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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
OHIO STATE BAR ASSOCIATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
PO BOX 16562

City or town, state or country, and ZIP + 4
COLUMBUS, OH 432166562

D Employer identification number
31-4271520

E Telephone number
(614) 487-2050

G Gross receipts $ 22,010,329

F Name and address of principal officer
DENNY L RAMEY
1700 LAKE SHORE DRIVE
COLUMBUS,OH 43204

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) **Are all affiliates included?** ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☐ 501(c)(3) ☑ 501(c) (6) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ WWW OHIOBAR ORG

K Form of organization ☐ Corporation ☐ Trust ☑ Association ☐ Other ▶

L Year of formation 1936

M State of legal domicile OH

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
SEE SCHEDULE O

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	24
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	24
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	82
6	Total number of volunteers (estimate if necessary)	6	10,900
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	255,661
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-3,181

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	20,000	84,056
	9	Program service revenue (Part VIII, line 2g)	10,053,786	11,299,555
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,342,688	1,196,500
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	555,901	493,035
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,972,375	13,073,146
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	78,000	80,000
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	5,024,064	5,156,036
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	7,685,823	7,355,536
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	12,787,887	12,591,572
	19	Revenue less expenses Subtract line 18 from line 12	-815,512	481,574

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	26,251,328	26,694,865
	21	Total liabilities (Part X, line 26)	5,245,702	5,345,254
	22	Net assets or fund balances Subtract line 21 from line 20	21,005,626	21,349,611

Part II 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.

Sign Here

****** 2012-10-30
Signature of officer Date

DENNY L RAMEY EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer's Use Only

Preparer's signature	GRETA RZYMEK CPA	Date	Check if self-employed ▶ ☐	Preparer's taxpayer identification number (see instructions) P00181209
Firm's name (or yours if self-employed), address, and ZIP + 4	REA & ASSOCIATES INC CPA'S 5775 PERIMETER DRIVE - STE 200 DUBLIN, OH 430173224			EIN ▶ 34-1310124 Phone no ▶ (614) 889-8725

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . ☑

1 Briefly describe the organization's mission

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ including grants of $) (Revenue $)

SEE SCHEDULE O

4b (Code) (Expenses $ including grants of $) (Revenue $)

SEE SCHEDULE O

4c (Code) (Expenses $ including grants of $) (Revenue $)

SEE SCHEDULE O

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶$

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1		No
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	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	Yes	
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? *If "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	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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 temporarily restricted endowments, permanent endowments, or quasi-endowments? *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, VII, VIII, IX, or X as applicable			
a	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	Yes	
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	Yes	
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	Yes	
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	Yes	
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		No
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, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Part I*	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, Part 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, Part III and IV*	16		No
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*	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		No
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		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	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 questions 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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
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 owner? *If "Yes," complete Schedule L, Part IV*	28c	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
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		No
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	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	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*	35b	Yes	
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	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	77			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	82			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?			4a		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	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 organization solicit any contributions that were not tax deductible?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		
b	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	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			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.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	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 facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state			13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the aggregate amount of reserves on hand	13c				
14a	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		

Part VI **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.

Check if Schedule O contains a response to any question in this Part VI . . . . ☑

Section 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 1a 24			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 24			
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		No
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		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete 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 the Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

ERIC L WELLS
1700 LAKE SHORE DRIVE
COLUMBUS, OH 43204
(614) 487-2050

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

Check if Schedule O contains a response to any question in this Part VII . . . .

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, or 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 nor any related organizations compensated any current or former officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

		(D)	(E)	(F)
1b	**Sub-Total** ▶			
c	**Total from continuation sheets to Part VII, Section A** ▶			
d	**Total (add lines 1b and 1c)** ▶	1,315,321	49,625	227,445

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶9

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
CB RICHARD ELLIS 280 N HIGH STREET COLUMBUS, OH 43215	PROPERTY MANAGER	466,651

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶1

Part VIII Statement of Revenue

Contributions, gifts, grants and other similar amounts				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1a	Federated campaigns	1a					
b	Membership dues	1b					
c	Fundraising events	1c					
d	Related organizations	1d					
e	Government grants (contributions)	1e					
f	All other contributions, gifts, grants, and similar amounts not included above	1f	84,056				
g	Noncash contributions included in lines 1a-1f $						
h	**Total.** Add lines 1a-1f			84,056			

Program Service Revenue		Business Code	(A)	(B)	(C)	(D)
2a	MEMBERSHIP DUES	900099	6,148,082	6,148,082		
b	CONTINUING LEGAL EDUCA	611600	4,371,226	4,371,226		
c	CONVENTION AND RELATED	900099	544,052	544,052		
d	SECTION DUES	900099	140,257	140,257		
e	PUBLICATIONS	511119	88,606	88,606		
f	All other program service revenue		7,332	7,332		
g	**Total.** Add lines 2a–2f		11,299,555			

Other Revenue		(i)	(ii)	(A)	(B)	(C)	(D)
3	Investment income (including dividends, interest and other similar amounts)			1,139,092			1,139,092
4	Income from investment of tax-exempt bond proceeds						
5	Royalties			191,860			191,860
		(i) Real	(ii) Personal				
6a	Gross rents	18,125					
b	Less rental expenses	21,306					
c	Rental income or (loss)	-3,181					
d	Net rental income or (loss)			-3,181		-3,181	
		(i) Securities	(ii) Other				
7a	Gross amount from sales of assets other than inventory	8,973,285					
b	Less cost or other basis and sales expenses	8,911,635	4,242				
c	Gain or (loss)	61,650	-4,242				
d	Net gain or (loss)			57,408			57,408
8a	Gross income from fundraising events (not including $ of contributions reported on line 1c) See Part IV, line 18 . . . a						
b	Less direct expenses . . . b						
c	Net income or (loss) from fundraising events						
9a	Gross income from gaming activities See Part IV, line 19 . . . a						
b	Less direct expenses . . . b						
c	Net income or (loss) from gaming activities						
10a	Gross sales of inventory, less returns and allowances . a						
b	Less cost of goods sold . . b						
c	Net income or (loss) from sales of inventory						
	Miscellaneous Revenue	Business Code					
11a	ADVERTISING	541800		258,842		258,842	
b	MAILING LISTS	511140		45,514			45,514
c							
d	All other revenue						
e	**Total.** Add lines 11a–11d			304,356			
12	**Total revenue.** See Instructions			13,073,146	11,299,555	255,661	1,433,874

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)
Check if Schedule O contains a response to any question in this Part IX . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	**(A)** Total expenses	**(B)** Program service expenses	**(C)** Management and general expenses	**(D)** Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	80,000			
2 Grants and other assistance to individuals in the United States See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	852,439			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,132,251			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	318,494			
9 Other employee benefits	567,076			
10 Payroll taxes	285,776			
11 Fees for services (non-employees)				
a Management				
b Legal	64,356			
c Accounting	46,162			
d Lobbying				
e Professional fundraising *See Part IV, line 17* . .				
f Investment management fees	18,756			
g Other	1,771			
12 Advertising and promotion	441,093			
13 Office expenses	886,952			
14 Information technology				
15 Royalties . .				
16 Occupancy	569,518			
17 Travel	407,210			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,680,019			
20 Interest	3,051			
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	601,307			
23 Insurance	51,256			
24 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)				
a PUBLICATIONS	1,831,071			
b SECTION PROGRAM EXPENSE	256,732			
c BANK CHARGES	172,123			
d MEMBERSHIP AND PUBLIC R	83,811			
e				
f All other expenses	240,348			
25 **Total functional expenses.** Add lines 1 through 24f	12,591,572			
26 **Joint costs.** Check here ▶ ☐ 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) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			300	1	300
	2	Savings and temporary cash investments			6,874,174	2	5,241,439
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			94,060	4	110,919
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			60,399	9	56,987
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a	9,166,339			
	b	Less accumulated depreciation	10b	5,147,078	4,105,680	10c	4,019,261
	11	Investments—publicly traded securities			7,231,576	11	9,807,435
	12	Investments—other securities See Part IV, line 11			6,716,687	12	6,530,133
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			1,168,452	15	928,391
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			26,251,328	16	26,694,865
Liabilities	17	Accounts payable and accrued expenses			543,952	17	421,451
	18	Grants payable				18	
	19	Deferred revenue			3,814,615	19	3,955,557
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*				22	
	23	Secured mortgages and notes payable to unrelated third parties			82,561	23	47,004
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			804,574	25	921,242
	26	**Total liabilities.** Add lines 17 through 25			5,245,702	26	5,345,254
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			20,357,174	27	20,817,634
	28	Temporarily restricted net assets			648,452	28	531,977
	29	Permanently restricted net assets				29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			21,005,626	33	21,349,611
	34	Total liabilities and net assets/fund balances			26,251,328	34	26,694,865

Part XI Reconcilliation of Net Assets

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	13,073,146
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,591,572
3	Revenue less expenses Subtract line 2 from line 1	3	481,574
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	21,005,626
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-137,589
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	21,349,611

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . ☑

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
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 the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☑ 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 required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b		

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

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If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization
OHIO STATE BAR ASSOCIATION

Employer identification number
31-4271520

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV

2 Political expenditures ▶ $

3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ $

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) OHIO LAWPAC	1700 LAKE SHORE DRIVE COLUMBUS, OH 43204	31-6321625		50,887

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing Organization's Totals	**(b)** Affiliated Group Totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount Enter the amount from the following table in both columns		

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a If zero or less, enter -0-		
i Subtract line 1f from line 1c If zero or less, enter -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2008	**(b)** 2009	**(c)** 2010	**(d)** 2011	**(e)** Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		No
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		No
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		No

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".**

1	Dues, assessments and similar amounts from members	1	6,143,082
2	Section 162(e) non-deductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	283,531
b	Carryover from last year	2b	-95,227
c	Total	2c	188,304
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	307,154
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	-118,850

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier	Return Reference	Explanation

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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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
OHIO STATE BAR ASSOCIATION

Employer identification number
31-4271520

Part I **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
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 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 ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶______________

4 Number of states where property subject to conservation easement is located ▶______________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶______________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ______________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 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.

1a 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

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, 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 ▶ $ ______________

2 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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ______________

b Assets included in Form 990, Part X ▶ $ ______________

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ **Yes** ☐ **No**

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	648,452	709,924	680,251	639,632	
b Contributions	140,257	143,870	135,727	152,802	
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs	256,732	205,342	106,054	112,183	
f Administrative expenses					
g End of year balance	531,977	648,452	709,924	680,251	

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ 0 %

b Permanent endowment ▶ 0 %

c Term endowment ▶ 100 000 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		880,927		880,927
b Buildings		4,548,745	2,325,778	2,222,967
c Leasehold improvements				
d Equipment		3,535,128	2,665,181	869,947
e Other		201,539	156,119	45,420
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				4,019,261

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	**(b)**Book value	**(c)** Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests	5,810,797	F
(3)Other (A) DEFERRED COMPENSATION AGREEMENTS	719,336	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	6,530,133	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	**(b)** Book value	**(c)** Method of valuation 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, line 15.

(a) Description	**(b)** Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 **(a)** Description of Liability	**(b)** Amount
Federal Income Taxes	
OBLIGATIONS-DEFERRED COMP	719,336
OTHER CURRENT LIABILITIES	14,513
DUE TO AFFILIATED ORGANIZATIONS	94,701
ACCRUED REAL ESTATE & SALES TAXES	92,692
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	921,242

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	13,073,146
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,591,572
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	481,574
4	Net unrealized gains (losses) on investments	4	-82,964
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-54,625
9	Total adjustments (net) Add lines 4 - 8	9	-137,589
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	343,985

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	13,213,595
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-82,964		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	223,413		
e	Add lines **2a** through **2d**			2e	140,449
3	Subtract line **2e** from line **1**			3	13,073,146
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	13,073,146

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	12,869,610
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	278,038		
e	Add lines **2a** through **2d**			2e	278,038
3	Subtract line **2e** from line **1**			3	12,591,572
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	12,591,572

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	CERTAIN NET ASSETS ARE RESTRICTED FOR SECTION ACTIVITIES
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE, ACCORDINGLY, NO PROVISION FOR FEDERAL INCOME TAX HAS BEEN MADE IN THE FINANCIAL STATEMENTS THE ASSOCIATION FILES FORM 990-T EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN TO REPORT UNRELATED BUSINESS INCOME FOR THE YEARS ENDED DECEMBER 31, 2011 AND 2010, THE ASSOCIATION OWED NO UNRELATED BUSINESS INCOME TAX GENERALLY ACCEPTED ACCOUNTING PRINCIPLES REQUIRE THE ASSOCIATION TO EVALUATE THE LEVEL OF UNCERTAINTY RELATED TO WHETHER TAX POSITIONS TAKEN WILL BE SUSTAINED UPON EXAMINATION ANY POSITIONS TAKEN THAT DO NOT MEET THE MORE-LIKELY-THAN-NOT THRESHOLD MUST BE QUANTIFIED AND RECORDED AS A LIABILITY FOR UNRECOGNIZED TAX BENEFITS IN THE ACCOMPANYING STATEMENTS OF FINANCIAL POSITION ALONG WITH INTEREST AND PENALTIES THAT WOULD BE PAYABLE TO THE TAXING AUTHORITIES UPON EXAMINATION INTEREST AND PENALTIES ASSOCIATED WITH UNRECOGNIZED TAX BENEFITS ARE CLASSIFIED AS ADDITIONAL INCOME TAXES IN THE STATEMENT OF INCOME THE ASSOCIATION BELIEVES THAT NONE OF THE TAX POSITIONS TAKEN WOULD MATERIALLY IMPACT THE FINANCIAL STATEMENTS, AND NO SUCH LIABILITIES HAVE BEEN RECORDED IN GENERAL, THE ASSOCIATION IS NO LONGER SUBJECT TO U S FEDERAL, STATE AND LOCAL INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR THE YEARS BEFORE 2008
PART XI, LINE 8 - OTHER ADJUSTMENTS		EQUITY IN INCOME OF AFFILIATES -54,625
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES NETTED WITH RENTAL 21,306 SATISFACTION OF SECTION PROGRAM ACTIVITIES 256,732 EQUITY IN NET INCOME OF AFFILIATES -54,625
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES NETTED WITH RENTAL 21,306 SATISFACTION OF SECTION PROGRAM ACTIVITIES 256,732

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

2011

Open to Public Inspection

Name of the organization
OHIO STATE BAR ASSOCIATION

Employer identification number
31-4271520

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount 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) OHIO LAWYERS ASSISTANCE PROGRAM 1650 LAKE SHORE DRIVE STE 375 COLUMBUS,OH 43204	34-1675796	501(C)(3)	25,000				SUPPORT OSBA'S MISSION
(2) OHIO STATE LEGAL SERVICES ASSOCIATION 555 BUTTLES AVE COLUMBUS,OH 43215	31-0718185	501(C)(3)	5,000				SUPPORT OSBA'S MISSION
(3) OHIO CENTER FOR LAW RELATED EDUCATION 1700 LAKE SHORE DRIVE COLUMBUS,OH 43204	31-1124428	501(C)(3)	45,000				SUPPORT OSBA'S MISSION
(4) THOMAS J MOYER OHIO JUDICIAL CENTER FOUNDATION65 S FRONT STREET FLOOR 7 COLUMBUS,OH 43215	27-1337706	501(C)(3)	5,000				SUPPORT OSBA'S MISSION

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 4

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 0

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) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 OSBA PROVIDES UNRESTRICTED GRANTS TO PRE-SELECTED IRC SEC 501(C)(3) PUBLIC CHARITIES WHOSE MISSION IS CONSISTENT WITH OSBA'S MISSION AS SUCH, IT DOES NOT MONITOR THE USE OF THESE FUNDS

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
OHIO STATE BAR ASSOCIATION

Employer identification number
31-4271520

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☑ Travel for companions ☐ Payments for business use of personal residence ☑ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☐ Compensation committee ☑ 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, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space 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)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DENNY L RAMEY	(i)	304,968	0	2,930	24,500	11,139	343,537	0
	(ii)	33,336	0	0	0	0	33,336	0
(2) WILLIAM K WEISENBERG	(i)	229,236	0	6,673	22,924	16,647	275,480	0
	(ii)	0	0	0	0	0	0	0
(3) RICHARD C BANNISTER	(i)	128,535	0	18,060	12,507	21,913	181,015	0
	(ii)	14,282	0	2,007	1,390	2,435	20,114	0
(4) FREDERICK W ENGEL	(i)	115,959	0	0	11,873	28,023	155,855	0
	(ii)	0	0	0	0	0	0	0

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	TRAVEL FOR COMPANIONS ALL MEMBERS OF THE BOARD OF GOVERNORS ARE PERMITTED TO BRING THEIR SPOUSE OR GUEST WITH THEM TO THE REQUIRED BOARD MEETINGS AND CONFERENCES THE ORGANIZATION REIMBURSES BOARD MEMBERS FOR TRAVEL FOR COMPANIONS AND REPORTS THESE AMOUNTS ON FORM 1099 HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES THE OHIO STATE BAR ASSOCIATION PAYS HEALTH OR SOCIAL CLUB DUES FOR MESSRS RAMEY, BANNISTER, WEISENBERG AND STOVER IN CONNECTION WITH THEIR DUTIES FOR THE OHIO STATE BAR ASSOCIATION DUES FOR THESE INDIVIDUALS WERE APPROVED BY THE ORGANIZATION'S BOARD THE DUES WERE PAID UNDER AN ACCOUNTABLE PLAN ARRANGEMENT AS SUCH, NO AMOUNT WAS INCLUDED AS COMPENSATION THE PRESIDENT AND PRESIDENT ELECT RECEIVE REIMBURSEMENT FOR COMPANION TRAVEL EXPENSES THAT ARE GROSSED UP TO INCLUDE THE TAX EFFECT OF THE PAYMENT THE ENTIRE AMOUNT, INCLUDING THE GROSS UP, IS REPORTED ON FORM 1099 FOR THESE INDIVIDUALS
	PART I, LINE 4B	DENNY RAMEY
SUPPLEMENTAL INFORMATION	PART III	EXECUTIVE DIRECTOR DENNY RAMEY ALSO HAD A 457(F) NONQUALIFIED PLAN IN HIS NAME DURING 2010, THE BOARD OF GOVERNORS AUTHORIZED A $15,998 CONTRIBUTION TO THE PLAN THE FAIR MARKET VALUE OF THE PLAN INCREASED BY $3,271 AND THE NET INCREASE IN VALUE OF THE 457(F) NONQUALIFIED PLAN DURING THE YEAR WAS $19,269 IN 2010

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶See separate instructions.

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization
OHIO STATE BAR ASSOCIATION

Employer identification number
31-4271520

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total . . . . ▶ $										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV **Business Transactions Involving Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
(1) OSBACOM	DENNY RAMEY, AN OFFICER OF OSBA, IS A MANAGER OF AN LLC, OSBA COM	21,199	OSBA COM RECEIVES FEES FROM SSN HOLDINGS LLC WHICH ARE THEN DISTRIBUTED TO MEMBERS OF THE LLC BASED UPON THEIR PROFIT AND LOSS PERCENTAGE THE AMOUNT OF THE TRANSACTION REPRESENTS THE DISTRIBUTIONS THAT DENNY RAMEY RECEIVES IN CONNECTION WITH HIS OWNERSHIP IN OSBA COM		No
(2) OSBACOM	DENNY RAMEY, AN OFFICER OF OSBA, IS A MANAGER OF AN LLC, OSBA COM	33,336	CONSULTING SERVICES ARRANGEMENT UNDER WHICH DENNY RAMEY PROVIDED CONSULTING SERVICES TO OSBA COM OSBA COM PAYS OSBA FOR THESE SERVICE WHICH IN TURN IS PAID TO DENNY RAMEY, PROVIDER OF THE SERVICES THIS AMOUNT IS INCLUDED IN THE COMPENSATION AMOUNT REPORTED ON THE W-2 THAT DENNY RAMEY RECEIVES FROM OSBA		No

Part V **Supplemental Information**

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

Identifier	Return Reference	Explanation

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to 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.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
OHIO STATE BAR ASSOCIATION

Employer identification number
31-4271520

Identifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	FORM 990, PART I, LINE 1	THE ASSOCIATION IS FORMED TO ADVANCE THE PHILOSOPHY OF JURISPRUDENCE, TO PROMOTE IMPROVEMENT OF THE LAW, OUR LEGAL SYSTEM AND THE ADMINISTRATION OF JUSTICE, TO UPHOLD AND TO EMPHASIZE WITHIN THE LEGAL PROFESSION THE IMPORTANCE OF INTEGRITY, HONOR, RESPECT AND CIVILITY TOWARDS THE COURTS, FELLOW ATTORNEYS, AND ALL WHO ARE TOUCHED BY THE LEGAL PROCESS AND TO ENCOURAGE AND ENFORCE AMONG ATTORNEYS AND JUDICIAL OFFICERS ADHERENCE TO THE HIGHEST STANDARDS OF PROFESSIONAL CONDUCT, TO TAKE POSITIONS ON MATTERS OF PUBLIC INTEREST AS DEEMED ADVISABLE, TO ENCOURAGE AND SUPPORT ALL FORMS OF EDUCATION RELATED TO THE LAW, TO CULTIVATE POSITIVE, COURTEOUS AND CORDIAL RELATIONS AMONG MEMBERS OF THE BAR, AND TO PERPETUATE THE HISTORY OF THE PROFESSION IN OHIO AND OF THE ASSOCIATION

Identifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	FORM 990, PART III, LINE 1, BRIEF DESCRIPTION OF THE ORGANIZATION'S MISSION	THE OHIO STATE BAR ASSOCIATION (THE "ASSOCIATION") IS AN UNINCORPORATED VOLUNTARY NON-PROFIT ORGANIZATION THE ASSOCIATION WAS FORMED TO ADVANCE THE PHILOSOPHY OF JURISPRUDENCE, TO PROMOTE IMPROVEMENT OF THE LAW, OUR LEGAL SYSTEM AND ADMINISTRATION OF JUSTICE, TO UPHOLD AND TO EMPHASIZE WITHIN THE LEGAL PROFESSION THE IMPORTANCE OF INTEGRITY, HONOR, RESPECT AND CIVILITY TOWARD THE COURTS, FELLOW ATTORNEYS, AND ALL WHO ARE TOUCHED BY THE LEGAL PROCESS AND TO ENCOURAGE AND ENFORCE AMONG ATTORNEYS AND JUDICIAL OFFICERS ADHERENCE TO THE HIGHEST STANDARDS OF PROFESSIONAL CONDUCT, TO TAKE POSITIONS ON MATTERS OF PUBLIC INTEREST AS DEEMED ADVISABLE, TO ENCOURAGE AND SUPPORT ALL FORMS OF EDUCATION RELATED TO LAW, TO CULTIVATE POSITIVE, COURTEOUS AND CORDIAL RELATIONS AMONG MEMBERS OF THE BAR, AND TO PERPETUATE THE HISTORY OF THE PROFESSION IN OHIO AND OF THE ASSOCIATION

Identifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS	CONTINUING LEGAL EDUCATION THE OHIO STATE BAR ASSOCIATION (OSBA) PROVIDES LIVE SEMINARS, SELF-STUDY CLE, AND PUBLICATIONS TO OSBA MEMBERS, OHIO LAWYERS AND RELATED PROFESSIONALS OSBA, THROUGH ITS CONTINUING LEGAL EDUCATION PROGRAM ALSO PRODUCES OVER 150 TITLES (INDIVIDUAL PROGRAMS) ANNUALLY AND ADMINISTERS OVER 300 PRESENTATIONS AROUND THE STATE VIDEO PROGRAMS ARE ALSO OFFERED TO OVER 35 LOCAL BAR ASSOCIATIONS FOR REPLAYS UTILIZING THEIR MEMBERS AS COMMENTATORS NEARLY 100 LIVE PRESENTATIONS ARE ALSO VIDEOTAPED FOR FURTHER REPURPOSING THROUGH SELF-STUDY CLE AND PODCAST DOWNLOADS THE CONTINUING LEGAL EDUCATION PROGRAM PROVIDES EDUCATIONAL OPPORTUNITIES FOR MEMBERS AT THE ANNUAL OSBA ANNUAL CONVENTION, AS WELL AS THROUGH A VARIETY OF OTHER EVENTS, INCLUDING THE MIDWEST LABOR AND EMPLOYMENT LAW CONFERENCE, THE ADVANCED PROBATE LAW SEMINAR, THE CORPORATE COUNSEL INSTITUTE, AND THE ANTITRUST LAW INSTITUTE

Identifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS	PUBLICATIONS THE OHIO STATE BAR ASSOCIATION PUBLISHES A VARIETY OF DIFFERENT REPORTS, MAGAZINES, NEWSLETTERS, AND OTHER INFORMATIONAL RESOURCES OSBA PUBLISHES THE OHIO STATE BAR ASSOCIATION REPORT AS A WEEKLY RESOURCE THIS REPORT PROVIDES A SIGNIFICANT AMOUNT OF INFORMATION, INCLUDING OHIO ATTORNEY GENERAL OPINIONS AND REQUESTS FOR OPINIONS, CASES RELEASED FROM THE OHIO SUPREME COURT THE PRIOR WEDNESDAY, SELECTED CASES FROM THE OHIO APPELLATE COURTS AND LOWER COURTS OSBA ALSO PUBLISHES THE OHIO LAWYER THIS BIMONTHLY MAGAZINE FEATURES ARTICLES ON LEGAL ISSUES AND TRENDS TO HELP LAWYERS STAY CURRENT AND SHARE IN-DEPTH INFORMATION ON THE LATEST LEGAL DEVELOPMENTS WITH THEIR COLLEAGUES AROUND THE STATE ADDITIONAL PUBLICATIONS BY THE OSBA INCLUDE A VARIETY OF DIFFERENT PAPER AND ELECTRONIC NEWSLETTERS SOME OF THE NEWSLETTERS PUBLISHED BY THE OSBA INCLUDE THE PARALEGAL/LEGAL ASSISTANT NEWS, SECTION NEWSLETTERS AND SPECIAL PUBLICATIONS

Identifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS	MEMBERSHIP SERVICES THE OHIO STATE BAR ASSOCIATION PROVIDES A VARIETY OF PROGRAMS DESIGNED TO IMPROVE AND ENHANCE THE LEGAL PROFESSION AND THE LEGAL SERVICES AVAILABLE TO THE PUBLIC THE MEMBERSHIP SERVICES DEPARTMENT IS RESPONSIBLE FOR RECRUITING AND RETAINING OSBA MEMBERS, AS WELL AS OVERSEEING AND MANAGING THE OSBA ANNUAL CONVENTION, DISTRICT MEETINGS, AND LAW SCHOOL ORIENTATIONS AND VISITS THE MEMBERSHIP SERVICES DEPARTMENT IS ALSO RESPONSIBLE FOR THE CALL CENTER WHERE CALLS FROM CONSUMERS OF LEGAL SERVICES, LAWYERS, AND MEMBERS OF THE OSBA ARE DIRECTED FOR INFORMATION, REFERRAL, AND/OR SERVICE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	ANY PERSON DULY ADMITTED TO THE PRACTICE OF LAW, AND NOT PROHIBITED FROM BEING ADMITTED TO THE PRACTICE OF LAW IN OHIO, MAY BECOME A REGULAR MEMBER OF THE ASSOCIATION MEMBERS MUST FIRST APPLY FOR MEMBERSHIP TO THE ASSOCIATION THROUGH A WRITTEN APPLICATION PROCESS REGULAR MEMBERS HAVE LIMITED RIGHTS TO VOTE ON CERTAIN ISSUES REGARDING THE GOVERNANCE OF THE ORGANIZATION

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	THE PRESIDENT-ELECT IS ELECTED BY THE REGULAR MEMBERS OF THE ASSOCIATION IN ATTENDANCE AT THE REGULAR MEETING OF THE ASSOCIATION NEXT PRECEDING THE COMMENCEMENT OF THE TERM OF OFFICE.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7B	THE COUNCIL OF DELEGATES CONSIDERS AND ACTS UPON ALL RESOLUTIONS BEFORE IT RELATIVE TO THE PROMOTION OF THE PURPOSES OF THE ASSOCIATION SUBMITTED TO THE COUNCIL BY ANY OF ITS MEMBERS, BY AN ASSOCIATION MEMBER, OR BY ANY LOCAL BAR ASSOCIATION OF THE STATE.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 8B	NO COMMITTEE HAS THE AUTHORITY OR POWER TO ACT ON BEHALF OF THE BOARD OF GOVERNORS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM OSBA GENERAL COUNSEL, DIRECTOR OF BUSINESS AFFAIRS, AND EXECUTIVE DIRECTOR REVIEW THE FORM 990 AND SUBMIT IT TO THE AUDIT COMMITTEE FOR CONSIDERATION THE FORM 990 IS THEN SUBMITTED TO THE FULL BOARD OF GOVERNORS PRIOR TO FILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE OHIO STATE BAR ASSOCIATION HAS TWO SEPARATE CONFLICT OF INTEREST POLICIES UNDER THE BOARD OF GOVERNORS' CONFLICT OF INTEREST POLICY, BOARD MEMBERS WILL ANNUALLY RECEIVE A COPY OF THE CONFLICT OF INTEREST POLICY AND ARE REQUIRED TO SUBMIT CONFLICT OF INTEREST DISCLOSURES ANNUALLY THE DISCLOSURES ARE THEN REVIEWED BY THE COORDINATING COMMITTEE ANY CONFLICTS OF INTEREST ARE REVIEWED BY THE ENTIRE BOARD OF GOVERNORS UNDER THE EMPLOYEES' CONFLICT OF INTEREST POLICY, ALL EMPLOYEES COVERED BY THE POLICY WILL, ON AN ANNUAL BASIS, DISCLOSE OR UPDATE TO THE PRESIDENT ON A FORM PROVIDED BY THE OSBA THEIR INTEREST THAT COULD GIVE RISE TO CONFLICTS OF INTEREST, SUCH AS A LIST OF FAMILY MEMBERS, SUBSTANTIAL BUSINESS INVESTMENT HOLDINGS, AND OTHER TRANSACTIONS OR AFFILIATIONS WITH BUSINESSES AND OTHER ORGANIZATIONS OR THOSE OF FAMILY MEMBERS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE POLICY FOR DETERMINING COMPENSATION OF THE ORGANIZATION'S EXECUTIVE DIRECTOR/CEO IS AS FOLLOWS THE PRIMARY EVALUATORS OF THE EXECUTIVE DIRECTOR'S PERFORMANCE SHALL BE THE PRESIDENT, PRESIDENT-ELECT AND IMMEDIATE PAST PRESIDENT THEY MAY GATHER INFORMATION FROM MEMBERS OF THE BOARD OF GOVERNORS IN JUNE, SOME COMBINATION OF THE PRESIDENT, PRESIDENT-ELECT AND IMMEDIATE PAST PRESIDENT SHALL CONDUCT A PERFORMANCE REVIEW WITH THE EXECUTIVE DIRECTOR IN SEPTEMBER, THE PRESIDENT SHALL RECOMMEND TO THE BOARD OF GOVERNORS' BUDGET AND HEADQUARTERS COMMITTEE THE SALARY AND OTHER COMPENSATION ITEMS FOR THE EXECUTIVE DIRECTOR FOR THE FOLLOWING CALENDAR YEAR THE BUDGET AND HEADQUARTERS COMMITTEE SHALL CONSIDER AND RECOMMEND A COMPENSATION PACKAGE TO THE FULL BOARD ONCE THE BOARD DECIDES ON THE EXECUTIVE DIRECTOR'S COMPENSATION FOR THE YEAR, THE PRESIDENT SHALL SET FORTH THE DETAILS IN A LETTER TO THE EXECUTIVE DIRECTOR AT HIS HOME ADDRESS IN DETERMINING THE COMPENSATION OF THE EXECUTIVE DIRECTOR, THE PRESIDENT AND BOARD SHALL AT LEAST ONCE EVERY THREE YEARS ENGAGE AN OUTSIDE ORGANIZATION TO CONDUCT AN EXECUTIVE COMPENSATION REVIEW FOR THE EXECUTIVE DIRECTOR SUCH REVIEW SHOULD COMPARE THE SALARY AND TOTAL COMPENSATION OF THE OSBA EXECUTIVE DIRECTOR WITH COMPETITIVE MARKET DATA OF NON-PROFIT MEMBERSHIP ORGANIZATIONS WITH OPERATING BUDGETS OF A SIZE SIMILAR TO OSBA'S THE PROCESS FOR DETERMINING THE COMPENSATION OF EMPLOYEES OTHER THAN THE EXECUTIVE DIRECTOR IS AS FOLLOWS EACH SUMMER, ALL SUPERVISING EMPLOYEES SHALL HOLD AN ANNUAL PERFORMANCE REVIEW WITH EACH EMPLOYEE WHO REPORTS TO THEM FOLLOWING THE PERFORMANCE REVIEW, THE SUPERVISORS MAKE SALARY ADJUSTMENT RECOMMENDATIONS TO THEIR SUPERVISORS FOR EACH OF HIS OR HER DIRECT REPORTS THE RECOMMENDATION SHALL BE BASED ON 1) THE PERFORMANCE OF THE EMPLOYEE, 2) THE INCREASE OR DECREASE IN THE CONSUMER PRICE INDEX AS REPORTED VIA THE US GOVERNMENT WEBSITE, 3) CURRENT ECONOMIC CONDITIONS IN COLUMBUS, AND, IN THE CASE OF EXECUTIVE STAFF, THE USA, 4) TO THE EXTENT THEY ARE AVAILABLE AND APPLICABLE, COMPARABLE SALARIES AND OTHER FORMS OF COMPENSATION, 5) OTHER FACTORS AS MAY BE APPROPRIATE THE EXECUTIVE DIRECTOR AND THE ASSISTANT EXECUTIVE DIRECTOR REVIEW ALL OF THE SALARIES (EXCEPT THOSE OF THE ASSISTANT EXECUTIVE DIRECTORS) AND DETERMINE WHETHER MODIFICATIONS ARE WARRANTED AT THE SEPTEMBER MEETING OF THE OSBA BOARD OF GOVERNORS, THE EXECUTIVE DIRECTOR SUBMITS A BUDGET REQUEST FOR THE TOTAL DOLLARS NEEDED FOR COMPENSATION FOR THE FOLLOWING CALENDAR YEAR

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS, AND TAX RETURNS AVAILABLE TO THE PUBLIC

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -82,964 EQUITY IN INCOME OF AFFILIATES -54,625 TOTAL TO FORM 990, PART XI, LINE 5 -137,589

Identifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C, AUDIT OVERSIGHT AND SELECTION OF ACCOUNTANT	THE ORGANIZATION HAS A COMMITTEE THAT OVERSEES THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTS AN INDEPENDENT ACCOUNTANT THE PROCESS BY WHICH THE ORGANIZATION OVEREES THE AUDIT AN SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED SINCE THE PREVIOUS YEAR

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
OHIO STATE BAR ASSOCIATION

Employer identification number
31-4271520

Part I **Identification of Disregarded Entities** (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(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) Section 512(b)(13) controlled organization Yes	No
(1) OHIO LAWPAC 1700 LAKE SHORE DRIVE COLUMBUS, OH 43204 31-6321625	POLITICAL ACTION COMMITTEE	OH	527	N/A	OHIO STATE BAR ASSOCIATION	Yes	

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership 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) 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? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1) OSBACOM LLC 1700 LAKE SHORE DRIVE COLUMBUS, OH 43204 31-1751030	HOLDING COMPANY	OH	OHIO STATE BAR ASSOCIATION	EXCLUDED FROM TAX	310,853	626,402		No		Yes		95 000 %

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) OSBANET 1700 LAKE SHORE DRIVE COLUMBUS, OH 43216 31-1371453	HOLDING COMPANY	OH	OHIO STATE BAR ASSOCIATION	C	-275,508	2,776,479	100 000 %
(2) OHIO BAR LIABILTY INSURANCE COMPANY 1650 LAKE SHORE DRIVE COLUMBUS, OH 43216 31-0947214	INSURANCE	OH	OHIO STATE BAR ASSOCIATION	C	272,777	33,895,370	100 000 %
(3) OSBA INSURANCE AGENCY 1700 LAKE SHORE DRIVE COLUMBUS, OH 43216 31-1382704	INSURANCE	OH	OSBANET	C	132,530	360,513	100 000 %
(4) LAW ABSTRACT PUBLISHING COMPANY DBA OHIO PRINTING 1700 LAKE SHORE DRIVE COLUMBUS, OH 43216 34-0895283	PRINTING/PUBLISHING	OH	OSBANET	C	-300,242	412,651	100 000 %
(5) 1650 LAKE SHORE INC 1650 LAKE SHORE DRIVE COLUMBUS, OH 43216 31-1394604	REAL ESTATE	OH	OHIO BAR LIABILITY INSURANCE COMPANY	C	-100,486	2,847,739	100 000 %

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

			Yes	No
	Note. Complete line 1 if any entity is listed in Parts II, III or IV			
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	**1a**	Yes	
b	Gift, grant, or capital contribution to related organization(s)	**1b**		No
c	Gift, grant, or capital contribution from related organization(s)	**1c**	Yes	
d	Loans or loan guarantees to or for related organization(s)	**1d**	Yes	
e	Loans or loan guarantees by related organization(s)	**1e**	Yes	
f	Sale of assets to related organization(s)	**1f**		No
g	Purchase of assets from related organization(s)	**1g**		No
h	Exchange of assets with related organization(s)	**1h**		No
i	Lease of facilities, equipment, or other assets to related organization(s)	**1i**		No
j	Lease of facilities, equipment, or other assets from related organization(s)	**1j**		No
k	Performance of services or membership or fundraising solicitations for related organization(s)	**1k**	Yes	
l	Performance of services or membership or fundraising solicitations by related organization(s)	**1l**		No
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	**1m**		No
n	Sharing of paid employees with related organization(s)	**1n**	Yes	
o	Reimbursement paid to related organization(s) for expenses	**1o**		No
p	Reimbursement paid by related organization(s) for expenses	**1p**	Yes	
q	Other transfer of cash or property to related organization(s)	**1q**	Yes	
r	Other transfer of cash or property from related organization(s)	**1r**	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) See Additional Data Table			
(2)			
(3)			
(4)			
(5)			
(6)			

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) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(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		Yes	No	

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 31-4271520
Name: OHIO STATE BAR ASSOCIATION

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount Involved ($)	(d) Method of determining amount involved
(1) OSBA INSURANCE AGENCY - RENT	A	10,000	CASH
(2) LAW ABSTRACT PUBLISHING COMPANY DBA OHIO PRINTING - LOAN	D	1,194,963	CASH
(3) OSBA INSURANCE AGENCY-ACCOUNTS RECEIVABLE	D	59,752	CASH
(4) OSBANET - ACCOUNTS RECEIVABLE	D	122,077	CASH
(5) OSBACOM - ACCOUNTS RECEIVABLE	D	91,672	CASH
(6) OHIO BAR LIABILITY INSURANCE COMPANY - COUPON RECEIVABLE	D	73,622	CASH
(7) OSBACOM LLC - CONSULTING SERVICES	K	100,008	CASH
(8) OSBA INSURANCE AGENCY-PAYROLL REIMBURSMENTS	N	169,824	CASH
(9) OSBANET-PAYROLL REIMBURSMENTS	P	108,633	CASH
(10) OHIO LAWPAC	Q	53,608	CASH
(11) OHIO BAR LIABILITY INSURANCE COMPANY - DIVIDEND	R	977,000	CASH
(12) OSBACOM LLC - PARTNERSHIP DISTRIBUTIONS	R	402,796	CASH

Additional Data

Software ID:
Software Version:
EIN: 31-4271520
Name: OHIO STATE BAR ASSOCIATION

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
CARMON V ROBERTO IMMEDIATE PAST PRESIDENT	1 00	X		X				13,841	0	0
CAROL S MARX PRESIDENT	1 00	X		X				16,277	0	0
PATRICK F FISCHER PRESIDENT ELECT	1 00	X						4,827	0	0
BARBARA J HOWARD GOVERNOR	1 00	X						1,013	0	0
BELINDA S BARNES GOVERNOR	1 00	X						658	0	0
C KEITH PLUMMER GOVERNOR	1 00	X						1,316	0	0
D CHRIS COOK GOVERNOR	1 00	X						658	0	0
DAVID A HEJMANOWSKI GOVERNOR	1 00	X						658	0	0
DAVID C PATTERSON GOVERNOR	1 00	X						658	0	0
DEBORAH A ALSPACH GOVERNOR	1 00	X						0	0	0
GUST GOUTRAS GOVERNOR	1 00	X						658	0	0
HON JOSEPH E CIRIGLIANO GOVERNOR	1 00	X						0	0	0
JAMES D JENSEN GOVERNOR	1 00	X						658	0	0
JAMES D SILLERY GOVERNOR	1 00	X						658	0	0
JAMES E ROBERTS GOVERNOR	1 00	X						0	0	0
JAMES K WEANER GOVERNOR	1 00	X						658	0	0
JEFFREY T HEINTZ GOVERNOR	1 00	X						658	0	0
JOHN D HOLSCHUH JR GOVERNOR	1 00	X						658	0	0
JONATHAN HOLLINGSWORTH GOVERNOR	1 00	X						658	0	0
JOSEPH L LUDOVICI GOVERNOR	1 00	X						658	0	0
KEVIN P MURPHY GOVERNOR	1 00	X						658	0	0
MARK K MCCOWN GOVERNOR	1 00	X						0	0	0
MARK S FLOYD GOVERNOR	1 00	X						1,316	0	0
MARTIN E MOHLER GOVERNOR	1 00	X						658	0	0
MARY ASBURY GOVERNOR	1 00	X						658	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
MELISSA A GRAHAM-HURD GOVERNOR	1 00	X						658	0	0
THOMAS J GRADY GOVERNOR	1 00	X						658	0	0
THOMAS L GUILLOZET GOVERNOR	1 00	X						1,316	0	0
WALTER M LAWSON III GOVERNOR	1 00	X						658	0	0
WILLIAM M OWENS GOVERNOR	1 00	X						658	0	0
YOLANDA D GWINN GOVERNOR	1 00	X						0	0	0
DENNY L RAMEY EXECUTIVE DIRECTOR	40 00			X				307,898	33,336	35,639
WILLIAM K WEISENBERG ASSISTANT E D FOR PUBLIC	40 00				X			235,909	0	39,571
RICHARD C BANNISTER ASSISTANT E D OF ADMINIST	40 00				X			146,595	16,289	38,245
KENNETH A BROWN DIRECTOR OF PUBLIC RELATIONS	40 00					X		119,991	0	21,635
STEPHAN W STOVER LEGISLATIVE COUNSEL	40 00					X		118,157	0	0
FREDERICK W ENGEL DIRECTOR OF TECHNOLOGY	40 00					X		115,959	0	39,896
EUGENE P WHETZEL GENERAL COUNSEL	40 00					X		111,671	0	22,626
FRANCES E WELLINTON DIRECTOR OF CLE	40 00					X		106,733	0	29,833