   |           |
|   | •   |           |
|   |   |           |
|   |   |           |
|   |   |           |
|   |   |           |
|   |   |           |
|   |   |           |
|   |   |           |
| 4c (Code. ) (Expenses \$ 626,096 including grants                                 | of \$ ) (Revenue \$                         |           |
| Customer Attraction - Actively market to  |   | ,         |
|   |   |           |
| District businesses. Promote, support a   | nd sponsor ramity events t                  | o attract |
| customers to the District. Maintain a c   | ommunication link with the                  | ı         |
| Virginia Department of Transportation t   | o keep businesses                           |           |
| in the District aware of impending cons   |   |           |
| in the distinct aware of impending comp   | 114001011.                                  |           |
|   | •   |           |
| •   | •   | •         |
|   |   |           |
| •   | ·   |           |
|   | • ••  | •         |
|   |   |           |
|   |   |           |
| 4d Other program services (Describe in Schedule O )                               |   |           |
| (Expenses \$ 19,811 including grants of \$  | ) (Revenue \$                               |           |
| 4e Total program service expenses ▶ 971,466                                       |   |           |
|   |   |           |

|     |  |     |                   |     |     | Yes   | No       |
|-----|--|-----|-------------------|-----|-----|-------|----------|
| 1   | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"            |     |                   | ſ   |     |       |          |
|     | complete Schedule A  |     |                   |     | 1   |       | X        |
| 2   | Is the organization required to complete Schedule B, Schedule of Contributors?   |     |                   | [   | 2   | X     |          |
| 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  |     |                   | L   | 3   |       | X        |
| 4   | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete                  |     |                   |     |     |       |          |
|     | Schedule C, Part II  |     |                   | L   | 4_  |       |          |
| 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                                  |     |                   | L   | 5   |       | X        |
| 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  |     |                   | L   | 6   |       | X        |
| 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                     |     |                   |     | 7   |       | X        |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"      |     |                   |     | - [ |       |          |
|     | complete Schedule D, Part III  |     |                   |     | 8   |       | X        |
| 9   | Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part            |     |                   |     | Ī   |       |          |
|     | X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"                 |     |                   |     | 1   |       |          |
|     | complete Schedule D, Part IV   |     |                   | L   | 9   |       | <u> </u> |
| 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  |     |                   | L   | 10  |       | X        |
| 11  | Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,              |     |                   |     | i   |       |          |
|     | VII, VIII, IX, or X as applicable  |     |                   | L   | 11  | X     |          |
| •   | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete          |     |                   |     | - 1 | -     |          |
|     | Schedule D, Part VI.   |     |                   |     | 1   | 1     |          |
| •   | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more             |     |                   |     | 1   | 1     |          |
|     | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII                                 |     |                   |     | - [ | 1     |          |
| •   | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more              |     |                   |     |     | I     |          |
|     | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII                                |     |                   |     |     | 1     |          |
| •   | Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets |     |                   | Į.  | - [ | 1     |          |
|     | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX  |     |                   |     |     | 1     |          |
| •   | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.   |     |                   |     |     | 1     |          |
| •   | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses  |     |                   |     | 1   |       |          |
|     | 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.   | 1   |                   |     | 12  |       | X        |
| 12A | Was the organization included in consolidated, independent audited financial statements for the tax year?                |     | Yes               | No  |     |       |          |
|     | If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.  | 12A | $oldsymbol{\bot}$ | X   |     | Ī     | 7.5      |
| 13  | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E                        |     |                   | -   | 13  |       | X        |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States?                              |     |                   | F   | 14a |       | X_       |
| b   | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,            |     |                   |     |     |       | 7.5      |
|     | business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I                |     |                   | }   | 14b |       | <u> </u> |
| 15  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any             |     |                   | ĺ   |     |       | 7.7      |
|     | organization or entity located outside the United States? If "Yes," complete Schedule F, Part II                         |     |                   | ⊢   | 15  |       | X        |
| 16  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance          |     |                   |     |     | ļ     | v        |
|     | to individuals located outside the United States? If "Yes," complete Schedule F, Part III                                |     |                   | F   | 16  |       | X        |
| 17  | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services              |     |                   |     |     |       | v        |
|     | on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I   |     |                   | ⊦   | 17  |       | <u> </u> |
| 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   |     |                   | - ⊦ | 18  |       | X        |
| 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  |     |                   | ⊦   | 19  |       | X        |
| 20  | Did the organization operate one or more hospitals? If "Yes," complete Schedule H  |     | —                 |     | 20  | 990   | X        |
|     |  |     |                   |     | FOR | : 39U | コンにほうはく  |

| ,<br>Forn | 1 990 (2009) Coliseum Central Business 54-1791888  |     | F        | age 4 |
|-----------|--|-----|----------|-------|
|           | art 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  | ļ        | X     |
| 22        | Did the organization report more than \$5,000 of grants and other assistance to individuals in the                   |     | 1        |       |
|           | United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III                         | 22  |          | X     |
| 23        | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the                  | l   |          |       |
|           | organization's current and former officers, directors, trustees, key employees, and highest compensated              |     |          |       |
|           | employees? If "Yes," complete Schedule J   | 23  |          | X     |
| 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 | <u> </u> | X     |
| b         | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?                    | 24b | <u> </u> |       |
| 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  |          | X     |
| 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  |          | X     |
| 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):                                  | [   |          |       |
| а         | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV              | 28a |          | X     |
| b         | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete               |     |          |       |
|           | Schedule L, Part IV  | 28b |          | X     |
| С         | 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,        |     | 1        |       |
|           | Part IV  | 28c |          | X     |
| 29        | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M             | 29  |          | X     |
| 30        | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified       |     |          |       |
|           | conservation contributions? If "Yes," complete Schedule M  | 30  |          | X     |
| 31        | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,          |     |          |       |
|           | Part I   | 31  |          | X     |
| 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  |          | X     |
| 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  |          | X     |
| 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  |          | X     |
| 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  |          | X     |
| 36        | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related          |     |          |       |

38 X Form 990 (2009)

X

37

37

38

Part VI

organization? If "Yes," complete Schedule R, Part V, line 2

19? Note. All Form 990 filers are required to complete Schedule O.

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,

|      | Statements Regarding Other IKS Finings and Tax Compilance   |        |         |               | _              |  |
|------|---|--------|---------|---------------|----------------|--|
|      | ,   |        |         | F             | Yes            | No   |
| 1a   | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of  | 4.     | 10      |               |                |  |
|      | U.S. Information Returns. Enter -0- if not applicable   | 1a     | 10      |               |                |  |
| b    | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable   | 1b     |         |               |                |  |
| С    | Did the organization comply with backup withholding rules for reportable payments to vendors and repor  | lable  |         | 10            | x              | İ  |
| 2-   | gaming (gambling) winnings to prize winners?  | ]      |         | <u>1c</u>     | 1              |  |
| 2a   |   | 2a     | 4       |               |                |  |
|      | Statements, filed for the calendar year ending with or within the year covered by this return  If at least one is reported on line 2a, did the organization file all required federal employment tax returns? |        |         |               | x              | İ  |
| b    | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see   |        |         | 20            | -              |  |
|      | instructions)   |        |         |               |                | Ī  |
| 3a   | Did the organization have unrelated business gross income of \$1,000 or more during the year covered b  | v      |         |               |                |  |
| - Ou | this return?  | ,      |         | 3a            | <b>i</b>       | x  |
| b    | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  |        |         | 3b            |                |  |
| 4a   | At any time during the calendar year, did the organization have an interest in, or a signature or other auti  | nority |         |               |                |  |
|      | over, a financial account in a foreign country (such as a bank account, securities account, or other financial  | -      |         |               |                |  |
|      | account)?   |        |         | 4a            |                | x  |
| 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 Bai  | nk     |         |               |                |  |
|      | and Financial Accounts  |        |         |               |                |  |
| 5a   | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?   |        |         | 5a            |                | X  |
| b    | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction   | 1?     |         | 5b            |                | X  |
| c    | If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regards  | ng     |         |               |                |  |
|      | Prohibited Tax Shelter Transaction?   |        |         | 5c            |                |  |
| 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?  |        |         | 6a            |                | X  |
| b    | If "Yes," did the organization include with every solicitation an express statement that such contributions   | or     |         |               |                |  |
|      | gifts were not tax deductible?  |        |         | 6b            | ļ              | ļ  |
| 7    | Organizations that may receive deductible contributions under section 170(c).   |        |         |               |                |  |
| а    | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goo   | ds     |         | •             |                |  |
|      | and services provided to the payor?   |        |         | 7a            | -              |  |
| ь    | If "Yes," did the organization notify the donor of the value of the goods or services provided?   |        |         | 7b            |                |  |
| С    | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was  |        |         |               |                |  |
|      | required to file Form 8282?   | 1 1    | 1       | 7c            | ļ              | ļ  |
| d    | If "Yes," indicate the number of Forms 8282 filed during the year   | 7d     |         |               |                |  |
| е    | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pers   | onal   |         | <b>.</b> .    |                | ŧ  |
|      | benefit contract?   |        |         | 7e            | <del> </del> - | <u> </u>   |
| f    | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  | 1      |         | 7f            | ├              |  |
| 9    | For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  |        |         | 7g            |                |  |
| h    | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as   | •      |         | 76            |                |  |
| 8    | required?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting  |        |         | 7h            |                | <del>                                     </del> |
| J    | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring  |        |         | ŀ             |                |  |
|      | organization, have excess business holdings at any time during the year?  |        |         | 8             |                | Ī  |
| 9    | Sponsoring organizations maintaining donor advised funds.   |        |         |               |                |  |
| а    | Did the organization make any taxable distributions under section 4966?   |        |         | 9a            |                | Ī  |
| b    | Did the organization make a distribution to a donor, donor advisor, or related person?  |        |         | 9b            |                |  |
| 10   | Section 501(c)(7) organizations. Enter:   |        |         | - <del></del> |                |  |
| а    | Initiation fees and capital contributions included on Part VIII, line 12  | 10a    |         | Į.            |                |  |
| b    | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities   | 10b    |         |               |                |  |
| 11   | Section 501(c)(12) organizations. Enter   |        |         |               |                |  |
| а    | Gross income from members or shareholders   | 11a    | <u></u> |               |                |  |
| b    | Gross income from other sources (Do not net amounts due or paid to other sources against  |        |         |               |                |  |
|      | amounts due or received from them )   | 11b    |         |               |                |  |
| 12a  | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10   | 041?   |         | 12a           |                |  |
| b    | If "Yes," enter the amount of tax-exempt interest received or accrued during the year   | 12b    |         |               |                |  |
|      |   |        |         |               | ~~~            |  |

## Form 990 (2009) Coliseum Central Business

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.  |       |   |    |     |     |    |
|------------|--|-------|---|----|-----|-----|----|
| Sec        | tion À. Governing Body and Management  |       |   |    |     |     |    |
|            |  |       |   |    |     | Yes | No |
| 1a         | Enter the number of voting members of the governing body   | 1a    | _ | .8 |     |     |    |
| b          | Enter the number of voting members that are independent  | 1b    | 1 | .8 | _[  |     |    |
| 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?   |       |   |    | 2   | L   | X  |
| 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?            |       |   |    | _ 3 |     | X  |
| 4          | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed | ?     |   |    | 4   | X   |    |
| 5          | Did the organization become aware during the year of a material diversion of the organization's assets?              |       |   |    | 5   |     | X  |
| 6          | Does the organization have members or stockholders?  |       |   |    | 6   |     | X  |
| 7a         | Does the organization have members, stockholders, or other persons who may elect one or more members                 |       |   |    |     |     |    |
|            | of the governing body?   |       |   |    | 7a  |     | X  |
| b          | Are any decisions of the governing body subject to approval by members, stockholders, or other persons?              |       |   |    | 7b  |     | X  |
| 8          | Did the organization contemporaneously document the meetings held or written actions undertaken during               |       |   |    |     |     |    |
|            | the year by the following  |       |   |    | ĺ   |     |    |
| а          | The governing body?  |       |   |    | 8a  | X   |    |
| b          | Each committee with authority to act on behalf of the governing body?  |       |   |    | 8b  | X   |    |
| 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                       |       |   |    | 9   |     | X  |
| Sec        | tion B. Policies (This Section B requests information about policies not required by the Int                         | ernal |   |    |     |     |    |
| <u>Rev</u> | renue Code.)   |       |   |    |     |     |    |
|            |  |       |   |    |     | Yes | No |
| 0a         | Does the organization have local chapters, branches, or affiliates?  |       |   |    | 10a |     | X  |
| 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?                   |       |   |    | 10b |     |    |
|            |  |       |   |    |     |     |    |

| 10a | Does the organization have local chapters, branches, or affiliates?   | 10a |          | X        |
|-----|---|-----|----------|----------|
| þ   | 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?              | 10b |          |          |
| 11  | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the    |     |          |          |
|     | form?   | 11  |          | X        |
| 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                        | 12a |          | X        |
| b   | Are officers, directors or trustees, and key employees required to disclose annually interests that could give  |     |          |          |
|     | rise to conflicts?  | 12b |          |          |
| С   | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"      |     |          |          |
|     | describe in Schedule O how this is done   | 12c |          | <u> </u> |
| 13  | Does the organization have a written whistleblower policy?  | 13  |          | X        |
| 14  | Does the organization have a written document retention and destruction policy?                                 | 14  | <u> </u> | X        |
| 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?   |     |          |          |
| а   | The organization's CEO, Executive Director, or top management official  | 15a | X        |          |
| b   | Other officers or key employees of the organization   | 15b | X        | <u> </u> |
|     | 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?  | 16a |          | X        |
| 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?   | 16b |          | L        |

| Sec | Section C. Disclosure  |  |  |  |  |  |  |  |  |
|-----|--|--|--|--|--|--|--|--|--|
| 17  | List the states with which a copy of this Form 990 is required to be filed ▶ None  |  |  |  |  |  |  |  |  |
| 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 X 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                            |  |  |  |  |  |  |  |  |

Eboni Davis organization > 4410 E. Claiborne Square, Suite 211

Hampton

VA 23666

757-826-6351

#### Form 990 (2009) Coliseum Central Business

rt VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees, highest compensated employees; and former such persons

| (A) Name and Title           | (B)<br>Average    | Pos         | ition i      |          | C)<br>k all t | that ap       | oly)   | (D)<br>Reportable  | (E)<br>Reportable  | (F)<br>Estimated   |
|------------------------------|-------------------|-------------|--------------|----------|---------------|---------------|--------|--|--|--|
|                              | hours per<br>week | or director |              | Officer  |               |               | Former | compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| Robert R. Brown              |                   |             |              |          |               |               |        | _  | _  |  |
| Director                     | 1.00              | X           | _            |          |               | $\vdash$      |        | 0  | 0  | 0  |
| Randy Bryant                 |                   |             |              |          |               |               |        |  |  |  |
| Treasurer/Di                 | 1.00              | X           |              | <u> </u> | _             | <b>├</b>      |        | 0  | 0  | 0  |
| Robert J. Fiscell            |                   |             |              |          |               |               |        |  | _  |  |
| Secretary/Di                 | 2.00              | X           |              | X        |               | $\vdash$      |        | 0  | 0  | 0  |
| Stuart Goodman               | 1                 | ,,          |              |          |               |               |        | •  | •  | _  |
| Director                     | 1.00              | X           |              |          | _             | $\vdash$      |        | 0  | 0  | 0  |
| ·                            | Jr.               |             |              |          |               |               |        | ^  | ^  | _  |
| Pres/Directo Artie Rosenblum | 2.00              | X           | -            | X        |               | $\vdash$      |        | 0  | 0  | 0  |
|                              | 1 00              | <b>.</b>    |              |          |               |               |        | 0  | 0  | o  |
| John Smith                   | 1.00              | X           | <u> </u>     |          | <del> </del>  | <del>  </del> |        | · · · · · · · · · · · · · · · · · · ·                          | <u> </u>   | 0  |
| • •                          | 1.00              | x           |              |          |               |               |        | 0  | 0  | o  |
| Director Raymond J. Tripp    | 1.00              | -           | $\vdash$     |          |               | ┼┼            |        | <u> </u>   | <u> </u>   | 0  |
| V PresDirect                 | 2.00              | x           |              | X        |               |               |        | 0  | 0  | o  |
| Jarratt Watkins              | 2.00              | - A         | <del> </del> | A        | <del> </del>  | ╁╾╁           |        |  |  |  |
| Director                     | 1.00              | x           |              |          |               |               |        | 0  | 0  | o  |
| Mark Bleakley                | 1.00              | -           |              |          | <del> </del>  | 1             |        |  |  |  |
| Director                     | 1.00              | x           | ļ            |          |               |               |        | 0  | 0  | O  |
| Reed Cordish                 | 1                 |             |              |          |               | t             |        |  | -  |  |
| Director                     | 1.00              | x           |              |          |               | ļl            |        | 0  | 0  | 0  |
| Larry Cumming                |                   |             |              |          |               | 1 1           |        |  |  | -  |
| Director                     | 1.00              | X           |              | ł        |               | li            |        | 0  | 0  | 0  |
| Debra Flores                 |                   | 1           |              |          |               | Ħ             |        | , .  | -  |  |
| Director                     | 1.00              | X           |              |          |               |               |        | 0  | 0  | 0  |
| Malay H. Thakkar             |                   |             |              |          |               | $\Box$        |        |  |  |  |
| Director                     | 1.00              | X           | L            | L        | L_            |               |        | 0  | 0  | 0  |
| Brian Wynne                  |                   |             |              |          |               |               |        |  |  |  |
| Director                     | 1.00              | X           |              |          |               |               |        | 0  | 0  | 0  |
| Peter Peterson               |                   |             |              |          | 1             |               |        |  |  |  |
| Director                     | 1.00              | X           |              |          | L             | $oxed{oxed}$  |        | 0  | 0  | 0  |
| Michael Edmonds              |                   |             |              |          |               |               |        |  |  |  |
| Director<br>DAA              | 1.00              | X           |              |          |               |               |        | 0  | 0  |  |

| Part VII             | Section A. Officers,   |  |             |                 |                |             | yees                           | , an  | d Highest Compensated E   | mployees (continued)   |                      |  |              |
|----------------------|--|--|-------------|-----------------|----------------|-------------|--------------------------------|-------|---|--|----------------------|--|--------------|
| Nai<br>、             | (A)<br>ne and Title  | (B)<br>Average<br>hours per<br>week  | or director |                 |                |             | a Highest compensated employee |       | (D) Reportable compensation from the organization (W-2/1099-MISC)                       | (E) Reportable compensation from related organizations (W-2/1099-MISC) | a<br>cor<br>or<br>ar | (F) stimated mount of other npensation from the ganization d related anization | <b>1</b>     |
| Char S               | tewart<br>zabeth McCo  | 1.00   | х           |                 |                |             |                                |       | 0   | 0  |                      |  | 0            |
| Exec Dire            |  | 40.00  |             |                 | x              |             |                                |       | 102,756   | 0  |                      |  | 0            |
|                      | , ,  |  |             |                 |                |             |                                |       |   |  |                      |  |              |
|                      | ····   |  |             |                 |                |             |                                |       |   |  |                      |  |              |
|                      |  |  |             |                 |                |             |                                |       |   |  |                      |  |              |
|                      |  |  |             |                 |                |             |                                |       |   |  |                      | •  |              |
| 1b Total             |  |  |             |                 |                |             |                                |       | 102,756   |  |                      |  |              |
| 2 Total nur          | •  | -  |             | _               | ose            | liste       | d abo                          | ve)   | who received more than \$1  | <b>-</b>   | l                    |  |              |
| 3 Did the o employed | on line 1a? If "Yes," on dividual listed on line                     | rmer officer, directions of the complete Schedular is the sum of t | ctor o      | for si<br>ortab | uch i<br>le co | ndıv<br>mpe | idual<br>ensat                 | ion : | ee, or highest compensated<br>and other compensation froi<br>complete Schedule J for su | m  |                      | 3 Ye   | х            |
|                      |  |  |             |                 |                |             |                                |       | unrelated organization for ich person   |  |                      | 5  | X            |
| 1 Complete           | dependent Contractor this table for your five ation from the organiz | e highest compei   | nsate       | ed inc          | depe           | nder        | nt co                          | ntrac | ctors that received more that   | n \$100,000 of   |                      |  |              |
|                      |  | (A)<br>business address  |             |                 |                |             |                                | _     | Descrip   | (B)<br>stion of services   |                      | (C<br>Compe  | )<br>isation |
|                      |  |  |             |                 |                |             |                                |       |   |  |                      |  |              |
|                      |  |  |             |                 |                |             |                                |       |   |  |                      |  |              |
| 2 Total acc          | phor of indoperdent  | ontractors (malicinal  | line !      | nut ~           | ot lie         | 2150-       | to +L                          | 2000  | listed above) who recovered   |  |                      |  |              |
|                      | n \$100,000 in comper  | •  | -           |                 |                |             | 10 tr                          |       | listed above) who received  |  |                      | 0  | 90 (2009     |

| Total reverue sections and section of the section o  | Pa           | ırt V    | III Statement of Reve                  | nue     |  |             |           |  |                    |                                       |
|---|--------------|----------|--|---------|--|-------------|-----------|--|--------------------|---------------------------------------|
| Section   Februarie Campagnes   Section   Se    |              |          |  |         |  |             |           | exempt<br>function                     | Unrelated business | excluded from tax<br>under sections   |
| 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of lax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal 6a Gross Rents b Less rental exps c Rentalin corne or (loss) d Net rental income or (loss)  b Less cost or other base & sales exps other than inventory b Less cost or other base & sales exps of contributions reported on line to). See Part IV, line 18 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 a Less cost or other base & sales exps c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b Less cost of goods sold b c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b Less cost of goods sold b c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b Less cost of goods sold b c Net income or (loss) from gales of inventory income or (loss) from sales of loss of the loss of the loss of the loss of the loss of the l  |              | 40       | Endersted compages                     | 1-1-    | Τ  |             |           | revenue                                |                    | 312, 313, 01 314                      |
| 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of lax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal 6a Gross Rents b Less rental exps c Rentalin corne or (loss) d Net rental income or (loss)  b Less cost or other base & sales exps other than inventory b Less cost or other base & sales exps of contributions reported on line to). See Part IV, line 18 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 a Less cost or other base & sales exps c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b Less cost of goods sold b c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b Less cost of goods sold b c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b Less cost of goods sold b c Net income or (loss) from gales of inventory income or (loss) from sales of loss of the loss of the loss of the loss of the loss of the l  | ant          | h        |  |         |  | 540 046     |           |  |                    |                                       |
| 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of lax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal 6a Gross Rents b Less rental exps c Rentalin corne or (loss) d Net rental income or (loss)  b Less cost or other base & sales exps other than inventory b Less cost or other base & sales exps of contributions reported on line to). See Part IV, line 18 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 a Less cost or other base & sales exps c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b Less cost of goods sold b c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b Less cost of goods sold b c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b Less cost of goods sold b c Net income or (loss) from gales of inventory income or (loss) from sales of loss of the loss of the loss of the loss of the loss of the l  | ifts, grande |          | ·                                      |         | 1  | 340,040     |           |  |                    |                                       |
| 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of lax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal 6a Gross Rents b Less rental exps c Rentalin corne or (loss) d Net rental income or (loss)  b Less cost or other base & sales exps other than inventory b Less cost or other base & sales exps of contributions reported on line to). See Part IV, line 18 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 a Less cost or other base & sales exps c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b Less cost of goods sold b c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b Less cost of goods sold b c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b Less cost of goods sold b c Net income or (loss) from gales of inventory income or (loss) from sales of loss of the loss of the loss of the loss of the loss of the l  |              | ا<br>م   |  |         |  |             |           |  |                    |                                       |
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| A Income from investment of tax-exempt bond proceeds  |              |          | •                                      | MIGGIN  | us, mileres  |             | 7.523     |  |                    | 7.523                                 |
| S Royalties   |              | A        | ,                                      | ovemr   | at bond or   |             | 7,323     |  |                    | ,,,,,,                                |
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| Second Part       |              |          | -                                      |         | (m) F  | Personal    |           |  |                    |                                       |
| b Less rental exps c Rental inco or (loss) d Net rental income or (loss)    Gress amount from sales of assets of a sales exps   C Garn or (loss)  |              | - Ra     |  |         | (,   | 0.00.10.    | 1         |  |                    |                                       |
| The content of the     |              | ١.       |  | -       |  |             | 1         |  |                    |                                       |
| A let rental income or (loss)   |              | _        |  |         |  |             | Ī         |  |                    |                                       |
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| The page of the property of the page of th  |              | <u> </u> | •                                      |         | <del>†                                      </del> |             | 1         |  |                    |                                       |
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| Miscellaneous Revenue         Busn. Code           11a Expense Reimbursement         1,500           b         1,500           c         4 All other revenue           e Total. Add lines 11a-11d         1,500   |              |          |  | _       | enton/   |             | 1         |  | -                  |                                       |
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| b c   |              | 119      |  |         | <del></del>  |             | 1.500     |  | :                  | 1.500                                 |
| c       d All other revenue         e Total. Add lines 11a–11d       ▶ 1,500  |              | l        | -wherea verimnarsement                 |         |  |             |           |  |                    | 2,300                                 |
| d All other revenue e Total. Add lines 11a–11d  ▶ 1,500   |              | l        |  | •       |  |             |           |  |                    |                                       |
| e Total. Add lines 11a–11d   1,500  |              |          | All other revenue                      | •       |  |             |           |  |                    | -                                     |
|   |              |          |  |         |  | <b>—</b>    | 1.500     | ······································ |                    |                                       |
|   |              |          |  | าร      |  | •           |           | 0                                      | 0                  | 9,023                                 |

Form 990 (2009)

# 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).

|     | All other organizations must o   |                       |                              |   |                                       |
|-----|--|-----------------------|------------------------------|---|---------------------------------------|
|     | not include amounts reported on lines 6b,<br>8b, 9b, and 10b of Part VIII.               | (A)<br>Total expenses | (B) Program service expenses | (C)<br>Management and<br>general expenses | (D)<br>Fundraising<br>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   |                       |                              | 1   |                                       |
|     | U.S. See Part IV, lines 15 and 16  |                       |                              | 1   |                                       |
| 4   | Benefits paid to or for members  |                       |                              |   |                                       |
| 5   | Compensation of current officers, directors,   |                       |                              |   | <u> </u>                              |
|     | trustees, and key employees  | 101,225               | 81,497                       | 19,728                                    |                                       |
| 6   | Compensation not included above, to disqualified   |                       |                              |   |                                       |
|     | persons (as defined under section 4958(f)(1)) and  |                       |                              |   |                                       |
|     | persons described in section 4958(c)(3)(B)   |                       | i                            |   |                                       |
| 7   | Other salaries and wages   | 116,198               | 116,198                      |   |                                       |
| 8   | Pension plan contributions (include section 401(k)                                       | -                     |                              |   |                                       |
|     | and section 403(b) employer contributions)   | 30,449                | 25,291                       | 5,158                                     |                                       |
| 9   | Other employee benefits  | 12,551                | 10,424                       | 2,127                                     |                                       |
| 10  | Payroll taxes  | 15,288                | 12,698                       | 2,590                                     |                                       |
| 11  | Fees for services (non-employees).   |                       |                              |   |                                       |
| а   | Management   |                       |                              |   |                                       |
| b   | Legal  | 8,338                 |                              | 8,338                                     |                                       |
| С   | Accounting   |                       |                              |   |                                       |
| d   | Lobbying   |                       |                              |   |                                       |
| е   | Professional fundraising services See Part IV, line 17                                   |                       |                              |   |                                       |
| f   | Investment management fees   |                       |                              |   |                                       |
| g   | Other  |                       |                              |   |                                       |
| 12  | Advertising and promotion  | 380,992               | 380,992                      |   |                                       |
| 13  | Office expenses  | 55,860                |                              | 55,860                                    |                                       |
| 14  | Information technology   |                       |                              |   |                                       |
| 15  | Royalties  |                       |                              |   |                                       |
| 16  | Occupancy  | 39,881                |                              | 39,881                                    |                                       |
| 17  | Travel   | 12,875                |                              | 12,875                                    |                                       |
| 18  | Payments of travel or entertainment expenses   |                       |                              |   |                                       |
|     | for any federal, state, or local public officials  |                       |                              |   |                                       |
| 19  | Conferences, conventions, and meetings   | 29,392                | 7,644                        | 21,748                                    |                                       |
| 20  | Interest   |                       |                              |   |                                       |
| 21  | Payments to affiliates   |                       |                              |   |                                       |
| 22  | Depreciation, depletion, and amortization  | 8,580                 |                              | 8,580                                     |                                       |
| 23  | Insurance  | 6,554                 |                              | 6,554                                     |                                       |
|     |  |                       |                              |   |                                       |
| 24  | Other expenses Itemize expenses not  |                       |                              | <b>!</b>                                  |                                       |
|     | covered above (Expenses grouped together   | -                     |                              |   |                                       |
|     | and labeled miscellaneous may not exceed   |                       |                              |   |                                       |
|     | 5% of total expenses shown on line 25 below )  | 1                     |                              |   |                                       |
| а   | Holiday Music and Parade   | 86,619                | 86,619                       |   |                                       |
| b   | Special Events   | 63,459                | 63,459                       |   |                                       |
| С   | Improvements/Beautificatn  | 63,198                | 63,198                       |   | · · · · · · · · · · · · · · · · · · · |
| d   | Banners  | 54,595                | 54,595                       |   |                                       |
| е   | Hotel Area Security Progr  | 50,000                | 50,000                       |   | <del>-</del>                          |
| f   | All other expenses   | 26,526                | 18,851                       | 7,675                                     |                                       |
| 25  | Total functional expenses. Add lines 1 through 24f                                       | 1,162,580             | 971,466                      | 191,114                                   |                                       |
| 26  |  |                       |                              |   |                                       |
|     | SOP 98-2 Complete this line only if the  |                       |                              |   |                                       |
|     | organization reported in column (B) joint costs from a combined educational campaign and |                       |                              |   |                                       |
|     | fundraising solicitation   |                       |                              |   |                                       |
| DAA |  |                       |                              |   | Form 990 (200                         |

|                             | rt X | (2009) COITSELM CENTIAL BUSING                             |            |         | ·                        |     |                    |  |  |
|-----------------------------|------|--|------------|---------|--------------------------|-----|--------------------|--|--|
|                             |      |  |            |         | (A)<br>Beginning of year |     | (B)<br>End of year |  |  |
|                             | 1    | Cash—non-interest bearing                                  |            |         | 19,050                   | 1   | 67,131             |  |  |
|                             | 2    | Savings and temporary cash investments                     |            |         | 642,001                  | 2   | 476,277            |  |  |
|                             | 3    | Pledges and grants receivable, net                         |            |         |                          | 3   |                    |  |  |
|                             | 4    | Accounts receivable, net                                   |            |         | 263,562                  | 4   | 310,833            |  |  |
|                             | 5    | Receivables from current and former officers, directors,   | key        |         | 1                        |     |                    |  |  |
|                             |      | employees, and highest compensated employees. Com          |            | 1       |                          |     |                    |  |  |
|                             |      | Schedule L   |            |         |                          | 5   |                    |  |  |
|                             | 6    | Receivables from other disqualified persons (as defined    | l under se | ection  |                          | 1   |                    |  |  |
|                             |      | 4958(f)(1)) and persons described in section 4958(c)(3)    |            | - 1     |                          |     |                    |  |  |
|                             |      | Part II of Schedule L                                      |            | 6       |                          |     |                    |  |  |
| Assets                      | 7    | Notes and loans receivable, net                            |            |         |                          | 7   |                    |  |  |
| SS                          | 8    | Inventories for sale or use                                |            |         | 8                        |     |                    |  |  |
| ⋖                           | 9    | Prepaid expenses and deferred charges                      |            |         | 4,353                    | 9   | 4,907              |  |  |
|                             | 10a  | Land, buildings, and equipment cost or                     |            |         |                          | 1   |                    |  |  |
| j                           |      | other basis Complete Part VI of Schedule D                 | 10a        | 165,630 |                          | 1   |                    |  |  |
|                             | b    | Less accumulated depreciation                              | 10b        | 67,819  | 23,201                   | 10c | 97,811             |  |  |
| -                           | 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  |            |         |                          |     |                    |  |  |
| - [-                        | 15   | Other assets See Part IV, line 11                          |            |         |                          | 15  |                    |  |  |
| -                           | 16   | Total assets. Add lines 1 through 15 (must equal line 3    | 4)         |         | 952,167                  | 16  | 956,959            |  |  |
| 1                           | 17   | Accounts payable and accrued expenses                      |            |         | 50,904                   | 17  | 54,228             |  |  |
| .                           | 18   | Grants payable   |            |         |                          | 18  |                    |  |  |
| į.                          | 19   | Deferred revenue   |            | · · · [ |                          | 19  | -                  |  |  |
| - 1:                        | 20   | Tax-exempt bond liabilities                                |            |         |                          | 20  |                    |  |  |
| တ္က ၂                       | 21   | Escrow or custodial account liability Complete Part IV of  | of Schedu  | le D    |                          | 21  |                    |  |  |
| .≝ ।                        | 22   | Payables to current and former officers, directors, truste |            |         |                          |     |                    |  |  |
| <u>=</u>                    |      | employees, highest compensated employees, and disqu        |            |         |                          | 1   |                    |  |  |
| <u>  p</u> .                |      | persons Complete Part II of Schedule L                     |            |         |                          | 22  |                    |  |  |
|                             | 23   | Secured mortgages and notes payable to unrelated thin      | d parties  | ·       |                          | 23  |                    |  |  |
|                             | 24   | Unsecured notes and loans payable to unrelated third p     | •          |         |                          | 24  |                    |  |  |
| - 1:                        | 25   | Other liabilities. Complete Part X of Schedule D           |            | Ţ       |                          | 25  |                    |  |  |
| - [:                        | 26   | Total liabilities. Add lines 17 through 25                 |            |         | 50,904                   | 26  | 54,228             |  |  |
| S                           |      | Organizations that follow SFAS 117, check here ▶           | X and      |         |                          |     |                    |  |  |
| စ္အ                         |      | complete lines 27 through 29, and lines 33 and 34.         | _          |         |                          | 1   |                    |  |  |
| <u>a</u>                    | 27   | Unrestricted net assets                                    |            |         | 901,263                  | 27  | 902,731            |  |  |
| Ba                          | 28   | Temporanly restricted net assets                           |            | Ī       |                          | 28  |                    |  |  |
| 힏 :                         | 29   | Permanently restricted net assets                          |            |         | 29                       |     |                    |  |  |
| .≒∣                         |      | Organizations that do not follow SFAS 117, check h         | ere 🕨 🗍    | 7       |                          |     |                    |  |  |
| 7                           |      | and complete lines 30 through 34.                          | _          |         | 1                        |     |                    |  |  |
| S                           | 30   | Capital stock or trust principal, or current funds         |            |         | 30                       |     |                    |  |  |
| set                         | 31   | Paid-in or capital surplus, or land, building, or equipmen | it fund    |         |                          | 31  |                    |  |  |
| Asi                         | 32   | Retained earnings, endowment, accumulated income, of       |            | ınds    |                          | 32  |                    |  |  |
| Net Assets or Fund Balances | 33   | Total net assets or fund balances                          |            |         | 901,263                  | 33  | 902,731            |  |  |
| ž                           | 34   | Total liabilities and net assets/fund balances             |            | Γ       | 952,167                  | 34  | 956,959            |  |  |

Form **990** (2009)

| Pa | ert XI Financial Statements and Reporting  |      |     |        |
|----|--|------|-----|--------|
|    | •  |      | Yes | No     |
| 1  | Accounting method used to prepare the Form 990. Cash X Accrua! 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?                | 2a   | X   |        |
| b  | Were the organization's financial statements audited by an independent accountant?                             | 2b   |     | X      |
| С  | 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?      | 2c   |     |        |
|    | 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   |      |     |        |
| За | 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?   | 3a   |     | _X_    |
| 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.       | 3b   |     |        |
|    |  | Forn | 990 | (2009) |

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

|     | of the organization  | E   | Employer identification number  |  |  |  |  |  |
|-----|--|---|---------------------------------|--|--|--|--|--|
| C   | oliseum Central Business   |   |                                 |  |  |  |  |  |
|     | Improvement District, Inc.   |   | 54-1791888                      |  |  |  |  |  |
| Pa  | organizations Maintaining Donor Advised Further the organization answered "Yes" to Form 990, F | nds or Other Similar Funds or Acc<br>Part IV, line 6. | counts. Complete if             |  |  |  |  |  |
|     |  | (a) Donor advised funds                               | (b) Funds and other accounts    |  |  |  |  |  |
| 1   | Total number at end of year  |   |                                 |  |  |  |  |  |
| 2   | Aggregate contributions to (during year)   |   |                                 |  |  |  |  |  |
| 3   | Aggregate grants from (during year)  |   |                                 |  |  |  |  |  |
| 4   | Aggregate value at end of year   |   |                                 |  |  |  |  |  |
| 5   | Did the organization inform all donors and donor advisors in writing that t                    | he assets held in donor advised                       |                                 |  |  |  |  |  |
|     | funds are the organization's property, subject to the organization's exclusive                 | ive legal control?                                    | Yes No                          |  |  |  |  |  |
| 6   | Did the organization inform all grantees, donors, and donor advisors in w                      | riting that grant funds can be                        |                                 |  |  |  |  |  |
|     | used only for charitable purposes and not for the benefit of the donor or or                   | lonor advisor, or for any other                       |                                 |  |  |  |  |  |
|     | purpose conferring impermissible private benefit?  |   | Yes No                          |  |  |  |  |  |
| _Pa | rt II Conservation Easements. Complete if the orga   | inization answered "Yes" to Form 9                    | 990, Part IV, line 7.           |  |  |  |  |  |
| 1   | Purpose(s) of conservation easements held by the organization (check a                         | ll that apply)  |                                 |  |  |  |  |  |
|     | Preservation of land for public use (e g , recreation or pleasure)                             | Preservation of an historically import                | tant land area                  |  |  |  |  |  |
|     | Protection of natural habitat  | Preservation of certified historic structure          | cture                           |  |  |  |  |  |
|     | Preservation of open space   |   |                                 |  |  |  |  |  |
| 2   | Complete lines 2a through 2d if the organization held a qualified conserve                     | ation contribution in the form of a conservation      | n                               |  |  |  |  |  |
|     | easement on the last day of the tax year   |   |                                 |  |  |  |  |  |
|     |  |   | Held at the End of the Tax Year |  |  |  |  |  |
| а   | Total number of conservation easements   |   | 2a                              |  |  |  |  |  |
| b   | Total acreage restricted by conservation easements   |   | 2b                              |  |  |  |  |  |
| c   | Number of conservation easements on a certified historic structure include                     | ded in (a)  | 2c                              |  |  |  |  |  |
| d   | Number of conservation easements included in (c) acquired after 8/17/06                        | 3   | 2d                              |  |  |  |  |  |
| 3   | Number of conservation easements modified, transferred, released, extin                        | nguished, or terminated by the organization du        | unng                            |  |  |  |  |  |
|     | the taxable year   |   |                                 |  |  |  |  |  |
| 4   | Number of states where property subject to conservation easement is local                      | cated <b>&gt;</b>                                     |                                 |  |  |  |  |  |
| 5   | Does the organization have a written policy regarding the periodic monitor                     | ring, inspection, handling of                         |                                 |  |  |  |  |  |
|     | violations, and enforcement of the conservation easements it holds?                            |   | Yes No                          |  |  |  |  |  |
| 6   | Staff and volunteer hours devoted to monitoring, inspecting, and enforcing                     | g conservation easements during the year              |                                 |  |  |  |  |  |
|     | <b>-</b>   |   |                                 |  |  |  |  |  |
| 7   | Amount of expenses incurred in monitoring, inspecting, and enforcing co                        | nservation easements during the year                  |                                 |  |  |  |  |  |
|     | <b>▶</b> \$  |   |                                 |  |  |  |  |  |
| 8   | Does each conservation easement reported on line 2(d) above satisfy the                        | e requirements of section                             | L                               |  |  |  |  |  |
|     | 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?  |   | Yes No                          |  |  |  |  |  |
| 9   | In Part XIV, describe how the organization reports conservation easemed                        | nts in its revenue and expense statement, and         | 1                               |  |  |  |  |  |
|     | balance sheet, and include, if applicable, the text of the footnote to the or                  | ganization's financial statements that describe       | es                              |  |  |  |  |  |
|     | the organization's accounting for conservation easements                                       |   |                                 |  |  |  |  |  |
| Pa  | Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to   |   | nilar Assets.<br>               |  |  |  |  |  |
| 1a  | If the organization elected, as permitted under SFAS 116, not to report in                     | its revenue statement and balance sheet wo            | rks of                          |  |  |  |  |  |
|     | art, historical treasures, or other similar assets held for public exhibition,                 | education, or research in furtherance of public       | c service,                      |  |  |  |  |  |
|     | provide, in Part XIV, the text of the footnote to its financial statements that                | t describes these items                               |                                 |  |  |  |  |  |
| b   | If the organization elected, as permitted under SFAS 116, to report in its                     | revenue statement and balance sheet works             | of art,                         |  |  |  |  |  |
|     | historical treasures, or other similar assets held for public exhibition, edu                  | cation, or research in furtherance of public se       | rvice,                          |  |  |  |  |  |
|     | provide the following amounts relating to these items  |   |                                 |  |  |  |  |  |
|     | (i) Revenues included in Form 990, Part VIII, line 1   |   | <b>▶</b> \$                     |  |  |  |  |  |
|     | (ii) Assets included in Form 990, Part X   |   | <b>▶</b> \$                     |  |  |  |  |  |
| 2   | If the organization received or held works of art, historical treasures, or o                  | ther similar assets for financial gain, provide t     | he                              |  |  |  |  |  |
|     | following amounts required to be reported under SFAS 116 relating to the                       |   |                                 |  |  |  |  |  |
| а   | Revenues included in Form 990, Part VIII, line 1   |   | . • \$                          |  |  |  |  |  |
| b   | Assets included in Form 990, Part X  | -   | ▶ \$ <u>_</u> _                 |  |  |  |  |  |
|     | Division Ast and Denominal Production Ast Notice and the Instruction                           |   | Schodulo D (Form 990) 2006      |  |  |  |  |  |

(a) Cost or other basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements 97,81 165,630 67,819 d Equipment e Other 97,81 Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))  $\blacktriangleright$ 

Schedule D (Form 990) 2009

| Schedule D (F   | orm 990) 2009 C           | oliseum Central Busin                          | ess  | 54-1791888         | Page 3                                 |
|-----------------|---------------------------|--|--|--------------------|--|
| Part VII        |                           | Other Securities. See Form 990                 |  |                    |  |
|                 |                           | of security or category                        | (b) Book value   | (c) Method o       | f valuation                            |
|                 | • •                       | name of security)                              |  | Cost or end-of-ye  |  |
| Financial deriv | atives                    |  |  |                    |  |
| Closely-held e  |                           |  |  |                    |  |
| Other           | 40,                       |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 |                           |  |  | -                  |  |
|                 |                           |  |  |                    |  |
|                 |                           |  |  | <del></del>        | ······································ |
| Total (Column   | (h) must squal Form       | 990, Part X, col (B) line 12 )                 |  | _                  |  |
| Part VIII       |                           | Program Related. See Form 990                  | Part Y line 13   |                    |  |
| Fait VIII       |                           | on of investment type                          | (b) Book value   | (c) Method o       | f valuation                            |
|                 | (a) Description           | on or investment type                          | (b) book value   | Cost or end-of-ye  |  |
|                 | <del> </del>              |  |  | Cost of one of you | ar marrot value                        |
| <del></del>     |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
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|                 |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 |                           | 990, Part X, col (B) line 13)                  |  |                    |  |
| Part IX         | Other Assets.             | See Form 990, Part X, line 15.                 |  |                    |  |
|                 |                           | (a) Description                                |  |                    | (b) Book value                         |
|                 |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 | <del></del>               |  |  |                    |  |
|                 |                           |  |  |                    |  |
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|                 |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
| Total. (Column  | n (b) must equal Form     | 990, Part X, col (B) line 15)                  |  | <b>•</b>           |  |
| Part X          | Other Liabilitie          | s. See Form 990, Part X, line 25               | •  |                    |  |
| 1               | (a) Desc                  | inption of liability                           | (b) Amount   |                    |  |
| Federal incom   | e taxes                   | · · · · ·                                      |  |                    |  |
|                 |                           |  |  |                    |  |
| <del></del>     |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 |                           |  |  |                    |  |
|                 |                           |  |  | 7                  |  |
|                 |                           |  |  |                    |  |
|                 | <del></del>               |  |  | -                  |  |
|                 |                           |  | <del></del>  | 1                  |  |
|                 |                           |  |  | -                  |  |
|                 |                           |  |  | 4                  |  |
| T-4-1 (C. 1     | - (h) 15                  | 000 Bad V and (B) Land CS                      |  | 4                  |  |
|                 |                           | 990, Part X, col (B) line 25 )                 | dia da Reno de la Companya de la Com | - 45-4             | <u> </u>                               |
|                 |                           | ovide the text of the footnote to the organiza | iuon's financial statement   | s mat reports the  |  |
| organization's  | nability for uncertain ta | ax positions under FIN 48                      |  |                    |  |

| Sche   | dule D (Form 990) 2009 Coliseum Central Business  |                                   | -1791888       | Page 4       |
|--------|---|-----------------------------------|----------------|--------------|
| Pa     | rt XI Reconciliation of Change in Net Assets from Form 9                                    | 90 to Audited Financi             | ial Statements |              |
| 1      | Total revenue (Form 990, Part VIII, column (A), line 12)                                    |                                   | 1              |              |
| 2      | Total expenses (Form 990, Part IX, column (A), line 25)                                     |                                   | 2              |              |
| 3      | Excess or (deficit) for the year Subtract line 2 from line 1                                |                                   | 3              |              |
| 4      | Net unrealized gains (losses) on investments  |                                   | 4              |              |
| 5      | Donated services and use of facilities  |                                   | 5              |              |
| 6      | Investment expenses   |                                   | 6              |              |
| 7      | Prior period adjustments  |                                   | 7              |              |
| 8      | Other (Describe in Part XIV )   |                                   | 8              |              |
| 9      | Total adjustments (net). Add lines 4 through 8  |                                   | 9              |              |
| 10     | Excess or (deficit) for the year per audited financial statements. Combine lines 3 a        | and 9                             | 10             |              |
| ₽a     | rt XII Reconciliation of Revenue per Audited Financial Sta                                  | tements With Revenu               | ie per Return  |              |
| 1      | Total revenue, gains, and other support per audited financial statements                    |                                   | 1              |              |
| 2      | Amounts included on line 1 but not on Form 990, Part VIII, line 12                          |                                   |                |              |
| а      | Net unrealized gains on investments   | 2a                                |                |              |
| b      | Donated services and use of facilities  | 2b                                |                |              |
| С      | Recoveries of prior year grants   | 2c                                |                |              |
| d      | Other (Describe in Part XIV )   | 2d                                |                |              |
| е      | Add lines 2a through 2d   |                                   | 2e             |              |
| 3      | Subtract line 2e from line 1  |                                   | 3              |              |
| 4      | Amounts included on Form 990, Part VIII, line 12, but not on line 1:                        | ] [                               |                |              |
| а      | Investment expenses not included on Form 990, Part VIII, line 7b                            | 4a                                |                |              |
| b      | Other (Describe in Part XIV )   | 4b                                |                |              |
| С      | Add lines 4a and 4b   | <del></del>                       | 4c             |              |
| 5      | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)               |                                   | 5              |              |
| Pa     | rt XIII Reconciliation of Expenses per Audited Financial St                                 | atements With Expen               | ses per Return |              |
| 1      | Total expenses and losses per audited financial statements                                  | •                                 | 1              |              |
| 2      | Amounts included on line 1 but not on Form 990, Part IX, line 25                            |                                   |                |              |
| а      | Donated services and use of facilities  | 2a                                |                |              |
| b      | Prior year adjustments  | 2b                                |                |              |
| С      | Other losses  | 2c                                |                |              |
| d      | Other (Describe in Part XIV )   | 2d                                |                |              |
| е      | Add lines 2a through 2d   |                                   | 2e             |              |
| 3      | Subtract line 2e from line 1  |                                   | 3              |              |
| 4      | Amounts included on Form 990, Part IX, line 25, but not on line 1:                          | ] [                               |                |              |
| а      | Investment expenses not included on Form 990, Part VIII, line 7b                            | 4a                                |                |              |
|        | Other (Describe in Part XIV )   | 4b                                |                |              |
|        | Add lines 4a and 4b   | <u> </u>                          | 4c             |              |
| 5      | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)              |                                   | 5              |              |
|        | ert XIV Supplemental Information  |                                   |                |              |
|        | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part   | II lines 1a and 4 Part IV lin     | es 1h          |              |
|        | tb, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XI |                                   |                |              |
|        | art to provide any additional information   | , iii 00 20 ana 10. 7 ii 00 00 ii | pioto          |              |
| u no p | art to provide any additional information   |                                   |                |              |
|        |   |                                   |                |              |
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| -      |   | <b>_</b>                          | <del>-</del>   | <del>-</del> |
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|        |   |                                   |                |              |
|        |   |                                   |                |              |

| Sche | dule | D (Fo        | orm 9         | 90) 2    | 2009 | (    | Col   | is  | ew    | m (      | Cent  | tral  | . Bu | si | nes | s |     |   |   |            | 54 | -17 | 91 | 88 | 8          |   |     |   |   | Page 5     |
|------|------|--------------|---------------|----------|------|------|-------|-----|-------|----------|-------|-------|------|----|-----|---|-----|---|---|------------|----|-----|----|----|------------|---|-----|---|---|------------|
| Pa   | rt X | īV           | Su            | lagi     | eme  | enta | l Inf | orm | natio | on (     | conti | inuec | )    |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
|      |      |              | <del></del> - | <u> </u> |      |      |       |     |       | <u> </u> |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
|      |      | - <b>·</b> — | _             | _        |      |      |       | _   | _     | _        |       |       |      |    | _   |   |     | _ | _ | <b>—</b> · |    | _   |    |    |            |   | - – | _ | _ |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
|      |      | - –          | _             | _        |      |      |       | _   | _     | _        |       |       |      | -  | _   |   |     | _ | - |            |    | _   |    |    |            |   |     | _ | _ |            |
|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
|      |      |              | _             | _        |      |      |       | _   | _     | _        |       |       |      |    | _   |   |     | _ | _ |            |    | _   |    |    |            |   | - – | _ | _ |            |
|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   | _          |    |     | _  |    |            | _ |     | _ | _ |            |
|      |      | _            | _             | _        |      |      |       | _   | _     | _        |       |       |      |    |     |   |     | _ | _ |            |    | _   | _  |    |            |   |     | _ | _ |            |
|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
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|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
|      |      |              | _             |          |      |      |       | _   | _     | _        |       |       |      |    | _   |   |     | _ | _ | _          |    | _   |    |    |            |   |     | _ | _ |            |
|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
|      |      |              | _             | _        |      |      |       | _   | _     | _        |       |       |      |    | _   |   |     | _ | _ | _          |    | _   | _  |    |            |   |     | _ | _ |            |
|      |      | _            | _             |          |      |      |       | _   | _     | _        |       | _     |      | _  | _   |   | _   | _ | _ |            |    | _   | -  |    |            |   |     |   |   |            |
|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |
|      |      |              | _             | _        |      |      |       | _   | -     | _        |       |       |      |    | _   |   |     | _ | _ | _          |    | _   |    |    |            |   |     | _ | _ |            |
|      |      |              |               |          |      |      |       |     |       |          |       |       |      |    |     |   |     |   |   |            |    |     |    |    |            |   |     |   |   |            |

**SCHEDULE O** 

(Form 990)

### **Supplemental Information to Form 990**

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

**2009**Open to Public Inspection

Name of the organization

Coliseum Central Business Improvement District, Inc.

Employer Identification number 54-1791888

Form 990, Part I, Line 6

The organization used approximately 150 volunteers for events such as Community Cleanup Days and the Holiday Parade.

Form 990, Part III, Line 4d - All Other Achievements
Work to improve relationships among Association
stakeholders.

Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents Class One Members of the board must be the the eight members who are the largest NON-ASSESSMENT EXEMPT property owners. Previously the by-laws did not specify that the property owners must be non-assessment exempt.

Form 990, Part VI, Line 11a - Organization's Process to Review Form 990
The form 990 is reviewed by the Executive Director and the Office Manager before filing. The completed form 990 will be presented to the governing board at the following monthly board meeting.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

A personnel committee comprised of designated members of the Board of

Directors determines the salary, raises, and bonuses for the Executive

Director.

Form 990, Part VI, Line 15b - Compensation Process for Officers

A personnel committee comprised of designated members of the Board of

Name of the organization

Coliseum Central Business

Employer identification number 54-1791888

Directors determines the salary, raises, and bonuses of the key employees.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents are made available upon request.

Schedule O - Additional Information

The organization does not engage in political activities on behalf of any specific candidates. It does hold a "Meet the Candidates" forum where all candidates running for city council are invited to answer questions and share their viewpoints.

Form 4562

Department of the Trèasury Internal Revenue Service

# **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No 1545-0172

(99)

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No

| Name  | • •   | vement Dis  | _  | ıc.       |                     |  |             |            |         | 1888                       |
|-------|---|---|--|-----------|---------------------|--|-------------|------------|---------|----------------------------|
|       | ess or activity to which this form relates    |   |  |           |                     |  |             |            |         |                            |
|       | ndirect Depreciati                            |   |  |           |                     |  |             | _          |         |                            |
| Pŧ    | ert I Election To Expen                       |   |  |           |                     |  |             |            |         |                            |
|       | Note: If you have a                           |   |  |           | etore you           | com  | plete Pai   | rt I.      | Τ.      | 250 000                    |
| 1     | Maximum amount. See the instructi             | •   |  | ses       |                     |  |             |            | 1       | 250,000                    |
| 2     | Total cost of section 179 property p          | •   | •  |           |                     |  |             |            | 2       | 900 000                    |
| 3     | Threshold cost of section 179 prope           | •   | •  | struction | is)                 |  |             |            | 3       | 800,000                    |
| 4     | Reduction in limitation. Subtract line        |   |  |           |                     |  |             |            | 4       |                            |
| 5     | Dollar limitation for tax year. Subtract line |   | less, enter -0- If mar                     | Τ         |                     |  | 1           |            | 5       |                            |
| 6     | (a) Description                               | of property                                       |  | (b) Cos   | t (business use     | only)  | (c) E       | lected cos | τ       | -                          |
|       |   | ··· ··· ·   | · · · · · · · · · · · · · · · · · · ·      | <u> </u>  |                     |  | -           |            |         | -                          |
|       |   |   |  |           |                     |  |             |            |         | -                          |
| 7     | Listed property Enter the amount fr           |   |  |           |                     | 7  | L           |            | Τ.      |                            |
| 8     | Total elected cost of section 179 pro         | •   | in column (c), lines                       | s 6 and 7 | 7                   |  |             |            | 8       |                            |
| 9     | Tentative deduction Enter the sma             |   |  |           |                     |  |             |            | 9       |                            |
| 10    | Carryover of disallowed deduction fi          | •   |  |           |                     |  |             |            | 10      |                            |
| 11    | Business income limitation Enter th           |   | •  |           | ,                   | ee ins                                       | tructions)  |            | 11      | <u> </u>                   |
| 12    | Section 179 expense deduction Ad              | •   |  |           | : 11                |  | 1           |            | 12      | <u> </u>                   |
| 13    | Carryover of disallowed deduction to          |   |  |           |                     | 13   |             |            |         | <u> </u>                   |
| ***** | : Do not use Part II or Part III below f      |   |  |           | <b>/</b> D          |  | .1. 1.4.    |            | 4 \     | (O ' 4 - )                 |
|       | art II Special Depreciation                   |   |  |           |                     |  | uae iiste   | a prope    | eπy.)   | (See instr.)               |
| 14    | Special depreciation allowance for o          |   | ner than listed prop                       | erty) pla | ced in service      | •  |             |            | ١       |                            |
|       | during the tax year (see instructions         |   |  |           |                     |  |             |            | 14      |                            |
| 15    | Property subject to section 168(f)(1)         | •   |  |           |                     |  |             |            | 15      | 0.500                      |
| 16    | Other depreciation (including ACRS            |   | ala Catadaaa                               |           | 0:                  | _4'  |             |            | 16      | 8,580                      |
| Pa    | ert III MACRS Depreciati                      | on (Do not incit                                  |  |           | See instru          | Ctior  | IS.)        |            |         |                            |
|       |   | <del> </del>                                      |  | ion A     |                     |  |             |            | T       | 1 0                        |
| 17    | MACRS deductions for assets place             | •   | • •  |           |                     |  |             |            | 17      | U                          |
| 18    | If you are electing to group any assets pla   | aced in service during the<br>Assets Placed in Se |  |           |                     |  |             | istion S   |         |                            |
|       | Section B—                                    | (b) Month and year                                | (c) Basis for depre                        |           | T                   | Gene   | rai Deprec  | iation S   | /5(8)11 | 1                          |
|       | (a) Classification of property                | placed in<br>service                              | (business/investme<br>only-see instruction | ent use   | (d) Recovery period | (e) (  | Convention  | (f) Me     | thod    | (g) Depreciation deduction |
| 19a   | 3-year property                               |   |  |           |                     |  |             |            |         |                            |
| b     | 5-year property                               |   |  |           |                     |  |             |            |         |                            |
| С     | 7-year property                               |   |  |           |                     |  |             |            |         |                            |
| d     | 10-year property                              |   |  |           |                     |  |             |            |         |                            |
| е     | 15-year property                              |   |  |           |                     |  |             |            |         |                            |
| f     | 20-year property                              |   |  |           |                     |  |             |            |         |                            |
| g     | 25-year property                              |   |  |           | 25 yrs              |  |             | S/l        | -       |                            |
| h     | Residential rental                            |   |  |           | 27.5 yrs.           |  | ММ          | S/l        |         |                            |
|       | property                                      |   |  | _         | 27.5 yrs.           |  | MM          | S/l        | -       |                            |
| i     | Nonresidential real                           |   |  |           | 39 yrs              | L  | MM          | S/l        | -       | <u> </u>                   |
|       | property                                      |   | L  |           |                     |  | ММ          | S/I        |         |                            |
|       | Section C—As                                  | ssets Placed in Serv                              | vice During 2009 1                         | Tax Yeaı  | Using the A         | lterna                                       | ative Depre | ciation    | System  | 1                          |
| 20a   | Class life                                    |   |  |           |                     |  |             | S/l        | _       |                            |
| b     | 12-year_                                      |   |  |           | 12 yrs              |  |             | S/I        | -       |                            |
| С     | 40-year                                       |   |  |           | 40 yrs              |  | MM          | S/         | L       |                            |
| Pŧ    | art IV Summary (See ins                       | tructions.)                                       |  |           |                     |  |             |            |         |                            |
| 21    | Listed property. Enter amount from            | line 28 .   |  |           |                     |  |             |            | 21      |                            |
| 22    | Total. Add amounts from line 12, lin          | nes 14 through 17, lin                            | es 19 and 20 in co                         | lumn (g)  | , and line 21       | Enter  | here        |            |         |                            |
|       | and on the appropriate lines of your          | return Partnerships                               | and S corporations                         | s—see II  | nstructions         | <u>.                                    </u> | ·           |            | 22      | 8,580                      |
| 23    | For assets shown above and placed             | d in service during the                           | e current year, ente                       | er the    |                     |  |             |            |         |                            |
|       | portion of the basis attributable to se       | ection 263A costs                                 |  |           |                     | 23   |             |            |         |                            |

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| Asset    | Description   | Date<br>In Service   | Cost           | Bus Sec<br>% 179Bonus | Basis<br>for Depr | PerConv Meth             | Prior          | Current      |
|----------|---|----------------------|----------------|-----------------------|-------------------|--------------------------|----------------|--------------|
| Prior    | MACRS:  |                      |                | <u> </u>              |                   |                          | 2,932          | 0            |
| 3 4      | SUPPLY RM CO - 2 DESKS, 2 CHAIRS<br>I CUSHIONED ARM CHAIR | 4/17/96<br>1/01/97   | 2,932<br>449   |                       | 2,932<br>449      | 7 HY 200DB               | 449            | Ô            |
| 5<br>6   | 4 STACKING CHAIRS<br>DESK, BOOKSHELF, CHAIR               | 1/01/97<br>8/07/97   | 109<br>994     |                       | 109<br>994        |                          | 109<br>994     | 0<br>0       |
| 7        | LATERAL FILE  | 1/02/98              | 336            |                       | 336               | 7 HY 200DB               | 336            | 0            |
| 11<br>12 | ROUND TABLE & MISC OFFICE ROUND TABLE                     | 3/20/98<br>9/04/98   | 549<br>333     |                       | 549<br>333        |                          | 549<br>333     | 0<br>0       |
| 14       | LATERAL FILE  | 5/05/99              | 441            |                       | 441               | 7 HY 200DB               | 441            | 0            |
| 18<br>31 | ICE MAKER WATER COOLER & REFRIGERATOR                     | 6/14/01<br>4/04/96   | 716<br>340     |                       | 716<br>340        |                          | 716<br>340     | 0            |
| 34       | GE TELEVISION W/VCR                                       | 5/16/96              | 303            |                       | 303               | 7 HY 200DB               | 303            | 0            |
| 38<br>41 | HP 5P SCANJET<br>HP 890 PRINTER                           | 8/14/97<br>7/07/98   | 313<br>397     |                       | 313<br>397        |                          | 313<br>397     | 0<br>0       |
| 45       | PC UPGRADES/OFFICE 2000                                   | 3/08/00              | 463            |                       | 463               | 5 HY 200DB               | 463            | 0            |
| 46<br>47 | PENTIUM III 533 MHZ PC<br>2 MONITORS/I NIC CARD           | 10/13/00<br>10/27/00 | 804<br>523     |                       | 804<br>523        | 5 HY 200DB<br>5 HY 200DB | 804<br>523     | 0            |
|          | 2 PENTIUM II 800 MHZ PC                                   | 4/30/01              | 2,853          | -                     | 2,853             |                          | 2,853          | 0            |
|          |   | =                    | 12,855         | =                     | 12,855            | :                        | 12,855         | 0            |
| Other    | Depreciation: PLATINUM PLUS                               | 6/06/03              | 1,147          |                       | 1,147             | 5 MO S/L                 | 1,147          | 0            |
| 15       | LATERAL FILE  | 10/13/00             | 498            |                       | 498               | 5 MO S/L                 | 498            | 0            |
| 16<br>19 | 2 DESKS/2 CHAIRS<br>SOFA & 2 CHAIRS (KELLEHER)            | 5/09/01<br>7/19/01   | 3,362<br>1,941 |                       | 3,362<br>1,941    | 5 MO S/L<br>5 MO S/L     | 3,362<br>1,941 | 0            |
| 20       | LATERAL FILE  | 2/25/02              | 523            |                       | 523               | 5 MO S/L                 | 523            | 0            |
| 21<br>22 | FOLDING TABLE<br>SHAGNHI TABLE/CUPS                       | 8/09/02<br>8/09/02   | 209<br>177     |                       | 209<br>177        | 5 MO S/L<br>5 MO S/L     | 209<br>177     | 0<br>0       |
| 23       | LATERAL FILE  | 8/22/02              | 416            |                       | 416               | 5 MO S/L                 | 416            | 0            |
| 24<br>25 | DESK CHAIR (DAN)<br>LATERAL FILE                          | 9/09/02<br>9/09/02   | 784<br>399     |                       | 784<br>399        |                          | 784<br>399     | 0            |
| 26       | 6 SHELF BOOK CASE   | 9/22/02              | 382            |                       | 382               | 5 MO S/L                 | 382            | 0            |
| 27<br>28 | TABLE, SONY, CRATE & BARREL<br>BOOKCASE                   | 10/10/02<br>1/09/03  | 543<br>523     |                       | 543<br>523        | 5 MO S/L<br>5 MO S/L     | 543<br>523     | 0<br>0       |
| 49       | SAMSUNG PHONE SYSTEM                                      | 5/14/01              | 6,893          |                       | 6,893             | 5 MO S/L                 | 6,893          | 0            |
| 53<br>54 | HP4600 COLOR PRINTER WINDOWS UPGRADE                      | 8/06/02<br>8/22/02   | 2,531<br>4,715 |                       | 2,531<br>4,715    | 5 MO S/L<br>5 MO S/L     | 2,531<br>4,715 | 0            |
| 56       | PATCH CABLE/NET GEAR                                      | 9/09/02              | 228            |                       | 228               | 5 MO S/L                 | 228            | 0            |
| 57<br>58 | ARTWORK<br>ARTWORK  | 9/08/04<br>11/01/04  | 1,121<br>1,425 |                       | 1,121<br>1,425    | 7 MO S/L<br>7 MO S/L     | 774<br>950     | 160<br>204   |
| 59<br>60 | HP 3700 PRINTER   | 7/22/04<br>8/24/04   | 1,875<br>800   |                       | 1,875<br>800      | 5 MO S/L<br>5 MO S/L     | 1,844<br>773   | 31<br>27     |
| 61       | AUDIO EQUIPMENT<br>COMPUTER BACK-UP                       | 9/08/04              | 1,277          |                       | 1,277             | 5 MO S/L                 | 1,234          | 43           |
| 62       | TENT CANOPIES<br>ARTWORK                                  | 9/09/04<br>5/26/04   | 171<br>1,179   |                       | 171<br>1,179      | 5 MO S/L                 | 165<br>856     | 6<br>169     |
| 63<br>64 | HP 6122 PRINTER   | 10/14/03             | 151            |                       | 151               | 5 MO S/L                 | 151            | 0            |
| 65<br>66 | PHONE SYSTEM<br>EASEL                                     | 11/05/03<br>1/09/04  | 513<br>158     |                       | 513<br>158        |                          | 513<br>158     | 0<br>0       |
| 67       | DVD DRIVE   | 9/08/05              | 248            |                       | 248               | 5 MO S/L                 | 190            | 50           |
| 69<br>70 | TOSHIBA LAPTOP<br>ARTWORK                                 | 9/23/05<br>12/05/05  | 2,021<br>444   |                       | 2,021<br>444      | 5 MO S/L<br>7 MO S/L     | 1,516<br>227   | 404<br>64    |
| 71       | DELL PROJECTOR  | 1/04/06              | 734            |                       | 734               | 5 MO S/L                 | 514            | 147          |
| 72<br>73 | PORTABLE PODIUM 3 COMPUTERS (Kelleher/Brundin/Eley)       | 6/30/06<br>9/01/06   | 105<br>5,158   |                       | 105<br>5,158      | 5 MO S/L<br>5 MO S/L     | 63<br>2,923    | 21<br>1,032  |
| 74       | COMPUTER (Breede)   | 9/08/06              | 1,255          |                       | 1,255             | 5 MO S/L                 | 710            | 251          |
| 76<br>78 | ARTWORK CONFERENCE TABLE & CHAIRS                         | 10/16/06<br>4/26/07  | 728<br>8,689   |                       | 728<br>8,689      |                          | 277<br>3,765   | 104<br>1,738 |
| 79       | ARTWORK   | 5/03/07              | 728            |                       | 728               | 7 MO S/L                 | 225            | 104          |
| 80<br>81 | BROCHURE RACK (Siegel) COMPUTER (Carson)                  | 7/20/07<br>8/21/07   | 196<br>881     |                       | 196<br>881        | 7 MO S/L<br>5 MO S/L     | 54<br>323      | 28<br>176    |
| 82       | CONFERENCE ROOM CHAIRS                                    | 9/18/07              | 825            |                       | 825               | 7 MO S/L                 | 206            | 118          |
| 83<br>84 | CONFERENCE ROOM TABLE EXT BACKUP H/W & OUTLOOK 2003 S     | 10/10/07<br>1/02/08  | 2,783<br>919   |                       | 2,783<br>919      |                          | 696<br>276     | 397<br>183   |
| 85       | DESK (McCoury)  | 3/19/08              | 998            |                       | 998               | 7 MO S/L                 | 178            | 143          |
| 86<br>87 | COMPUTER SOFTWARE DELL LAPTOP COMPUTER                    | 5/06/08<br>6/30/08   | 1,747<br>1,859 |                       | 1,747<br>1,859    |                          | 679<br>372     | 582<br>372   |
| 88       | New server backup system                                  | 11/18/08             | 4,008          |                       | 4,008             | 5 MO S/L                 | 468            | 801          |
| 89       | HP D4360 Printer  | 4/28/09              | 68             |                       | 68                | 5 MO S/L                 | 2              | 14           |

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| Asset | Description  | Date<br>In Service | Cost                         | Bus Sec<br><u>%</u> 179Bonus | Basis<br>for Depr            | PerConv Meth | Prior                      | Current                  |
|-------|--|--------------------|------------------------------|------------------------------|------------------------------|--------------|----------------------------|--------------------------|
| 90    | Adobe Upgrade 9 0  | 6/30/09            | 173                          |                              | 173                          | 3 MO S/L     | 0                          | 58                       |
| 91    | Photoshop 11 Upgrade   | 6/30/09            | 740                          |                              | 740                          | 3 MO S/L     | 0                          | 247                      |
| 92    | Quark 8 Upgrade  | 6/30/09            | 310                          |                              | 310                          | 3 MO S/L     | 0                          | 103                      |
| 93    | Conference Room Furniture/Chairs   | 5/17/10            | 36,400                       |                              | 36,400                       |              | 0                          | 433                      |
| 94    | Office Furniture (Elizabeth, Eboni, mary)  | 5/17/10            | 31,070                       |                              | 31,070                       | 7 MO S/L     | 0                          | 370                      |
| 95    | Office Furniture (Finance, Kitchen)  | 6/22/10            | 15,717                       | _                            | 15,717                       | 7 MO S/L     | 0                          | 0                        |
|       | Total Other Depreciation   | -                  | 152,745                      | _                            | 152,745                      |              | 46,353                     | 8,580                    |
|       | Total ACRS and Other Depreciation  |                    |                              | =                            | 152,745                      |              | 46,353                     | 8,580                    |
|       | Grand Totals<br>Less: Dispositions and Transfe<br>Less: Start-up/Org Expense<br>Net Grand Totals | ers<br>-           | 165,600<br>0<br>0<br>165,600 | <u>-</u>                     | 165,600<br>0<br>0<br>165,600 |              | 59,208<br>0<br>0<br>59,208 | 8,580<br>0<br>0<br>8,580 |