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Form **990**

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

2010

Open to Public

Inspection

A For the 2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010 D Employer identification number B Check if applicable COLUMBUS BOARD OF REALTORS 31-4154020 Address change Doing Business As Name change E Telephone number ☐ Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite (614) 475-4000 2700 AIRPORT DRIVE Terminated G Gross receipts \$ 3,350,939 Amended return City or town, state or country, and ZIP + 4 COLUMBUS, OH 43219 Application pending Name and address of principal officer **H(a)** Is this a group return for affiliates? Yes No STANLEY E COLLINS 2700 AIRPORT DRIVE H(b) Are all affiliates included? COLUMBUS, OH 43219 If "No," attach a list (see instructions) H(c) Group exemption number ▶ 501(c)(3) **✓** 501(c) (6) **◄** (insert no) Tax-exempt status ☐ 4947(a)(1) or ☐ 527 Website: ► WWW COLUMBUSREALTORS ORG K Form of organization
✓ Corporation
☐ Trust
☐ Association
☐ Other ► L Year of formation 1908 M State of legal domicile OH Part I Summary Briefly describe the organization's mission or most significant activities TO UNITE THOSE ENGAGED IN THE RECOGNIZED BRANCHES OF THE REAL ESTATE PROFESSION FOR THE PURPOSE OF EXERTING A BENEFICIAL INFLUENCE UPON THE PROFESSION AS EXPRESSED IN THE CODE OF ETHICS OF THE Activities & Governance NATIONAL ASSOCIATION OF REALTORS 2 Check this box 📂 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . 20 4 20 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2010 (Part V, line 2a) . 5 21 6 19 Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 261,419 **b** Net unrelated business taxable income from Form 990-T, line 34 0 **Prior Year Current Year** 33,806 Contributions and grants (Part VIII, line 1h) . 36,314 Program service revenue (Part VIII, line 2g) . 2,853,135 2,633,966 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 51,521 51,011 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 187,119 328,299 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 3,125,581 3,049,590 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 43,000 43,000 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-781,741 Expenses 925,562 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 0 b Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 2,367,842 2,275,885 18 3,336,404 3,100,626 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . -210,823 -51,036 (Assets or | nd Balances | **Beginning of Current End of Year** Year 20 6,145,919 6,204,275 Total assets (Part X, line 16) . . . 21 2,043,499 Total liabilities (Part X, line 26) 2,029,600 22 Net assets or fund balances Subtract line 21 from line 20 4,116,319 4,160,776 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 2011-05-12 Signature of officer Date Sign Here STANLEY E COLLINS CEO Type or print name and title Check if self Preparer's signature GRETA RZYMEK CPA GRETA RZYMEK CPA employed 🕨 Paid Firm's name FREA & ASSOCIATES INC CPA'S Firm's EIN Preparer Firm's address F 5775 PERIMETER DRIVE - SUITE 200

DUBLIN, OH 430173224

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

Use Only

Phone no 🕨 (614) 889-

FOITH	990 (2010)				Page 2
Par		nt of Program Service A hedule O contains a response	Accomplishments to any question in this Part III		দ
1	Briefly describe th	e organization's mission			
CBR COM LANI IS FA COM SETT ACC	IS COMPRISED OF MERCIAL SALES AD DEVELOPMENT TAYETTE, FRANKLIN MUNITY BY PROTETING HIGH STAND, OMPLISHED THRO	MORE THAN 6,000 REAL E ND LEASING, PROPERTY M THE TERRITORIAL JURISDI MADISON, MORROW AND CTING THE INTERESTS OF ARDS FOR PROFESSIONAL UGH THE ENFORCEMENT O	A LOCAL LEVEL, NOT-FOR-PR STATE PROFESSIONALS ENG, ANAGEMENT, APPRAISAL, CO CTION OF CBR AS A MEMBER PICKAWAY COUNTIES IN OH ITS MEMBERS, PROMOTING PRACTICE, AND ADVOCATIN F THE CODE OF ETHICS, COM	AGED IN RESIDENTIAL SALE NSULTATION, REAL ESTATE OF THE NATIONAL ASSOCIA IO CBR PROVIDES LEADERS IHEIR VALUE TO THE REAL IS G PRIVATE PROPERTY RIGHT	S AND LEASING, SYNDICATION AND ATION OF REALTORS HIP FOR THE REALTOR ESTATE CONSUMER, IS ITS MISSION IS BERSHIP MEETINGS, A
2	_		rogram services during the year		Yes ▼ No
	If "Yes," describe t	hese new services on Schedu	le O		
3	services?		significant changes in how it cor		Yes 🔽 No
	If "Yes," describe t	hese changes on Schedule O			
4	Section 501(c)(3)	and 501(c)(4) organizations	each of the organization's three and section 4947(a)(1) trusts a venue, if any, for each program s	re required to report the amoun	•
4a	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
		MMERCIAL, COMPUTER TRAINING C	DARD OF REALTORS OFFERS REALTORS LASSES ON TOPICS INCLUDING THE MI		
4b	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
			RTICIPATE IN THE MORE THAN 30 COM NUARY), AWARDS NIGHT (APRIL), OR T		
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
			RGRAMS AND SERVICES REAL ESTATE OTEWORTHY ACTIVITIES INCLUDING IN		
4d	Other program se	rvices (Describe in Schedule	0)		
	(Expenses \$	ıncludıng	grants of \$) (Revenue \$)
4e	Total program ser	vice expenses ⊁ \$			

Part IV	Checklist	of Red	uired	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 💋	2	Yes	
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	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV \cdot	16		Νo
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
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		Νo
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		Νo
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
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-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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		No
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			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
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		Νο
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		No
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	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

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Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	Check if Schedule O Contains a response to any question in this rait v	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		res	NO
	1a 15	;		
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable]	, , , , , , , , , , , , , , , , , , ,	
2a	gaming (gambling) winnings to prize winners?	1c	Yes	
	Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the		,,	
h	year?	3a 3b	Yes Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	35	163	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N o
ь	If "Yes," enter the name of the foreign country			110
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	-		
_				
5a ե	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		No No
		5b		NO
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
b	organization solicit any contributions that were not tax deductible?			
	were not tax deductible?	6b		
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 goods 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		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	l _		
£	contract?	7e 7f		No No
	If the organization, during the year, pay premiums, directly of manectly, on a personal benefit contract?.			NO
9	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
_		8		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club	_		
11	facilities Section 501(c)(12) organizations Enter			
	Section 501(c)(12) organizations. Enter Gross Income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them)	-		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
13	year Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?			
_	Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
c	In which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand	1		
_	13c	_		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

_Se	ction A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year								
b	Enter the number of voting members included in line 1a, above, who are independent								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo					
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		No					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Νο					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νο					
6	Does the organization have members or stockholders?	6	Yes						
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes						
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the								
	year by the following		V						
a	The governing body?	8a	Yes						
b	Each committee with authority to act on behalf of the governing body?	8b	Yes						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at th organization's mailing address? If "Yes," provide the names and addresses in Schedule O								
	ection B. Policies (This Section B requests information about policies not required by the Internal venue Code.)								
	venue deucij		Yes	No					
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νο					
	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							
11a	11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form								
	······································	11a	Yes						
b	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	Yes						
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes						
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes						
13	Does the organization have a written whistleblower policy?	13	Yes						
14	Does the organization have a written document retention and destruction policy?	14		Νο					
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	Yes						
	Other officers or key employees of the organization	15b		No					
	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		Νο					
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?									
Se	ction C. Disclosure	16b							
17	List the States with which a copy of this Form 990 is required to be filed▶								
18	Section 6104 requires an organization to make its Form 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. A nother's website. Upon request								

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization STANLEY E COLLINS CEO
 2700 AIRPORT DRIVE
 COLUMBUS, OH 43219
 (614) 475-4000

Part 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

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any 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

Check this box if neither the organization no<u>r any related organization compensated any current officer, director, or trustee</u>

(A) Name and Title	(B) Average hours	Posi t	((tion (hat a	che		II.		(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) SUE LUSK-GLEICH PRESIDENT	6 00	х		х				0	0	0
(2) RICK BENJAMIN PRESIDENT-ELECT	4 00	х		Х				0	0	0
(3) JIM CORIDAN TREASURER	2 00	х		х				0	0	0
(4) CHRIS PEDON SECRETARY	2 00	х		Х				0	0	0
(5) MIC GORDON DIRECTOR	1 00	х						0	0	0
(6) TERRY BRYANT DIRECTOR	1 00	х						0	0	0
(7) BENJAMIN CALHOON DIRECTOR	1 00	х						0	0	0
(8) RICK LEMMONS DIRECTOR	1 00	х						0	0	0
(9) RON HOBELMAN DIRECTOR	1 00	х						0	0	0
(10) BOB MCCARTHY DIRECTOR	1 00	х						0	0	0
(11) JAN JEDLINSKY DIRECTOR	1 00	х						0	0	0
(12) BONNIE LUSTNAUER DIRECTOR	1 00	х						0	0	0
(13) LORRI MOLNAR DIRECTOR	1 00	х						0	0	0
(14) STACY MCVEY DIRECTOR	1 00	х						0	0	0
(15) CHIP PARRISH DIRECTOR	1 00	х						0	0	0
(16) GARY PARSONS DIRECTOR	1 00	Х						0	0	0

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

(A) Name and Title		(B) Average hours per	1	tion (che		II		(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estima mount o	ated fother
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	01	from t rganizati relat organiza	:he on and ed
(17) I DIREC	DON ROBERTS CTOR	1 00	х						0		0		0
(18) I	IILL RUDLER CTOR	1 00	х						0		0		0
(19) I	CATHY SHIFLET	1 00	х						0		0		0
	STANLEY COLLINS	40 00			х				78,536	77,75	6		14,384
1b	Sub-Total			<u> </u>		<u> </u>	<u> </u>	<u> </u>			+		
С							 - -						
d	Total (add lines 1b and 1c) .							Þ	78,536	77,756			14,384
c Total from continuation sheets to Part VII, Section A													
												Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sch					eye •	mploy •	ee, o	r highest compens	ated employee	3		Νο
4	For any individual listed on line in organization and related organization												
5	Individual	receive or accr	ie comp	· nenco	• ition	fron	n anv	• unral	ated organization o	r individual for	4	Yes	
3	services rendered to the organiz						•		•	·	5		No
	ction B. Independent Con												
1	Complete this table for your five \$100,000 of compensation from			ndep	ende	ent c	ontra	ctors	that received more	e than			
	Nan	(A) ne and business ad	dress						Descri	(B) iption of services		(C Comper	
											7		
											#		

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization **>**0

	Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations mus other organizations must complete column (A) but are not required to c		s (B), (C), and		72:
	include amounts reported on lines 6b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	43,000			
	Grants and other assistance to individuals in the U.S. See Part IV, line 22	12722			
	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
	Compensation of current officers, directors, trustees, and key employees	85,728			
	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	509,196			
	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	27,987			
	Other employee benefits	108,077			
	Payroll taxes	50,753			
а	Fees for services (non-employees) Management				
	Legal	18,331			
	Accounting	15,389			
	Lobbying				
	Professional fundraising services See Part IV, line 17				
	Investment management fees	2,861			
	Other	15,000			
	Advertising and promotion	13,000			
	Office expenses	00.350			
	Information technology	98,258			
	Royalties	120.012			
	Occupancy	139,013			
	Travel	85,342			
	state, or local public officials				
L9	Conferences, conventions, and meetings	91,635			
20	Interest				
21	Payments to affiliates	1,333,347			
22	Depreciation, depletion, and amortization	62,238			
23	Insurance	5,009			
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	PRINTING AND PHOTOGRAPH	91,754			
b	PUBLIC RELATIONS	71,122			
c	PRESIDENT'S BALL EXPENS	64,703			
ď	TRADE SHOW EXPENSE	36,211			
e	BANK SERVICE CHARGES	34,002			
f	All other expenses	111,670			
25 ⁻	Total functional expenses. Add lines 1 through 24f	3,100,626			
26	Joint costs. Check here F v if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	-,,			

Part X Balance Sheet (A) (B) Beginning of year End of year 1,200 1,200 1 Cash—non-interest-bearing 2.754.580 2 2.804.289 2 Savings and temporary cash investments 3 3 160,695 4 143,387 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) **A**ssets 7 8 68,621 60,105 Prepaid expenses and deferred charges 23,693 19,563 10a Land, buildings, and equipment cost or other basis Complete 2.802.110 10a Part VI of Schedule D 10b 1.346.631 ь Less accumulated depreciation 1,526,042 **10c** 1,455,479 357.306 400.279 11 11 1,232,712 1,300,668 12 Investments—other securities See Part IV, line 11 12 13 13 Investments—program-related See Part IV, line 11 . . 14 14 21,070 15 19,305 15 16 6,145,919 16 6,204,275 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 144.633 17 90.213 17 Accounts payable and accrued expenses . 18 18 19 1,884,967 19 1.953.286 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities Complete Part X of Schedule D 26 2.029.600 26 2,043,499 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 4.077.058 4,126,411 Temporarily restricted net assets 39,261 28 28 34,365 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 4,116,319 33 4,160,776 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 6.145.919 6,204,275

Pal	Check if Schedule O contains a response to any question in this Part XI			. 🔽	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3 (049,590
2	Total expenses (must equal Part IX, column (A), line 25)	2			100,626
3	Revenue less expenses Subtract line 2 from line 1	3		•	-51,036
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,1	116,319
5	Other changes in net assets or fund balances (explain in Schedule O)	5			95,493
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		4,1	160,776
Par	TXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			৮	
1	Accounting method used to prepare the Form 990 Cash Accrual Other			Yes	No
	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		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	•	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

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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.

Employer identification number Name of the organization COLUMBUS BOARD OF REALTORS 31-4154020 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Purpose(s) of conservation easements held by the organization (chec Preservation of land for public use (e g , recreation or pleasure) Protection of natural habitat	k all	that apply) Preservation of an historically importantly land area Preservation of a certified historic structure
Preservation of open space		
Complete lines 2a-2d if the organization held a qualified conservation easement on the last day of the tax year	n con	tribution in the form of a conservation

- Total number of conservation easements Total acreage restricted by conservation easements
- Number of conservation easements on a certified historic structure included in (a)
- Number of conservation easements included in (c) acquired after 8/17/06
- Held at the End of the Year 2a 2b 2c 2d
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located -
- Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨

- A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 🕨 \$ ___
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?
- In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- 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, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Schedule D (Form 990) 2010

Assets included in Form 990, Part X For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Par	Til Organizations Maintaining Co	<u>llections of Art</u>	, His	torical Tr	<u>easu</u>	res, or C)the	er Similar As	set	S (coi	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	e following t	that ar	e a signific	ant u	use of its collec	tıon		
а	Public exhibition		d	┌ Loan	orexcl	hange prog	rams	3			
Ь	Scholarly research		e	┌ Other	-						
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ın hov	v they furthe	er the o	organizatior	n's ex	xempt purpose	ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			•					⊢ γ	es	┌ No
Pai	t IV Escrow and Custodial Arrang	•				n answere	d "Y	es" to Form 9	90,		
	Part IV, line 9, or reported an an										
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?				itions (or other ass	ets	not	┌ ¥	es	∏ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ıng table		Г		1			
_						ŀ	_	An	noun	τ	
C	Beginning balance						1c				
d	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance					L	1f				
2a	Did the organization include an amount on Fo		e 21?						⊢ Υ	es	No
	If "Yes," explain the arrangement in Part XIV			1 113 /							
Pa	rt V Endowment Funds. Complete	if the organization (a)Current Year		<u>wered "Ye</u> Prior Year		Form 990 vo Years Back		Tt IV, line 10. Three Years Back	(a)	our Ve	ars Back
1a	Beginning of year balance	39,261	(5)	20,362	+ ` ′	20,38		Timee rears back	(C)	our re	dis back
 b	Contributions	36,314		39,087		12,16	2				
c	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities	41,210		20,188		12,18	4				
	and programs										
f	Administrative expenses										
g	End of year balance	34,365		39,261		20,36	2				
2	Provide the estimated percentage of the yea	r end balance held a	as								
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
c	Term endowment ▶ 100 000 %										
3a	Are there endowment funds not in the posses organization by	ssion of the organiza	atıon t	hat are held	d and a	dministere	d for	the	Г	v	
	(i) unrelated organizations				_		_	3a(-	Yes	No No
	(ii) related organizations							3a(-		No
ь	If "Yes" to 3a(II), are the related organization				٠.٠.	· . · . · .	٠.	3		i	
4	Describe in Part XIV the intended uses of th	e organization's end	dowme	nt funds							
Pai	t VI Investments—Land, Buildings	s, and Equipme	nt. S	ee Form 9	90, Pa	art X, line	10.				
	Description of investment			(a) Cost or basis (inves		(b) Cost or o		(c) Accumulated depreciation	' '	(d) Boo	ok value
1a	Land					116	5,537				116,537
b	Buildings					1,87	5,102	735,5	13	1	1,139,589
c	Leasehold improvements					166	5,513	93,93	72		72,541
d	Equipment					643	3,958	517,14	16		126,812
e	Other										

1,455,479

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests	1,300,668	
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	1,300,668	
Part VIII Investments—Program Related. See	e Form 990, Part X, line	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
		, , , , , , , , , , , , , , , , , , , ,
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin		
(a) Descrip		(b) Book value
(-)		(2)
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	, IIIIe 25. (b) A mount	
	(B) A mount	
Federal Income Taxes		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)		

Schedule D	(Form 990) 2010				Page 4
Part XI		nange in Net Assets from For	m 990 to Financial Statemer		2.242.533
_	revenue (Form 990, Part \			1 2	3,049,590
-	expenses (Form 990, Part ss or (deficit) for the year	, , , , , , ,		3	-51,036
_	inrealized gains (losses) or			4	27,539
5 Dona	ted services and use of fac	ılıtıes		5	
	stment expenses			6	
_	period adjustments			8	67,954
-	r (Describe in Part XIV) adjustments (net) Add lin	es 4 - 8		9	95,493
	, ,	per financial statements. Combine line	es 3 and 9	10	44,457
Part XII		evenue per Audited Financial	-		
		support per audited financial statem not on Form 990, Part VIII, line 12	ents	1	2,568,179
	unrealized gains on investi		2a 27,539		
b Don	ated services and use of fa	cilities	. 2b		
	overies of prior year grants		. 2c		
	er (Describe in Part XIV) Innes 2a through 2d .		2d -349,613	2e	-322,074
	_			3	2,890,253
), Part VIII, line 12, but not on line 1	1 1		
	estment expenses not inclu er (Describe in Part XIV)	ided on Form 990, Part VIII, line 7b	. 4a 159,337		
	lines 4a and 4b			4c	159,337
		4c. (This should equal Form 990, Pa		5	3,049,590
Part XIII	Reconciliation of Example 1 expenses and losses per	cpenses per Audited Financia	al Statements With Expenses	per	
	ements	audited financial		1	2,523,722
		not on Form 990, Part IX, line 25	1 - 1		
	ated services and use of far year adjustments	cilities	2a		
	erlosses		. 2c		
d Oth	er (Describe in Part XIV)		2d -417,567		
	lines 2a through 2d			2e 3	-417,567
	tract line 2e from line 1 . Dunts included on Form 990), Part IX, line 25, but not on line 1:		3	2,941,289
			4a		
	er (Describe in Part XIV)		4b 159,337		
	lines 4a and 4b	d 4c. (This should equal Form 990, Pa		4c 5	159,337 3,100,626
Part XIV			arti, ille 10)		3,100,020
		criptions required for Part II, lines 3,			
	e 4, Part X, Part XI, line 8, Information	Part XII, lines 2d and 4b, and Part X	111, lines 2d and 4b. Also complete t	nis pa	art to provide any
	Ident if ier	Return Reference	Explanati	ion	
			INVESTMENT DIVISION AND NATREALTORS FORECLOSURE FUND FUND - THE PRIMARY PURPOSE OF HOUSING FUND IS TO PAY FOR TAFFORDABLE HOUSING OPEN HOUSING THE PROBLEM HOUSING TO PERSONAL THE SHOW, HELD EACH JANUARY EQUITMENT OF THE PRIMARY PURPOSE OF THE FUND IS TO PROVIDE MULTICULY ASSISTANCE TO NEW REALTORS \$500 TO HELP WITH START-UP COMMINISTANCE TO SEMIANNUALLY YOUNG PROFES FUNDS ARE USED TO SPONSOR FOR FORESSIONALS IN AWARDS CEREMONEY TO RECREAL ESTATE PROFESSIONALS IN ASSOCIATION OF REALTORS FOAGRANT FROM THE NATIONAL AREALTORS IN CONNECTION WIT PREVENTION AND RESPONSE PROFICES FOR THE PROVIDES EDUCATIONAL OPPO	AFFO F TH HE SI USE FUND IBUTI ROVI ING A \$500 ENER BUILL UAL C SION EVENT REAL OGN RCLO SSOC H THE OGRA	RDABLE HOUSING E AFFORDABLE UPERSUNDAY EVENT THIS EVENT PED THROUGH ONS FROM LENDERS RY PURPOSE OF THE DE SCHOLARSHIPS A REAL-ESTATE HIPS ARE THE FUND ATED BY BUS TOURS H ARE CONDUCTED DERS' PREVIEW DPPORTUNITY FUND AL OPPORTUNITY L, POST-LICENSING SE GRANTS ARE SAND ARE AWARDED ALS NETWORK- IS OF THE YOUNG TORS COMMERCIAL SUSED TO SPONSOR IZE OUTSTANDING E REGION NATIONAL SURE FUND-THIS IS CIATION OF EIR FORECLOSURE AM THIS PROGRAM
TAX POSIT	ON OF UNCERTAIN IONS UNDER FIN 48	PART X	RESOURCES AND BEST PRACTIC FORECLOSURE PREVENTION AND FIN 48 FOOTNOTE ON JANUARY ORGANIZATION ADOPTED THE ACT ON ACCOUNTING FOR UNCERTAWHICH ADDRESSES THE DETERM TAX BENEFITS CLAIMED OR EXPEATA WHICH ADDRESSES THE DETERM TAX BENEFITS CLAIMED OR EXPEATA WHICH ADDRESSES THE DETERM TAX BENEFITS CLAIMED OR EXPEATA WHICH ADDRESSES THE DETERM TAX POSITION MAY RECOGNIZ UNCERTAIN TAX POSITION ONLY THAN-NOT THAT THE TAX POSITION EXAMINATION BY TAXING AUTHE TECHNICAL MERITS OF THE BENEFITS RECOGNIZED IN THE FROM SUCH A POSITION ARE ME LARGEST BENEFIT THAT HAS A GLIKELIHOOD OF BEING REALIZED SETTLEMENT THE GUIDANCE ON UNCERTAINTY IN INCOME TAXES RECOGNITION, CLASSIFICATION PENALTIES ON INCOME TAXES, AND INTERIM PERIODS MANAGEMEN OF THE TAX POSITIONS TAKEN WIMPACT THESE FINANCIAL STATLIABILITIES HAVE BEEN RECORDED.	ES RES TO RES TO RES TO RES TO RES TO RESTORM TO RESTOR	ELATED TO PONSE 109, THE UNTING STANDARD IN INCOME TAXES, ION OF WHETHER D TO BE CLAIMED ON D IN THE FINANCIAL E, THE E BENEFIT FROM AN IT IS MORE-LIKELY- WILL BE SUSTAINED RITIES, BASED ON ITION THE TAX ICIAL STATEMENTS RED BASED ON THE TER THAN 50% DN ULTIMATE COUNTING FOR O ADDRESSES DE- TEREST AND ACCOUNTING IN LIEVES THAT NONE D MATERIALLY NTS, AND NO SUCH
PART XI, LI ADJUSTME			NET INCOME EARNED BY SUBSID	IARI	ES 67,954
PART XII, L ADJUSTME	INE 2D - OTHER NTS		NET INCOME EARNED BY SUBSID SERVICE CENTER EXPENSES NET STATEMENTS, NOT 990 -172,633 EDUCATION EXPENSES NETTED STATEMENTS, NOT 990 -88,978 EXPENSES NETTED ON FINANCIA -155,956	TED S COI ON FI IN CO	ON FÍNANCIAL NTINUING INACIAL DNTRACT MAGAZINE
PART XII, L ADJUSTME	INE 4B - OTHER NTS		RENTAL INCOME NETTED WITH E FINANCIAL STATEMENTS, NOT 9 EXPENSES NETTED WITH RENTAL 104,142	90 26	3,479 RENTAL
PART XIII, ADJUSTME	LINE 2D - OTHER NTS		MEMBER SERVICE CENTER EXPERIMENTS, NOT 9 CONTINUING EDUCATION EXPERIMENTS, NOT 99 MAGAZINE EXPENSES NETTED O	90 -1 NSES 0 -88	72,633 NETTED ON ,978 IN CONTRACT

STATEMENTS, NOT 990 -155,956

PART XIII, LINE 4B - OTHER

ADJUSTMENTS

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Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

► Attach to Form 990

OMB No 1545-0047

2010

DLN: 93493136025681

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
COLUMBUS BOARD OF REALTORS

Employer identification number

						31-4154020	
		and Assistance					
Does the organization ma the selection criteria used							▽ Yes □ N
2 Describe in Part IV the or							
Form 990, Part I	V, line 21 for any	O Governments and recipient that received eded.	d more than \$5,000	. Check this box if	no one recipient rece	eived more than \$5,	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) COLUMBUS HOUSING PARTNERSHIP INC562 EAST MAIN STREET COLUMBUS,OH 43215	31-1208260	501(C)(3)	28,000				BRINGING PEOPLE HOME CELEBRATION
(2) GREATER COLUMBUS CHAMBER OF COMMERCE 150 SOUTH FRONT STREET SUITE 200 COLUMBUS,OH 43215	31-4152950	501(C)(6)	15,000				COLUMBUS REGIONAL GROWTH FUND CONTRIBUTION TO BE USED FOR THE COLUMBUS AMERICA CAMPAIGN
2 Entertated womber of	tion F01/a)/2) ===	Narnmant are restricted			I		<u> </u>
Enter total number of secEnter total number of other							
2 Enter total number of other							

	· · · ·
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	, ,	SCHEDULE I, PART I, LINE 2 THE COLUMBUS BOARD OF REALTORS "CBR" MAKES CONTRIBUTIONS TO OTHER NON-PROFIT ORGANIZATIONS WITH PURPOSES SIMILAR TO THE CBR TO FURTHER THE EXEMPT PURPOSE OF THE COLUMBUS BOARD OF REALTORS

DLN: 93493136025681

OMB No 1545-0047

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization COLUMBUS BOARD OF REALTORS

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number

31-4154020

Pai	t I Questions Regarding Compensation	on				
					Yes	Νο
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed in Form ride any relevant information regarding these items			
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	▼ Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the reimbursement orprovision of all the expenses des			1b	Yes	
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive			2	Yes	
3	Indicate which, if any, of the following the organiza organization's CEO/Executive Director Check all	that apply	y			
	Compensation committee	<u> </u>	Written employment contract			
	Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	~	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization), Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymen	nt from the organization or a related organization?	4a		Νo
b	Participate in, or receive payment from, a supplem	nental non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-	-based co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and \vert	provide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only n	must comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	A , line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		
ь	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,"			7		
8	Were any amounts reported in Form 990, Part VII subject to the initial contract exception described in Part III			8		
9	If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)?	the rebutt	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(1) 70,000 850 6,906 0 7,192 84,948 56,823 (2)								
(1) STANLEY COLLINS (1) 70,780 (1) 850 (6,906 (1) 7,192 (85,728 (5,823 (7,900)) (1) 70,780 (1) 70,780 (1) 70,000 (1) 70,0	(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation					
(1) STANLET COLLINS (II) 70,000 850 6,906 0 7,192 84,948 56,823 (2)			(i) Base compensation	ıncentive	reportable	benefits	(B)(ı)-(D)	Form 990 or
(2) (3) (4) (5) (6) (7) (8) (8) (9) (10) (11) (12) (13) (14) (15) (15) (16) (17) (18) <td></td> <td>(1) (11)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>56,823 56,823</td>		(1) (11)						56,823 56,823
(4) (5) (6) (7) (8) (8) (9) (10) (11) (12) (13) (14) (15) (15) (10) (11) (12) (13) (14) (15) (16) (17) (18) (19) (19) (19) (19) (19) (11) (11) (12) (13) (14) (15) (16) (17) (17) (18) (19) (1	(2)							
(5) (6) (7) (8) (8) (9) (10) (11) (12) (12) (13) (14) (15) (15) (10) (11) (12) (13) (14) (15) (15) (16) (17) (18) (19)<	(3)							
(6) (7) (8) (8) (9) (10) (11) (12) (13) (14) (15) (15) (10) (11) (12) (13) (14) (15) (15) (16) (17) (18) (19)	(4)							
(7) (8) (9) (10) (11) (12) (13) (14) (15) (15) (16) (17) (18) (19) (1	(5)							
(8) (9) (10) (11) (12) (13) (14) (15)	(6)							
(9) (10) (11) (12) (13) (14) (15) (15)	(7)							
(10) (11) (12) (13) (14) (15)	(8)							
(11) (12) (13) (14) (15)	(9)							
(12) (13) (14) (15)	(10)							
(13) (14) (15)	(11)							
(14)	(12)							
(15)	(13)							
	(14)							
(16)	(15)							
	(16)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

<u> </u>		<u>-</u>
Ident if ier	Return Reference	Explanation
	1A	UNDER CERTAIN CIRCUMSTANCES, THE COLUMBUS BOARD OF REALTORS REIMBURSES TRAVEL EXPENSES FOR THE SPOUSES OF THE PRESIDENT, PRESIDENT ELECT, AND THE CHIEF EXECUTIVE OFFICER NO AMOUNT IS INCLUDED IN WAGES WHERE TRAVEL REIMBURSEMENTS ARE FOR SPOUSES HAVING A BUSINESS PURPOSES IN CONNECTION WITH THE TRAVEL THE BOARD OF DIRECTORS OF THE COLUMBUS BOARD OF REALTORS APPROVED MEMBERSHIP DUES TO THE ATHLETIC CLUB OF COLUMBUS FOR THE CEO THIS MEMBERSHIP IS USED FOR BUSINESS PURPOSES, INCLUDING BOARD MEETINGS AND ENTERTAINING INDIVIDUALS WITH WHICH THE ORGANIZATION HAS A BUSINESS PURPOSE TO THE EXTENT THAT A MEMBERSHIP IS USED FOR PERSONAL PURPOSES, THE RESPECTIVE EMPLOYEE IS REQUIRED TO REIMBURSE THE ORGANIZATION FOR ANY PERSONAL USE OF THE CLUB MEMBERSHIP
	PART I, LINE 4A	
SUPPLEMENTAL INFORMATION	PART III	

Schedule J (Form 990) 2010

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Supplemental Information to Form 990 or 990-EZ

2010

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE 0

(Form 990 or 990-EZ)

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization COLUMBUS BOARD OF REALTORS

Employer identification number

31-4154020

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE COLUMBUS BOARD OF REALTORS OFFERS TWO CLASSES OF MEMBERSHIP, REALTOR MEMBERSHIP AND AFFILIATE/SUSTAINING MEMBERSHIP THERE ARE FOUR TYPES OF REALTOR MEMBERSHIPS, INCLUDING DESIGNATED REALTOR, REALTOR, REALTOR APPRAISER, AND INSTITUTE AFFILIATE THE REALTOR MEMBERSHIP IS LIMITED TO INDIVIDUALS WHO HAVE A REAL ESTATE LICENSE OR APPRAISER LICENSES THERE ARE THREE TYPES OF AFFILIATE/SUSTAINING MEMBERSHIPS, INCLUDING CORPORATE AFFILIATE, INDIVIDUAL AFFILIATE, AND SUSTAINING THE AFFILIATE/SUSTAINING MEMBERSHIP IS AVAILABLE TO INDIVIDUALS WHO DO NOT HAVE A REAL ESTATE OR APPRAISER LICENSES BUT HAVE AN INTEREST IN THE REAL ESTATE INDUSTRY

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		THE MEMBERS OF THE BOARD OF DIRECTORS ARE ELECTED BY THE GENERAL MEMBERSHIP

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		THE ONLY ACTION OR DECISION OF THE BOARD OF DIRECTORS THAT REQUIRES APPROVAL BY THE GENERAL MEMBERSHIP IS THE DECISION TO CEASE MEMBERSHIP IN THE OHIO ASSOCIATION OF REALTORS AND THE NATIONAL ASSOCIATION OF REALTORS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM PRIOR TO BEING FILED, THE FORM 990 IS REVIEWED BY THE CEO AND THE BUDGET, FINANCE & INVESTMENT COMMITTEE THE BUDGET, FINANCE & INVESTMENT COMMITTEE IS COMPRISED OF THE OFFICERS, SOME MEMBERS OF THE BOARD OF DIRECTORS, AND ADDITIONAL MEMBERS-AT-LARGE OF THE ASSOCIATION A COPY OF THE FORM 990 IS PROVIDED TO THE FULL BOARD PRIOR TO FILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH BOARD-DELEGATED POWERS SHALL ANNUALLY SIGN A STATEMENT AFFIRMING THAT SUCH PERSON HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY, READ AND UNDERSTANDS THE POLICY, AGREED TO COMPLY WITH THE POLICY, AND UNDERSTANDS THAT THE COLUMBUS BOARD OF REALTORS IS A NOT-FOR-PROFIT ORGANIZATION AND THAT IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES

Identifier Return Referen	—
FORM 990 PART VI, SECTION LINE 15A	EVALUATION COMMITTEE, APPOINTED BY THE PRESIDENT AND CONSISTING OF THE FOLLOWING PRESIDENT,

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE COLUMBUS BOARD OF REALTORS MAKES THEIR GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 27,539 NET INCOME EARNED BY SUBSIDIARIES 67,954 TOTAL TO FORM 990, PART XI, LINE 5 95,493

ldentifier	Return Reference	Explanation
OVERSIGHT PROCESS FOR AUDITED FINANCIAL STATEMENTS	FORM 990, PART XI, LINE 2C	THE BUDGET, FINANCE & INVESTMENT COMMITTEE SERVES AS THE AUDIT COMMITTEE FOR THE BOARD OF DIRECTORS THE BUDGET, FINANCE & INVESTMENT COMMITTEE RECEIVES AND REVIEWS THE AUDITED FINANCIAL STATEMENTS BEFORE THEY ARE OFFICIALLY RECEIVED FOR APPROVAL BY THE BOARD OF DIRECTORS THE PROCESS FOR OVERSEEING THE AUDIT AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED DURING THE TAX YEAR

ldentifier	Return Reference	Explanation
SHARING OF PAID EMPLOYEES	SCHEDULE R, PART V, LINE 2 (2)	THE COLUMBUS BOARD OF REALTORS, INC. AND THE MULTIPLE LISTING SERVICES OF THE COLUMBUS BOARD OF REALTORS, INC. SHARE PAID EMPLOYEES BOTH THE COLUMBUS BOARD OF REALTORS, INC. AND THE MULTIPLE LISTING SERVICES OF COLUMBUS BOARD OF REALTORS, INC. SEPARATELY PAY FOR THE FAIR MARKET VALUE OF THE SERVICES PROVIDED BY THE EMPLOYEES

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DLN: 93493136025681

2010

OMB No 1545-0047

Open to Public Inspection

31-4154020

SCHEDULE R (Form 990)

Name of the organization

COLUMBUS BOARD OF REALTORS

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Employer identification number

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) e Total income	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organizations during	anizations (Complete	ıf the organızatıon	answered "Yes" (on Form 990, Part	IV, line 34 becaus	se it had	one
or more related tax-exempt organizations duri	T	1			ı	1	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity		g) 512(b)(1 trolled nization
Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))		cont	trolled
Name, address, and EIN of related organization L) CENTRAL OHIO REALTORS POLITICAL ACTION COMMITTEE 700 AIRPORT DRIVE OLUMBUS, OH 43219	(b) Primary activity LOCAL POLITICAL ACTION COMMITTEE	Legal domicile (state	(d) Exempt Code section 527	(e) Public charity status (if section 501(c)(3)) N/A	entity	cont orgar	trolled nization
Name, address, and EIN of related organization 1) CENTRAL OHIO REALTORS POLITICAL ACTION COMMITTEE 700 AIRPORT DRIVE OLUMBUS, OH 43219	Primary activity LOCAL POLITICAL ACTION	Legal domicile (state or foreign country)		(If section 501(c)(3))	entity	cont orgar	No
Name, address, and EIN of related organization 1) CENTRAL OHIO REALTORS POLITICAL ACTION COMMITTEE 700 AIRPORT DRIVE OLUMBUS, OH 43219	Primary activity LOCAL POLITICAL ACTION	Legal domicile (state or foreign country)		(If section 501(c)(3))	entity	cont orgar	No
Name, address, and EIN of related organization 1) CENTRAL OHIO REALTORS POLITICAL ACTION COMMITTEE 700 AIRPORT DRIVE COLUMBUS, OH 43219	Primary activity LOCAL POLITICAL ACTION	Legal domicile (state or foreign country)		(If section 501(c)(3))	entity	cont orgar	No
(a) Name, address, and EIN of related organization 1) CENTRAL OHIO REALTORS POLITICAL ACTION COMMITTEE 1700 AIRPORT DRIVE 10) COLUMBUS, OH 43219 11-1721082	Primary activity LOCAL POLITICAL ACTION	Legal domicile (state or foreign country)		(If section 501(c)(3))	entity	cont orgar	No

art III	Identif	ication of Relate	d Org	anizations Taxal	ole as a Partners	ship (Complete ıf	the organization	answered "	Yes" on Form 990,	Part IV, lır	ne 34
	because	e it had one or mo	re rela	ted organizations t	reated as a partne	rship during the ta	ax year.)				
			(c)					(h)	(i)	(i)	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
- 1									1 1154 11	_	000	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) MULTIPLE LISTING SERVICE OF THE COLUMBUS BOARD OF REALTORS INC 2700 AIRPORT DRIVE COLUMBUS, OH43219 31-0809177	LISTING SERVICE	ОН	COLUMBUS BOARD OF REALTORS	С	67,954	1,391,538	100 000 %
(2) REAL ESTATE WEEKLY INC 2700 AIRPORT DRIVE COLUMBUS, OH43219 31-1427462	FREE WEEKLY NEWSPAPER	ОН	COLUMBUS BOARD OF REALTORS	С		1,576	100 000 %
						_	

(6)

Part	Transactions With Related Organizations (Complete if the organization answered "Ye	es" on Form 990, Pai	rt IV, line 34, 35, 3	5A, or 36.)					
Note. Complete line 1 if any entity is listed in Parts II, III or IV									
1 Dur	ing the tax year, did the orgranization engage in any of the following transactions with one or more related orga	anızatıons lısted ın Part	s II-IV?						
a F	a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity								
b (b Gift, grant, or capital contribution to other organization(s)								
c (Gift, grant, or capital contribution from other organization(s)				1 c		No		
d l									
e l									
f S	Sale of assets to other organization(s)				1f		No		
g F	Purchase of assets from other organization(s)				1g		No		
h E	Exchange of assets				1h		No		
i L	i Lease of facilities, equipment, or other assets to other organization(s)								
j L	j Lease of facilities, equipment, or other assets from other organization(s)								
k F									
I P	I Performance of services or membership or fundraising solicitations by other organization(s)								
m 9	Sharing of facilities, equipment, mailing lists, or other assets				1m		No		
n S	Sharing of paid employees				1n	Yes			
o F	Reimbursement paid to other organization for expenses				10		No		
p F	Reimbursement paid by other organization for expenses				1р		No		
q (O ther transfer of cash or property to other organization(s)				1q		No		
r C	ther transfer of cash or property from other organization(s)				1r		No		
	f the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	ıncludıng covered relatı	ionships and transact	ıon thresholds					
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	Method of dete	d) erminir olved	ng amo	ount		
(1) MUL	TIPLE LISTING SERVICES OF THE COLUMBUS BOARD OF REALTORS	А	124,644	FMV					
(2) MUL	TIPLE LISTING SERVICES OF THE COLUMBUS BOARD OF REALTORS	N	0						
(3)									
(4)									
(5)									

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) neral or naging artner?	
			Yes	No		Yes	No		Yes	N	
										+	
										-	
										t	
									_	+	
										t	
										+	
										$^{+}$	
										1	
										+	
										T	
										I	

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier I Return Reference I	er Return Reference Explanation
---------------------------------	---------------------------------

Schedule R (Form 990) 2010

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Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93493136025681

OMB No 1545-0172

Attachment

Department of the Treasury See separate instructions. Attach to your tax return. Sequence No 67 Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates **Identifying number** COLUMBUS BOARD OF REALTORS FORM 990 PAGE 10 31-4154020 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,000,000 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 **15** Property subject to section 168(f)(1) election **16** Other depreciation (including ACRS) 62.238 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2010 17 18 If you are electing to group any assets placed in service during the tax year into one or more . 📂 general asset accounts, check here Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method period property deduction service use only—see instructions) 19a 3-year property **b** 5-year property c 7 - year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L 27 5 yrs ММ S/L h Residential rental property 27 5 yrs мм S/L 39 yrs мм S/L i Nonresidential real property ΜМ S/L Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year ММ S/L 40 yrs Part IV **Summary** (see instructions) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 22 62,238 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V
Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

(a) Type of property (list vehicles first) Date placed in service precentage property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 26 Property used more than 50% in a qualified business use (see instructions) 27 Property used more than 50% in a qualified business use 18	g) hod/ ention 25 r," or rela mpleting th	evidence (h) Deprecia deduct	written?) ation/ tion	Yes so	(i) Elected ection 179 cost	
(a) Type of property (list vehicles first) Date placed in service precentage percentage	g) hod/ ention 25 r," or rela mpleting th	(h) Deprecia deduct 29 ated pers his section (d)	ation/ tion son for those (e	se vehicle	(i) Elected ection 179 cost	
(a) Date placed in local meetanets which service property (list vehicles first) 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use 27 Property used more than 50% in a qualified business use 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1	r," or rela	29 ated pershis section	on for those	e vehicle	Elected ection 179 cost	
26 Property used more than 50% in a qualified business use	r," or rela	ated pers	for those (e)	(f)	
27 Property used more than 50% in a qualified business use	r," or rela	ated pers	for those (e)	(f)	
27 Property used 50% or less in a qualified business use %	mpleting th	ated pers	for those (e)	(f)	
27 Property used 50% or less in a qualified business use % %	mpleting th	ated pers	for those (e)	(f)	
27 Property used 50% or less in a qualified business use	mpleting th	ated pers	for those (e)	(f)	
S/L	mpleting th	ated pers	for those (e)	(f)	
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1	mpleting th	ated pers	for those (e)	(f)	
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1	mpleting th	ated pers	for those (e)	(f)	
Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owne if you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owne if you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to complete year (do not include commuting miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year . 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32	mpleting th	ated pers	for those (e)	(f)	
Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owne if you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to co 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal(noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32	mpleting th	ated pers	for those (e)	(f)	
Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner from your provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to complete this section C to see if you meet an exception to complete the year (do not include commuting miles) 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32	mpleting th	his section (d)	for those (e)	(f)	
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to complete the year (do not include commuting miles). 31 Total commuting miles driven during the year (do not include commuting) miles driven (eq. 1)	mpleting th	his section (d)	for those (e)	(f)	
30 Total business/investment miles driven during the year (do not include commuting miles). 31 Total commuting miles driven during the year 32 Total other personal(noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32		(d)	(е)	(f)	
year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal(noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use Answer these questions to determine if you meet an exception to completing Section B for vehicles with the prohibits all personal use of vehicles, including employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, including employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more and the prohibits personal use? 39 Do you treat all use of vehicles by employees as personal use? 30 Do you provide more than five vehicles to your employees, obtain information from your employer employees.	Veh	hicle 4	Vehic	le 5		
31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32						
32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32						
33 Total miles driven during the year Add lines 30 through 32						
through 32						
during off-duty hours?						
35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use Answer these questions to determine if you meet an exception to completing Section B for vehicles 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except come employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more than 1 or prohibits by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employers.	Yes	No	Yes	No	Yes N	
owner or related person?						
Section C—Questions for Employers Who Provide Vehicles for Us Answer these questions to determine if you meet an exception to completing Section B for vehicles 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including employees?						
Answer these questions to determine if you meet an exception to completing Section B for vehicles owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except comemployees? See the instructions for vehicles used by corporate officers, directors, or 1% or more than 1% or one of the complex of t						
 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except comemployees? See the instructions for vehicles used by corporate officers, directors, or 1% or more than 1 use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employers. 					ot more t	
employees?	commut	ting by v	our			
employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more 39 Do you treat all use of vehicles by employees as personal use?			•	Ye	es No	
employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more 39 Do you treat all use of vehicles by employees as personal use?					$-\!$	
40 Do you provide more than five vehicles to your employees, obtain information from your employ						
vehicles, and retain the information received?	ees abou	ut the us	e of the			
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instru-	ctions)					
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the cover	ed vehicle	les				
Part VI Amortization						
(b) (c) (d) (a				(f)		
(a) Date Amortizable Code Aff	(e)		A mor	tızatıoı	n for	
. I amount I section I :	nortizatioi		th	ıs yeaı	r	
42 A mortization of costs that begins during your 2010 tax year (see instructions)	nortization eriod or					
	nortizatioi					
	nortization eriod or					
43 A mortization of costs that began before your 2010 tax year	nortization eriod or					

44 Total. Add amounts in column (f) See the instructions for where to report

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efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93493136025681

OMB No 1545-0172

Department of the Treasury

Form 4562

Attachment

See separate instructions. Attach to your tax return. Sequence No 67 Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates **Identifying number** COLUMBUS BOARD OF REALTORS 31-4154020 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount. See the instructions for a higher limit for certain businesses 500,000 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,000,000 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 **15** Property subject to section 168(f)(1) election **16** Other depreciation (including ACRS) 23.155 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2010 17 18 If you are electing to group any assets placed in service during the tax year into one or more . ▶ general asset accounts, check here Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method period property deduction service use only—see instructions) 19a 3-year property **b** 5-year property c 7 - year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L 27 5 yrs ММ S/L h Residential rental property 27 5 yrs мм S/L 39 yrs мм S/L i Nonresidential real property ΜМ S/L Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year ММ S/L 40 yrs Part IV **Summary** (see instructions) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 22 23,155 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V
Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

		24a, 24b, CC															
Section A—Depre	ciation a	<u>nd Other Ir</u>	<u>ıforma</u>	tion (C	<u>aution</u>	: See	<u>the i</u>	<u>instrบ</u>	ctic	ons for I	imits	for pa	sseng	er au	<u>ıtomol</u>	biles.)	
24a Do you have evider	nce to support t	the business/inv	estment u	use claimed	d? ┌ Yes	⊢ No			24b	If "Yes,"	s the e	/ idence	written?	, 厂 _Y ,	ᇙ┌╻	o	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ (d ced in investment Cost or			(e) Basis for depreciation (husiness/investment			I				(h) Depreciation/ deduction			(i) Elected section 17 cost		
25 Special depreciation allo 50% in a qualified busi	•		rty placed	ın service (during the	tax year	and u	ısed m	ore t	:han 25							
26 Property used more	e than 50%	ın a qualified l	business	use													
· · · · · · · · · · · · · · · · · · ·		%															
		%							\perp								
27 Property used 50%	 	%	IDAGG HG	•													
27 Floperty used 50%	O OI IESS III a	quanned bus	illess us	е				I	Is	/L -	Т			\neg			
		%							_	/L -							
		%							S	/L -				ᆚ			
28 Add amounts in co	olumn (h), lır	ies 25 throug	h 27 En	ter here a	and on lir	ne 21,	page	1		28							
29 Add amounts in co	olumn (ı), lın	e 26 Enterhe	ere and c	n line 7,	page 1							29					
		Sed	ction B	—Infor	mation	on U	se c	of Ve	hic	eles							
Complete this section If you provided vehicles to														ca vahi	clos		
i you provided verticles to	your employee	es, mist answer ti	ne questio		a)	T	b)	III EXCE		(c)				e)		(f)	
30 Total business/investment miles driven during the year (do not include commuting miles)			Vehi		Vehicle 2		Vehicle 3		(d) Vehicle 4		1						
31 Total commuting i	miles driven	during the ye	ar .														
32 Total other persor	nal(noncomm	nuting) miles (drıven														
33 Total miles driven during the year Add lines 30 through 32																	
34 Was the vehicle available for personal use					No	Yes	No	Y	es	No	Yes	No	Yes	No	Yes	No	
during off-duty ho	urs?									1				†		+	
35 Was the vehicle up owner or related p	sed primarily	by a more th	ian 5%														
36 Is another vehicle			e? .													1	
Section Answer these question one of the section	ns to determ	•	et an exc												not mo	re thai	
37 Do you maıntaın a	written polic	y statement	that prob	nibits all	personal	use of	vehi	cles,	ncl	udıng cor	nmutır	ng, by y	our	\ \ \ \	es	No	
employees? .							•	•				•	•				
38 Do you maintain a employees? See t																	
39 Do you treat all us	se of vehicles	by employee	es as pei	rsonal us	e? .												
40 Do you provide movehicles, and reta	ore than five	vehicles to y	our empl			rmatio	n fror	m you	rer	nployees	about	the us	e of th	e 🗀			
41 Do you meet the r				automobi	le demor	• nstratio	n us	e? (S	• ee 11	nstructio	ns)						
Note: If your answ	ver to 37, 38	, 39, 40, or 4	1 is "Ye	s," do no	t comple	te Sect	ion E	3 for t	he c	overed v	ehicle	S					
Part VI Amo	rtization														•		
(a) Description of c	(b) (a) Date Description of costs amortization			(c) A mortizable amount			C	(d) Code ection (e) A mortiz period			zation d or	A morti			(f) :ization for is year		
		begins								perce	ntage						
42 A mortization of co	sts that beg	ıns durıng yo	ur 2010	tax year	(see ins	truction	1s)					1					
											1						
43 A mortization of co	sts that beg	an before you	ır 2010 t	tax year		•	•				43						

44 Total. Add amounts in column (f) See the instructions for where to report

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