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**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)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

<u>A I</u>	or the	e 2012 calendar year, or tax year beginning $JUL_1$ , $2012$ and	ending U	UN 30, 2013		
В	Check If applicab	C Name of organization		D Employer identific	cation number	
	Addre	e COLUMBUS BUILDING, INC.				
	Name chang	Doing Business As		83-0	186253	
	Initial return		Room/suite	E Telephone number		
	Termi	BOA 30		307-	<u>672-0936</u>	
Ļ	Amen	City, town, or post office, state, and ZIP code		G Gross receipts \$	79,284.	
	Appin tion pends	SHEKIDAN, WI 62801		H(a) Is this a group re		
	<b>P</b> 5	F Name and address of principal officer: STEVE WASHUT		for affiliates?	Yes X No	
_		59 STATE HWY 335, SHERIDAN, WY 82801		H(b) Are all affiliates inc		
		empt status 501(c)(3)X 501(c)( 2 ) ◀ (insert no.) 4947(a)(1) c	or 527	1 '	list. (see instructions)	
		te: ► N/A forganization: X Corporation Trust Association Other ►	I Voor	H(c) Group exemption	State of legal domicile: WY	
	art I	Summary	IL TEAL	or formation. 1980 IV	1 State of legal doffliche, W 1	
	1	Briefly describe the organization's mission or most significant activities TITLI	E HOLD	ING CORPORA	TION	
Š		501(C)(2) FOR KNIGHTS OF COLUMBUS, SHERII	DAN, W	Y 82801		
 ernance	2	Check this box   If the organization discontinued its operations or dispose	sed of more	than 25% of its net as	sets	
<u>₹</u>	3	Number of voting members of the governing body (Part VI, line 1a)		3		
<b>7</b>	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	0	
S S	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	2	
<b>#</b>	6	Total number of volunteers (estimate if necessary)		6	0	
A V V	7 a	Total number of volunteers (estimate if necessary)  Total unrelated business revenue from Part VIII, column (C), line 12  Net unrelated business taxable income from Form 990-T, line 34	/Fn	7a	50.	
	b	The dividated addition to the dividad in the state of the		/ 7b	0.	
		Contributions and grants (Part VIII, line 1h)	2013	Prior Year 0.	Current Year 0 •	
Ź≅	8	Contributions and grants (Part VIII, line III)	4013	0.	0.	
<b>Z</b> §	9	Program service revenue (Part VIII, line 2g)		485.	50.	
್ರಿಕಿ	10	Investment income (Part VIII, column (A), lines 3, 4, and 70 OGDEN, Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	UTH	23,553.	26,302.	
Ø	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	: V	24,038.	26,352.	
_	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.	
ý	١	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		- O.	0.	
ē	ь	Total fundraising expenses (Part IX, column (D), line 25)	0.			
ω	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		51,367.	25,000.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		51,367.	25,000.	
	19	Revenue less expenses. Subtract line 18 from line 12		-27,329.	1,352.	
Net Assets or Find Balances			Be	ginning of Current Year	End of Year	
Set	20	Total assets (Part X, line 16)		869,950.	871,344.	
et G	21	Total liabilities (Part X, line 26)	<u> </u>	548.	590.	
		Net assets or fund balances Subtract line 21 from line 20		869,402.	870,754.	
-	art II	Signature Block				
		alties of perjury, I declare that I have examined this return, including accompanying schedule ct, and complete. Declaration of preparer (other than officer) is based on all information of wh			y knowledge and belief, it is	
true	, corre	ct, and complete. Declaration of preparer (other than officer) his based off approximation of wi	lich preparer	nas any knowledge.	126/201	
e:-		Signature of officer		Date /	<del>/                                    </del>	
Sig		STEVE WASHUT, PRESIDENT/MANAGER			,	
Type or print name and title						
		Print/Type preparer's name Preparer's signature		Date Check	PTIN	
Pai	d	STEVEN W. RUCKI, CPA		2/26/13 self-employe	P01380935	
Pre	83-0328254					
	Only	Firm's name RUCKI, MARSHALL, NEWBROUGH CPA'S Firm's address 109 SOUTH MAIN STREET	S, P.C	• Firm's EIN		
_		SHERIDAN, WY 82801		Phone no. (	307) 674-6609	
Ma	v the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No	

<u>Form</u>	990 (2012) COLUMBUS BUILDING, INC.	83-0186253 Page <b>2</b>
Pai	t 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. NONE	
•		
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X 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 are required to report the amount of grants and allocations to other	
		is, the total expenses, and
	revenue, if any, for each program service reported	
4a	(Code) (Expenses \$	
	ORGANIZATION IS OWNER OF BUILDING THAT IS RENTED OUT TO	
	BUSINESSES. ORGANIZATION SUPPORTS THE LOCAL KNIGHTS OF (	COLUMBUS, AN
	AFFILIATION ASSOCIATED WITH THE CATHOLIC CHURCH.	
		·
4b	(Code) (Expenses \$ including grants of \$) (Revenue	2 01
70	(Code) (Expenses 3	,
4c	(Code) (Expenses \$) (Revenue	ıe\$)
	Other and the Control of Control	
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ including grants of \$ ) (Revenue \$	
<u>4e</u>	Total program service expenses	<del></del>
23200	2	Form <b>990</b> (2012)

Form 990 (2012) COLUMBUS BUILDING, INC.

Part IV Checklist of Required Schedules

				1
	1. II		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			v
0	If "Yes," complete Schedule A  Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			_ A
3	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			12
_	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		х
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		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		X
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		X
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
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		X
С	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		X
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		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			7.7
_	Schedule D, Parts XI and XII	12a		X
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?	406		v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b	<u> </u>	X
13	The state of the s	13 14a		X
14a	Did the organization maintain an onice, employees, or agents outside or the oritical clates.  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
n	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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 United States? If "Yes," complete Schedule F, Parts II and IV	15		x
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 United States? If "Yes," complete Schedule F, Parts III and IV	16		X
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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		L
		Form	990	(2012)

			Yes	No_
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		_ <u>X</u> _
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		<u>X</u> _
23	Did the organization answer "Yes" to Part VII, Section A, line 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		<u> X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			37
	Schedule K If "No", go to line 25	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	24u		
<b>2</b> 5a	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
<b>h</b>	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	_2Ja		
D	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, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b		28b		<u> </u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			7.7
	If "Yes," complete Schedule N, Part I	31		<u> X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		x
22	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
<b>-</b>	Part V, line 1	34	x	
35a	540/LV40\0	35a		X
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197			
	Note. All Form 990 filers are required to complete Schedule O	38	X	L
		Form	990	(2012)

	990 (2012) COLUMBUS BUILDING, INC. 03-0160	<u> 455</u>	<u> </u>	age J
Par	t V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			$\Box$
	<del></del>		V	l Na
4-	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	_No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1b  0			
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
С	(gambling) winnings to prize winners?	4.		1
٥-		<u>1c</u>		<u> </u>
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 2			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20		<u> </u>
0-		20		x
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<u>3a</u> 3b		
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	3D		
4a	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
	If "Yes," enter the name of the foreign country	<u>4a</u>		
D	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	F-		X
5a	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5a</u>		X
þ		<u>5b</u>		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>	<u> </u>	
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6-		x
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ch.		
_	were not tax deductible?	6b		ļ <u></u>
7	Organizations that may receive deductible contributions under section 170(c).	7-		x
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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.		x
	to file Form 8282?	7c	ļ	_^_
	If "Yes," indicate the number of Forms 8282 filed during the year	7-		
e		7e		
T	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	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.	ο-		_
a	Did the organization make any taxable distributions under section 4966?	9a		
D	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  Cross receipts included as Form 200. Part VIII, line 13, for public use of club facilities.			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	i		
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			
40	amounts due or received from them)	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		_
	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.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ļ <u>.</u>	
_	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand  Did the average that a second any new monte for indeer tenance during the tay year?	44		v
	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes " heart filed a Form 720 to report these payments? If "No." provide an explanation in School to Co.	14a		X
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	l	<u>.                                    </u>

Form **990** (2012)

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Form 990 (2012) COLUMBUS BUILDING, INC. 83-0186253 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI					X
Sec	tion A. Governing Body and Management					
			1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	7	<u>'</u>		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
þ	Enter the number of voting members included in line 1a, above, who are independent	1b	<u> </u>	)		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	iip with	any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	he dıre	ct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			_3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form	990 w	as filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets?		5		X
6	Did the organization have members or stockholders?		•	6	_X_	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or			
	more members of the governing body?			7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or			
	persons other than the governing body?			7b	ļ	<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by tl	ne following:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenu	e Code.)			
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapte	s, 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 both	dy befo	ore filing the form?	11a	X	
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			1		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," a	escribe	l		
	in Schedule O how this was done			12c		37
13	Did the organization have a written whistleblower policy?			13-	<u> </u>	X
14	Did the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and approv		naepenaent	İ		
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•		45-		v
a	The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization			15a 15b		X
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			130		
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	with a	1		
	taxable entity during the year?			16a		x
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its	participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of the control of					
	exempt status with respect to such arrangements?		•	16b		
Sec	tion C. Disclosure		<del></del>	,		
17	List the states with which a copy of this Form 990 is required to be filed ►WY					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sec	tion 501(c)(3)s only)	availab	le	
•	for public inspection. Indicate how you made these available. Check all that apply.	•	, , , , , , , , , , , , , , , , ,			
	Own website Another's website X Upon request Other (explain	n ın Sc	hedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or		•	d finar	ncial	
	statements available to the public during the tax year.					
20	State the name, physical address, and telephone number of the person who possesses the books a	and rec	ords of the organiza	tion <sup>.</sup>		
	STEVE WASHUT - 307-672-2730		-			
	SHERIDAN, WYOMING, SHERIDAN, WY 82801					
23200	5				000	(0040)

00515631

## 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

### 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees, highest compensated employees, and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
(A)	(B)	(C)				(D)	(E)	(F)		
Name and Title	Average	ído	Position (do not check more than one		one	Reportable	Reportable	Estimated		
	hours per	рох	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week	-	Cei ai		Tect	Jiruus	100)	from	from related	other
	(list any	rect						the	organizations (W-2/1099-MISC)	compensation from the
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-NIISC)	organization
	organizations	ruste	Itus	1	yee	шреп		(***2/1033*141100)		and related
	below	dead	Institutional trustee	_	8	Se Se	<sub>25</sub>			organizations
	line)	Individual trustee or director	Instit	Officer	Key employee	Highest compensated employee	Ботше			
(1) ROBERT FALL	0.50	ļ								_
TREASURER	<del> </del>	X	<u> </u>			_		0.	0.	0.
(2) TERRY WINNOP	0.50								_	
SECRETARY		X	ļ			_		0.	0.	0.
(3) MIKE CATES	0.50	ļ								
BOARD MEMBER		X	<u> </u>				<u> </u>	0.	0.	0.
(4) BOB LEIBRICH	0.50	]								
BOARD MEMBER		X	辶	igspace				0.	0.	0.
(5) KEN WEBER	0.50	1							_	_
VICE PRESIDENT		X				_	ļ	0.	0.	0.
(6) STEVE WASHUT	9.00	}								
PRESIDENT & MANAGER		<u> </u>		╙	X		ļ	4,200.	0.	0.
	-	1		ł					-	
		_	_				ļ			
		_		<u> </u>	<u> </u>	<u> </u>				
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		ــــــ		ļ		-	ļ	<u> </u>		
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		_	<u> </u>	ļ	<u> </u>	_	<u> </u>	<u> </u>		
		1		Ì						
		<u> </u>		<u> </u>	<u> </u>					
					ļ					
		<u> </u>	<u> </u>				<u> </u>			
				<u> </u>	<u> </u>	<u> </u>	_			
	<u> </u>	<u> </u>	_	<u> </u>	<u> </u>	↓_	<u> </u>			
		4								
	<del> </del>	_	_	↓	<u> </u>	_	<u> </u>		<u> </u>	
		4								
			<u> </u>				<u></u>	<del></del>	L	000
232007 12-10-12										Form <b>990</b> (2012)

	(A) Name and title	(B) Average hours per week (list any hours for related	box	Position (do not check more th oox, unless person is officer and a director/t			than one is both ar or/trustee)		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organization (W-2/1099-MIS	on I s	Estima amoun othe compens from t		of ation e
		organizations below line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)			an	anızatı d relat anızatı	ed:
			_											
			ļ											
			_			_								
			-											
											_			
											_			
									,					
	Sub-total  Total from continuation sheets to Part \	/II, Section A	•				<b>&gt;</b>		4,200.		0.			0.
<u>d</u> 2	Total (add lines 1b and 1c)  Total number of individuals (including but	not limited to th	ose	liste	ed at	oove	e) wh	no re	4,200. eceived more than \$100	,000 of reportabl	0. e			0.
	compensation from the organization								· · · ·		<del></del> -		Yes	No
3	Did the organization list any former office line 1a? If "Yes," complete Schedule J for	such individual				•	•			. ,		3_		х
4	For any individual listed on line 1a, is the sand related organizations greater than \$15	50,000? <i>If "Yes</i> ,	" co	mple	ete S	Sche	edule	J fo	or such individual	•		4		x
5 	Did any person listed on line 1a receive or rendered to the organization? If "Yes," cor	•				-		elate	ed organization or indivi	dual for services		5		х
1	tion B. Independent Contractors  Complete this table for your five highest contractors										pens	ation f	rom	
	the organization Report compensation for  (A)  Name and busines					/ith (	or w	thin	the organization's tax (B)  Description of s			(C		
	Name and passings		INC	ONE	<u>'</u>				Description of s	O VICES		Ompe	isatio	-
						<u> </u>						-		
												_		
												<u> </u>		
												-		
2	Total number of independent contractors \$100,000 of compensation from the organ		ot lir	nited	d to	thos (		ted	above) who received m	ore than				
												Form	990 /2	2012\

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Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)									
Check if Schedule O contains a response to any question in this Part IX									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses				
1	Grants and other assistance to governments and	•							
	organizations in the United States. See Part IV, line 21								
2	Grants and other assistance to individuals in								
	the United States. See Part IV, line 22				<u></u>				
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								
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								
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)								
9	Other employee benefits	·							
10	Payroll taxes .								
11	Fees for services (non-employees)								
а	Management								
b	Legal		_						
C	Accounting .		<u> </u>						
d	Lobbying .								
e	Professional fundraising services. See Part IV, line 17								
f	Investment management fees								
g	Other (If line 11g amount exceeds 10% of line 25,								
	column (A) amount, list line 11g expenses on Sch O.)								
12	Advertising and promotion .								
13	Office expenses								
14	Information technology								
15	Royalties								
16	Occupancy	-							
17	Travel								
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings								
20	Interest .								
21	Payments to affiliates	25,000.							
22	Depreciation, depletion, and amortization								
23	Insurance .								
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)								
а									
b									
С			-						
d									
е	All other expenses	0.5.00							
25	Total functional expenses. Add lines 1 through 24e	25,000.							
26	Joint costs. Complete this line only if the organization								
	reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation.								
	Check here if following SOP 98-2 (ASC 958-720)								

Par	t X	Balance Sheet				
		Check if Schedule O contains a response to any	question in this Part X .			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	31,176.	1	22,238.	
	2	Savings and temporary cash investments		50,279.	2	50,239.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and fo	rmer officers, directors,			
	_	trustees, key employees, and highest compensa				
		Part II of Schedule L		5		
	6	Loans and other receivables from other disquali	fied persons (as defined under	-		
	-	section 4958(f)(1)), persons described in section		,		
		employers and sponsoring organizations of sect				
		employees' beneficiary organizations (see instr).			6	
ets	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
9	9	Prepaid expenses and deferred charges	• •		9	
	-	Land, buildings, and equipment cost or other	ı · ı			
		basis Complete Part VI of Schedule D	10a 798,867.			
	ь	Less accumulated depreciation	10b 0.	788,495.	10c	798,867.
	11	Investments - publicly traded securities		, , , , , , , , , , , , , , , , , , , ,	11	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	12	Investments other securities See Part IV, line 1	1		12	
	13	Investments · program-related. See Part IV, line			13	<del></del>
	14	Intangible assets		-	14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	869,950.	16	871,344.
	17	Accounts payable and accrued expenses		548.	17	590.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
v	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former				
apil	_	key employees, highest compensated employee				1
ت		Complete Part II of Schedule L			22	1
	23	Secured mortgages and notes payable to unrela	ited third parties		23	
	24	Unsecured notes and loans payable to unrelated			24	
	25	Other liabilities (including federal income tax, pa				
		parties, and other liabilities not included on lines				1
		Schedule D			25	1
	26	Total liabilities. Add lines 17 through 25		548.	26	590.
		Organizations that follow SFAS 117 (ASC 958	), check here 🕨 🔲 and			
S		complete lines 27 through 29, and lines 33 and	d 34.			1
ĕ	27	Unrestricted net assets			27	
3ala	28	Temporarily restricted net assets			28	
ğ.	29	Permanently restricted net assets	<u></u>		29	
Ŧ		Organizations that do not follow SFAS 117 (A	SC 958), check here 🕨 🗓			1
6		and complete lines 30 through 34.				1
ets	30	Capital stock or trust principal, or current funds		80,355.	30	80,355.
ASS	31	Paid-in or capital surplus, or land, building, or ed	uipment fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, or other funds	789,047.	32	790,399.
Ź	33	Total net assets or fund balances		869,402.	33	870,754.
	34	Total liabilities and net assets/fund balances		869,950.	34	871,344.
						Form <b>990</b> (2012)

Form	990 (2012) COLUMBUS BUILDING, INC.	83-018	6253	Pag	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets			•	
	Check if Schedule O contains a response to any question in this Part XI				
		1 1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>52.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	25	<u>5,0</u>	00.
3	Revenue less expenses. Subtract line 2 from line 1	3	1	_ , 3	<u>52.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	869	, 4	02.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	870	7, 7	54.
Pa	rt 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 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Sched	ule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	İ	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review	wed on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a sepa	ırate basıs,			
	consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight o	f the audit.			
	review, or compilation of its financial statements and selection of an independent accountant?	•	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in S	chedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Act and OMB Circular A-133?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re	aured audit			
_	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	,	36		

Form **990** (2012)

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990,

OMB No 1545-0047 Inspection

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

<b>4</b> 01111	COLUMBUS BUILDING, INC.	83-0186253
Par		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 fun	nds
	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 can be used	only
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confer	rring
	Impermissible private benefit?	Yes No
Pai		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 education)  Preservation of an historical	lly important land area
	Protection of natural habitat Preservation of a certified hi	istoric structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	onservation easement on the last
	day of the tax year	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	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, and not on a historic structure	
	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	nization during the tax
	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 t	
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)(E)	
	and section 170(h)(4)(B)(ii)?	L Yes L No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense states	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization	ganization's accounting for
<b>D</b>	conservation easements.  III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Cimilar Assats
Pai	<del></del>	Sillilar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a	
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and be	
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public se	rvice, provide the following amounts
	relating to these items:	<b>~</b> ¢
	(i) Revenues included in Form 990, Part VIII, line 1	> \$ > \$
_	(ii) Assets included in Form 990, Part X	provide
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 (ASC 958) relating to these items	<b>*</b>
a	Revenues included in Form 990, Part VIII, line 1	► \$ ► \$
b	Assets included in Form 990, Part X	•

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2012

		S BUILDING						<u>83-01</u>			age 2
Pa	rt III   Organizations Maintaining C	ollections of A	rt, Hist	torical Tr	easures, c	or Othe	<u>er Simil</u>	ar Asse	ts(contin	ued)	
3	Using the organization's acquisition, accession	on, and other record	ls, checl	any of the	following tha	at are a s	ignificant	use of its	collection	item	s
	(check all that apply).										
а	Public exhibition	d		Loan or excl	hange progra	ams					
b	Scholarly research	е		Other							
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how th	ney further th	ne organizati	on's exe	mpt purp	ose in Par	t XIII		
5	During the year, did the organization solicit or	r receive donations	of art, hi	storical treas	sures, or oth	er sımıla	r assets		_		_
	to be sold to raise funds rather than to be ma	aintained as part of t	he orga	nization's co	llection?				Yes		No
Pa	rt IV Escrow and Custodial Arrang	<b>gements.</b> Comple	ete if the	organizatio	n answered	"Yes" to	Form 990	, Part IV, i	ine 9, or		
	reported an amount on Form 990, Par	t X, line 21									
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for	contribution	s or other as	sets not	ıncluded	_	_		,
	on Form 990, Part X?	•							Yes	L	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing 1	able:					-		
									Amount		
¢	Beginning balance						1c				
d	Additions during the year	•					1d				
е	Distributions during the year						1e				
f	Ending balance						1f			-	
2a	Did the organization include an amount on Fo			•					<b>Yes</b>	<u> </u>	No
=	If "Yes," explain the arrangement in Part XIII										<u>L</u>
Pa	rt V Endowment Funds. Complete in	f the organization an							<del></del>		
		(a) Current year	(b) P	rior year	(c) Two year	rs back	(d) Three	ears back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships .										
е	Other expenditures for facilities										
	and programs	•			·						
f	Administrative expenses										
g	End of year balance				<u> </u>				<u> </u>		
2	Provide the estimated percentage of the curr	rent year end baland	e (line 1	g, column (a	ı)) held as						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	• • • —	%									
	The percentages in lines 2a, 2b, and 2c should	·									
3a	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	nd administe	ered for t	he organi	zation	Г		
	pà.									Yes	<u>No</u>
	(i) unrelated organizations .								3a(i)		
	(ii) related organizations			•					3a(ii)		
b	If "Yes" to 3a(II), are the related organizations						-		3b		
4	Describe in Part XIII the intended uses of the								<del>~</del>		
Ра	rt VI   Land, Buildings, and Equipm				. 1						
	Description of property	(a) Cost or o			or other		ccumulate		(d) Book	value	Э
	<del></del>	basis (investr	nent)		(other)	ael	preciation		445		
	Land				5,184.		··· -				84.
b	Buildings			64	6,623.				646	, 6	<u>23.</u>
С	Leasehold improvements				7 0 6 0					, ,	
d		-		_ 3	7,060.				37	, 0	<u>60.</u>
<u>e</u>	Other	15	V - 1	(5) (			-		700	2 0	<del></del>

Schedule D (Form 990) 2012

15

Schedule D (Form 990) 2012

Chedule D (Form 990) 2012 COLUMBUS BUILDING, INC. Part XI   Reconciliation of Revenue per Audited Financial Statem	ents With Reve	83-0186253 P enue per Return	-90
1 Total revenue, gains, and other support per audited financial statements		1	
Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains on investments	2a		
<b>b</b> Donated services and use of facilities	2b		
c Recoveries of prior year grants	_2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
<b>b</b> Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b	_	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	·	5	
Part XII Reconciliation of Expenses per Audited Financial Statem	nents With Exp	enses per Return	
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.			
a Donated services and use of facilities	2a		
<b>b</b> Prior year adjustments	2b		
c Other losses .	2c		
d Other (Describe in Part XIII )	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	• •		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII )	4b		
c Add lines 4a and 4b		4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	•	. 5	
Part XIII Supplemental Information			
line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to	o provide any additi	onal information.	
<del></del>		Schedule D (Form 990)	201

### SCHEDULE J (Form 990)

# **Compensation Information**

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

➤ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

COLUMBUS BUILDING, INC.

Yes" to Form 990, Open to Public

Name of the organization

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

Inspection
Employer identification number

83-0186253

OMB No 1545-0047

Pa	art I   Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate 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 indemnification and gross-up payments Health or social club dues or initiation fees		!	
	Discretionary spending account Personal services (e.g , maid, chauffeur, chef)			
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		:	
_	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
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		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply. Do not check any boxes for methods used by a related organization to			İ
	establish compensation of the CEO/Executive Director, but explain in Part III			
	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	Dunng 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:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations 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	-		
а	7	5a		İ
	Any related organization?	5b		
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of		i	
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section 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 accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations 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		

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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2012

INC. COLUMBUS BUILDING,

Schedule J (Form 990) 2012

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

83-0186253

Page 2

Note. The sum of columns (B)(1)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	ple	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)·(l)(B)	reported as deferred in prior Form 990
(1) STEVE WASHIT	9	4.200.	0	0.	0	0	4,200.	0.
PRESIDENT & MANAGER	<b>E</b>	0	0.	0	0	0.		0
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### **SCHEDULE O**

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047
2012
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

COLUMBUS BUILDING, INC.	83-0186253
FORM 990, PART VI, SECTION A, LINE 6: THE NONPROFIT ORGAN	
MEMBERS THAT ELECT THE BOARD OF DIRECTORS.	
FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION H	AS MEMBERS WHO
HAVE THE POWER TO ELECT OR APPOINT ONE OR MORE MEMBERS OF	THE GOVERNING
BODY.	
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990, RETU	RN OF
ORGANIZATION EXEMPT FROM INCOME TAX, IS REVIEWED, ALONG W	ITH THE FINANCIAL
STATEMENTS, AT THE ANNUAL MEETING HELD THE SECOND WEEK OF	SEPTEMBER PRIOR
TO FILING. THE PUBLIC CAN OBTAIN A COPY OF THE FORM 990	FOR REVIEW UPON
REQUEST.	
FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENT	S, DOCUMENTS OF
POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUB	LIC UPON REQUEST.

SCHEDULE R (Form 990)

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.

2012 Open to Public Inspection

OMB No 1545-0047

**Employer identification number** 

83-0186253

Name of the organization Department of the Treasury Internal Revenue Service

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) COLUMBUS BUILDING, INC.

Part

Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) End-of-year assets <u>e</u> Total income Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity Part II

	Section \$12(b)(13) controlled entity?	8		×				Ì	
	Section 51 contro entity	Yes							
	(f) Direct controlling entity								
	(e) Public charity status (if section	((E)(3))							_
	(d) Exempt Code section			501(C)(3)				į	
	(c) Legal domicile (state or foreign country)			WYOMING					
	(b) Primary activity		FINANCIAL AID TO ORGANIZATION'S MEMBERS AND						
organizations canning the tax year /	(a) Name, address, and EIN of related organization		KNIGHTS OF COLUMBUS - 23-7235360 301 E BRUNDAGE ST	SHERIDAN, WY 82801					

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

232181 12-10-12 LHA

Schedule R (Form 990) 2012

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Schedule R (Form 990) 2012 COLUMBUS BUILDING, INC.

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) Part III

General or Percentage managing ownership Schedule R (Form 990) 2012 Yes No Section 512(b)(13) controlled entity? Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year) 3 Percentage ownership Yes No Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets Ξ ate allocations? Disproportion-Yes No 3 Share of total income Share of end-of-year assets 6 Type of entity (C corp, S corp, or trust) **e** Share of total income Ξ Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) € (e Legal domicile (state or foreign country) 22 છ Direct controlling entity ਉ Primary activity (c)
Legal
domicile
(state or
foreign
country) Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization (a) 232162 12-10-12 Part IV

Yes

4 **£** 5 5 <del>e</del>

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

- During the tax year, did the organization 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 or (iv) rent from a controlled entity
- Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
  - m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

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- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- ۵
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- Other transfer of cash or property from related organization(s)

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-s)	(c) Amount involved	(d) Method of determining amount involved
(1) HOLY NAME SCHOOL	В	0	
(2) KALIF SHRINE	В	0	
(3) RED CROSS	В	0	
(4) SHERIDAN FREE CLINIC	Д	0	
(s) GOOD FELLOW FUND	В	0.	
(6) SHERIDAN SENIOR CENTER	В	0.	
232163 12-10-12	23		Schedule R (Form 990) 2012

83-0186253

COLUMBUS BUILDING, INC.

[Part V] Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2) Schedule R (Form 990)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7)CHAPS EQUINE ASSISTED THERAPY	В	0.	
(8)HOLY NAME CATHOLIC CHURCH	В	0	0.CASH
(6)		3	
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

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Schedule R (Form 990) 2012 COLUMBUS BUILDING, INC

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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.

Legato domocine   Predominant moone pares as charge of state or foreign (state or foreign from tax and foreign fro	(a)	(q)	(C)	(9)	<b>(£)</b>	(6)	(h)	(1)	(I)	(k)
	ame, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income par (related, unrelated, sciluded from tax moder section 512-514) ye	nare or total ncome	Share of end-of-year assets	tonate altocations?	amount in box 20 of Schedule K-1 (Form 1065)	managing partner?	ownership
		<u></u>			_					
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Schedule R (Form 990) 2012

Schedule R	(Form 990) 2012	COLUMBUS	BUILDING,	INC.	_ 8	3-0186253	Page 5
Part VII	(Form 990) 2012  Supplemental Info	rmation					
	Complete this part to pre	ovide additional info	rmation for recome	as to augstions on Scho	dula P (see instruction	ne)	
	Complete this part to pri	ovide additional into	imation for respons	es to questions on some	dule in (see instruction	15)	
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