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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 private foundations)

DLN: 93493145008017 OMB No 1545-0047

Open to Public

Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at www IRS gov/form990

Department of the Treasur Internal Revenue Service Inspection For the 2016 calendar year, or tax year beginning 01-01-2016 , and ending 12-31-2016 C Name of organization Columbus Association of Realtors D Employer identification number ☐ Address change 31-4154020 ☐ Name change Doing business as ☐ Initial return □eturn/terminated Number and street (or P O  $\,$  box if mail is not delivered to street address) 2700 AIRPORT DRIVE E Telephone number ☐ Amended return (614) 475-4000 ☐ Application pending City or town, state or province, country, and ZIP or foreign postal code COLUMBUS, OH 43219 G Gross receipts \$ 4,619,115 Name and address of principal officer H(a) Is this a group return for STANLEY E COLLINS ☐Yes **☑**No subordinates? 2700 AIRPORT DRIVE H(b) Are all subordinates COLUMBUS, OH 43219 ☐Yes ☐No included? Tax-exempt status ☐ 501(c)(3) **☑** 501(c)(6) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW COLUMBUSREALTORS com L Year of formation 1908 M State of legal domicile K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities See Schedule O Activities & Governance Check this box 🕨 🗌 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 20 Number of independent voting members of the governing body (Part VI, line 1b) 19 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 21 Total number of volunteers (estimate if necessary) . . . 6 924 7a Total unrelated business revenue from Part VIII, column (C), line 12 . 7a 284,008 **7**b **b** Net unrelated business taxable income from Form 990-T, line 34 -1,131 **Current Year** 25,568 8 Contributions and grants (Part VIII, line 1h) . 20,033 **9** Program service revenue (Part VIII, line 2g) . . . 3,672,816 3,961,640 28,754 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . 132,932 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 339,515 367,155 4,170,831 4,377,582 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 43,000 53,000 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . 1,025,858 923,785 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) **16a** Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 **17** Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . 2,972,121 3,117,465 3,938,906 4,196,323 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . 231,925 181,259 Assets or d Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 7,524,422 8,236,500 3,541,383 21 Total liabilities (Part X, line 26) . 3,121,331 4,695,117 4,403,091 22 Net assets or fund balances Subtract line 21 from line 20 . Part III 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 2017-05-25 Signature of officer Sign Here STANLEY E COLLINS CEO Type or print name and title

Preparer's signature MARY ELIZABETH WRIGHT

Date

May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions.

Firm's address ▶ 941 Steubenville Ave PO Box 820

Cambridge, OH 437250820

Firm's name Rea & Associates Inc

Print/Type preparer's name MARY ELIZABETH WRIGHT

Paid

**Preparer** 

Use Only

NTTQ

P00099212

Check I If

self-employed

Firm's EIN > 34-1310124

Phone no (740) 432-5658

Form	990 (2	016)				Page <b>2</b>
Par	t III	Statement of Pro	gram Service Acco	mplishments		
		Check if Schedule O c	ontains a response or n	ote to any line in this Part III		🗹
1	Briefly	describe the organizat	tion's mission			
See S	Schedule	e 0				
2	Did th	e organization underta	ke any significant progr	am services during the year	which were not listed on	
	the pr	ior Form 990 or 990-E2	2?			🗌 Yes 🗹 No
	If "Yes	s," describe these new	services on Schedule O			
3	Did th	e organization cease co	onducting, or make sign	ificant changes in how it con-	ducts, any program	
	service	es?				🗌 Yes 🗹 No
	If "Yes	s," describe these chan	ges on Schedule O			
4	Sectio	n 501(c)(3) and 501(c)		equired to report the amount	e largest program services, as me of grants and allocations to other	
4a	(Code	)(	Expenses \$	including grants of \$	) (Revenue \$	)
	BOTH F	RESIDENTIAL AND COMME		IG CLASSES ON TOPICS INCLUDI	REALTORS A WIDE VARIETY OF CONT. NG THE MLS SOFTWARE, COLUMBUS A	
4b	(Code	) (	Expenses \$	including grants of \$	) (Revenue \$	)
	PROGR	AMS PRODUCED BY THE C		F REALTORS, SUCH AS FORECAST	OMMITTEES AT THE BOARD OR ONE OI TNIGHT (JANUARY), AWARDS NIGHT (.	
4c	(Code	) (	Expenses \$	including grants of \$	) (Revenue \$	)
					ATE PROFESSIONALS NEED TO SUCCE INCLUDING INDUSTRY AS WELL AS CO	
4d	Other	program services (Des	cribe in Schedule O )			
	(Expe	nses \$	ıncludıng gr	ants of \$	) (Revenue \$	)

Yes

Page 3

No

Nο

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No

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No

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No

No

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No

Nο

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Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

or X as applicable

Section 501(c)(3) organizations.

Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . .

Form 990 (2016) **Checklist of Required Schedules** Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete 

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

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 🕏

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 为

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX.

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

ın Part X, line 16? *If "Yes," complete Schedule D, Part IX* 😼 . . . . . . . . . . . . . . . .

b Was the organization included in consolidated, independent audited financial statements for the tax year?

**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, Parts I and IV* . . . . . . . . . . . .

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . .

**14a** Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . .

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 💆 . . . . . . . . . .

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

assessments, or similar amounts as defined in Revenue Procedure 98-19?

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11b

11c

11d

11e

11f

12a

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Yes

Yes

Page 4

Part IV Checklist of Required Schedules (continued)

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . . . Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX. column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . . . 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,"

the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . . 🕏

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

22 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of

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24b

24c

24d

25a

25b

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28a

28b

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35a

35h

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37

Yes

Yes

Yes

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Yes

orm	990 (2016)			Page <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 27			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c	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			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
b	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" to line 3b, 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, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<b>5</b> 0		
C	If fes, to line 3a of 3b, did the organization line Form 8000-17	5с		
	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 as charitable contributions?	6a	Yes	
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6</b> b	Yes	
7		_		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7</b> c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
_		7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
92	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	-		
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
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		

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Par	<b>TVI</b> Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to li	nes			
	Check if Schedule O contains a response or note to any line in this Part VI			<b>✓</b>			
Sa	ection A. Governing Body and Management	• •					
30	ction A. Governing body and Management		Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 20		103				
	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						
b	Enter the number of voting members included in line 1a, above, who are independent  1b 19						
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	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? .						
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?	<b>7</b> b	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				
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No			
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)				
			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				
Ь	Describe in Schedule O the process, if any, used by the organization to review this 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				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	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		No			
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a	Yes				
b	Other officers or key employees of the organization	15b		No			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		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					
	ction 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						
10	Own website Another's website Upon request Other (explain in Schedule O)						
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 during the tax year						
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►Stanley E Collins CEO 2700 AIRPORT DRIVE COLUMBUS, OH 43219 (614) 475-4000						

Part VII

## Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line 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 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 organization compensated any current officer, director, or trustee (B) (E) (A) (D) (F) (C) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the Highe for related (W- 2/1099-(W-2/1099organization and Individual to or director MISC) MISC) organizations Ē related Institutional 호 below dotted organizations employ 3 line) con trustee Ď pensat Ě 16 00 (1) JOHN ROYER Х PRESIDENT 8 00 (2) MICHEAL GORDON Х 0 0 PRESIDENT-ELECT 8 00 (3) SARA WALSH Х Х TREASURER 8 00 (4) TED OATTS Х SECRETARY 4 00 (5) KATHY SHIFLET 0 DIRECTOR 4 00 (6) VICKI BALLENGER DIRECTOR 0 4 00 (7) TERRY BRYANT DIRECTOR 4 00 (8) BOB CASE Х 0 DIRECTOR 4 00 (9) MIKE COPELLA 0 0 DIRECTOR

4 00 (10) HEATHER DUNN DIRECTOR 4 00 (11) JP FAULKNER 0 Х DIRECTOR 4 00 (12) JILL FERGUS 0 DIRECTOR 4 00 (13) MICHAEL MAHON DIRECTOR 4 00 (14) JOHN MYERS 0 Х 4 00 (15) LOUISE POTTER Х DIRECTOR 4 00 (16) EMMANUEL REMY DIRECTOR 4 00 (17) BUZZ THOMAS DIRECTOR

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Fell	Section A. Officers, Directors	, II ustees, K	EY LIII	hioy		<u>,, ai,</u>	<u>ıu mç</u>	1116	st compensated	Linployees (	JUIL	mueu	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	Average hours per week (list any hours for related for related any hours for related any hours for related any hours for related any hours for related for related for related any hours for related for related for related any hours for related for								on d ns	Estima amount o compens from organizati	ated of other nsation the tion and
		organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee			MISC)		relat organiza	
(18) 9	SUE VAN WOERKOM	4 00	× ×						0				0
DIKEC		•••	····^		$\perp$	$\perp$		$\perp$			$\dashv$		
(19) F	RONNIE WOODROW	4 00	×						· ·	,	o		0
DIKEC	CTOR	<u> </u>	<del> </del>	—	$\perp$	$\perp$		╄			$\dashv$		'
	STANLEY COLLINS	40 00			×				100,610	100,	,610	l	14,781
		<u> </u>				$\Gamma$			,		_		
				+	+	+		+	<del>                                     </del>		$\top$	·	
		<del>                                     </del>	$\vdash$	+-	+	+	_	+	<del> </del>		$\dashv$	i	
		<u> </u>	<del> </del>	—	$\perp$	$\perp$	<u> </u>	↓_			$\dashv$		
		'		_								ı <u> </u>	
					$\vdash$				<u> </u>		$\Box$		
		-	<del>                                     </del>	+-	+	+	<del>                                     </del>	+	+		$\dashv$	I	
15.5	Sub-Total			Щ	Щ	Щ,	<u> </u> ▶	Щ.			┯┵		!
	Sub-Total						<b>-</b>	—			+		
	Fotal (add lines 1b and 1c)	•					<u> </u>	_	100,610	100,610	ə <del> </del>		14,781
2	Total number of individuals (including but of reportable compensation from the orga	t not limited to t				ve) v	who re	ceiv	red more than \$100	,000			
				—	—	—		—				Yes	No
3	Did the organization list any <b>former</b> office						-	-	· ·	mployee on		1 1	
	line 1a? If "Yes," complete Schedule J for			-	-	-					3	$\perp$	No
4	For any individual listed on line 1a, is the organization and related organizations graduated									he			ĺ
	individual		•		•	•	•	•			4	Yes	<b></b>
5	Did any person listed on line 1a receive of services rendered to the organization $^{7}If$ "									dual for	5		No
Se	ection B. Independent Contractors	ş			_	_		_			_		
1	Complete this table for your five highest of from the organization. Report compensation	compensated in									npens	sation	
		(A) business address		_	_	_		_	Descrip	(B) otion of services		(C) Compen	
				_	_	_							
											$\dashv$	<del>                                     </del>	
					_	_		_				<u> </u>	
												í	

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 ▶ 0

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

Form 990 (2016)					Page <b>10</b>
Part IX Statement of Functional E Section 501(c)(3) and 501(c)(4) organizations		lumns All other orga	ınızatıons must com	plete column (A)	
Check if Schedule O contains a res	sponse or note to any	line in this Part IX			🗆
Do not include amounts reported on line 7b, 8b, 9b, and 10b of Part VIII.	s 6b,	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic domestic governments See Part IV, line	organizations and 21	53,000	·		
<b>2</b> Grants and other assistance to domestic IV, line 22	individuals See Part				
<b>3</b> Grants and other assistance to foreign or governments, and foreign individuals Se and 16					
4 Benefits paid to or for members					
<b>5</b> Compensation of current officers, directo key employees	rs, trustees, and	107,791			
<b>6</b> Compensation not included above, to disk defined under section 4958(f)(1)) and persection 4958(c)(3)(B)					
7 Other salaries and wages		685,626			
8 Pension plan accruals and contributions ( (k) and 403(b) employer contributions)		37,727			
<b>9</b> Other employee benefits		135,705			
<b>10</b> Payroll taxes	[	59,009			
11 Fees for services (non-employees)					
a Management					
<b>b</b> Legal	<u> </u>	17,143			
c Accounting	F	20,240			
•		20,210			
d Lobbying	<u> </u>				
e Professional fundraising services See Pai	· · ·				
f Investment management fees	<b>⊢</b>	6,703			
g Other (If line 11g amount exceeds 10% of (A) amount, list line 11g expenses on Sci					
<b>12</b> Advertising and promotion					
13 Office expenses		107,509			
<b>14</b> Information technology					
<b>15</b> Royalties	Γ				
<b>16</b> Occupancy		138,863			
<b>17</b> Travel	🕇	110,392			
18 Payments of travel or entertainment experience federal, state, or local public officials .	enses for any	· ·			
19 Conferences, conventions, and meetings	📙	155,268			
20 Interest	· · · ·	,			
	+	1,972,458			
21 Payments to affiliates	· · ·				
22 Depreciation, depletion, and amortization	' · ·	53,003			
23 Insurance 24 Other expenses Itemize expenses not comiscellaneous expenses in line 24e If lin exceeds 10% of line 25, column (A) amo expenses on Schedule O )	e 24e amount	6,616			
a PUBLIC RELATIONS		113,991			
b PRESIDENT'S BALL EXPENS		95,621			
c PRINTING AND PHOTOGRAPH		70,704			
d BANK SERVICE CHARGES		62,623			
e All other expenses		186,331			
25 Total functional expenses. Add lines 1	through 24e	4,196,323			
26 Joint costs. Complete this line only if the reported in column (B) joint costs from a educational campaign and fundraising so	e organization combined	.,			
Check here >	(ASC 958-720)			1	1

	(A) Beginning of year		( <b>B</b> ) End of year
1 Cash-non-interest-bearing		1	
2 Savings and temporary cash investments	3,839,476	2	4,110,238
2 Diodges and grants resourable, not		2	

2,833,740

1.665.619

137,309

51,764

130.451

1,168,121

1.133.050

1.505.567

8.236.500

3,311,101

3,541,383

4.679.189

4,695,117

8.236.500

Form **990** (2016)

15.928

230,282

6

8

9

10c

11

12

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14

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22 23

24

25

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29

30

31

32

33

34

57.969

33.780

1,218,304

1.421.498

790.973

5.941

7,524,422

316.487

2,804,844

3,121,331

4.380.756

4,403,091

7.524.422

22.335

2	Savings and temporary cash investments	3,839,476	2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	156,481	4	
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part		5	

II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9)

10a

10b

voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net . . . .

Assets

Inventories for sale or use .

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

11

12

13

14

15

16

17

18

19

20

21

23

24

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Investments-program-related See Part IV, line 11

Other assets See Part IV, line 11 . . . .

Tax-exempt bond liabilities . . . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here 

and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

**Total assets.**Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

key employees, highest compensated employees, and disqualified

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

basis Complete Part VI of Schedule D

Intangible assets . . . . .

Accounts payable and accrued expenses

2c

3a

3b

Yes

No

Form 990 (2016)

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

### Additional Data

Software ID:

Software Version:

**EIN:** 31-4154020

Name: Columbus Association of Realtors

Form 990 (2016)

efile GRAPHIC print - DO NOT PROCESS SCHEDULE D

(Form 990)

As Filed Data -

DLN: 93493145008017

OMB No 1545-0047

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Open to Public Inspection

Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** Columbus Association of Realtors 31-4154020 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during 3 Aggregate value of grants from (during year) 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 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 conferring impermissible private benefit? ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 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 historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 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 Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > 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? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? □ No In Part XIII, 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), 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) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

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

Par	11111	Organizations Maintaining Co	llections of Art,	Histori	ical T	reas	ures, or	Other:	Similar A	ssets (c	ontinued)	
3		the organization's acquisition, accessic (check all that apply)	on, and other records	s, check	any of	the f	ollowing t	hat are a	sıgnıfıcant ı	use of its	collection	
а		Public exhibition		d		Loar	n or excha	ange prog	rams			
b		Scholarly research		е		Oth	er					
c		Preservation for future generations										
4	Provid Part )	de a description of the organization's co KIII	llections and explair	how the	ey furt	her th	ne organiz	ation's ex	empt purpo	se in		
5		g the year, did the organization solicit $\mathfrak c$ s to be sold to raise funds rather than t							ılar	☐ Ye	s 🗆 I	No
Pai	rt IV	Escrow and Custodial Arrange Complete if the organization ans X, line 21.		orm 990	), Part	:IV,	line 9, oi	r reporte	d an amou	ınt on F	orm 990	, Part
1a		e organization an agent, trustee, custod ded on Form 990, Part X?	ian or other interme	diary for	contri	butio	ns or othe	er assets i	not	☐ Ye	s 🗆 I	No
ь	If "Y∈	es," explain the arrangement in Part XII	I and complete the f	ollowing	table				А	mount		_
С		ining balance					ĺ	1c				
d	Addıt	ions during the year						1d				_
е	Dıstrı	butions during the year						1e				
f	Endın	g balance						1f				
2a	Did th	ne organization include an amount on Fo	orm 990, Part X, line	21, for	escrov	v or c	ustodial a	ccount lia	bility?	☐ Ye	s 💷	No
b	If "Ye	s," explain the arrangement in Part XII	I Check here if the	explanat	ion ha	s beei	n provided	d ın Part 🕽	(III		. 🗆	
Pa	rt V	Endowment Funds. Complete i	<del></del>									
4 -	D		(a)Current year		rior yea	$\overline{}$	(c)Two ye	ears back	(d)Three yea		(e)Four yea	
	-	ing of year balance	22,335			3,856 5,568		27,728 22,730		25,527 12,340		27,090 5,346
		outions	20,033		۷.	3,366		22,730		12,340		
		restment earnings, gains, and losses or scholarships										
		expenditures for facilities										
٠		ograms	26,440		2	7,089		26,602		10,139		6,909
f	Admını	strative expenses										
g	End of	year balance	15,928		2:	2,335		23,856		27,728		25,527
2 a		de the estimated percentage of the curr	ent year end balanc	e (line 1	g, colu	mn (a	a)) held a	S				
b		anent endowment ►										
c			000 %									
·		percentages on lines 2a, 2b, and 2c show										
3a	Are tl	here endowment funds not in the posse	·	ation tha	t are h	eld a	nd admını	istered foi	the		Yes	No
	_	nrelated organizations								3a	i(i) Yes	1
	(ii) r	elated organizations								3a	(ii)	No
b		es" on 3a(II), are the related organization	•			۱۶.				3	b	
4		ribe in Part XIII the intended uses of the		owment	funds							
Pai	rt VI	Land, Buildings, and Equipme Complete if the organization ansi		-m 000	Dart	T\ /	no 115	Coo Form	~ 000 Da	+ V line	. 10	
	Descri	ption of property (a) Cost or of (investm	ther basis (b)Cos	t or other				umulated d			d)Book valu	ie
	Land				1	16,537	7					116,537
	Buildin					91,789	_		1,011,513			880,276
		old improvements				72,110	_		132,371			39,739
		nent				53,304	_		521,735			131,569
	Other					•	+		,			• •
		lines 1a through 1e (Column (d) must e	I equal Form 990, Part	X, colui	mn (B)	), line	10(c))	1	<b>&gt;</b>			1,168,121

Part VII	Investments—O See Form 990, Pa	rt X, lıne	12.			ete	ıf th	ne d	orga		wered 'Yes' on		
	(a) Description of security or category (including name of security)									<b>(b)</b> Book value	Cos	(c)Method of v st or end-of-year	
(1)Financial (2)Closely-ha (3)Other	derivatives eld equity interests		:			:			:	1,505,567		С	
(A)													
(B)													
(C)													
(D)													
(E)													
(F)													
(G)													
(H)													
	(b) must equal Form 99									1,505,567			
Part VIII	Investments—P See Form 990, Pa (a) Descrip	art X, line	13.		Comp	let	e if	the		<b>b)</b> Book value		(c) Method of vector of ve	valuation
(1)												st of end-or-year	market value
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
	(b) must equal Form 99							J 1V.	<b>•</b>	- F 000 D	and TV lines 44 d	Can Farra 000 F	Doub V. Line 1E
Part IX	Other Assets. Co	mpiete ir t	ne org		on ar				es or	1 Form 990, P	art IV, line IId	See Form 990, F	(b) Book value
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)	nn (b) must equal Fo	rm 000 B	2++ V .	col (P)	lino	1 =	1						
	Other Liabilities	Complet	e ıf th					ansv	were		orm 990, Part		
1.	See Form 990, Pa	rt X, line Descriptio		ability						(b) E	Book value		
(1) Federal ır	ncome taxes												
(2)													
(3)													
(4)													
(5)													
(6)												-	
(7)												-	
(8)												_	
(9)												_	
	ı (b) must equal Form 99	90, Part X, co	ol (B) lu	ne 25 )						<u> </u> ▶		-	
2. Liability fo	r uncertain tax positi	ons In Par	t XIII,	, provi	de the					tnote to the o			
organization:	s liability for uncertai	ıı tax posit	ions u	nuer F	11V 48	, (Α	ر د	/ <del>4</del> U	, cn	eck here if the	text of the foot	mote has been p	ioviueu III Part XIII 💌

Schedule D (Form 990) 2015

	chedule D (Form 990) 2015				
Supplemental Information (continued)	Part XIII Supplemental Info				
Return Reference Explanation	Return Reference				

Schedule D (Form 990) 2016

#### **Additional Data**

#### Software ID:

Software Version:

**EIN:** 31-4154020

Name: Columbus Association of Realtors

Explanation

Supplemental Information
Return Reference

Part V, Line 4	COLUMBUS ASSOCIATION OF REALTORS is a donor to an endowment fund, which is held by and rep orted as an asset of the Columbus Foundation. The Organization is unable to receive funds from the endowment fund, however, they are able to help direct the uses of the fund throug. In the Columbus Association of REALTORS Foundation Advisory Board. During the years ended D ecember 31, 2016 and 2015, the Organization had not recognized income from the endowment. The value of the fund was \$264,178 and \$276,271 as of December 31, 2016 and 2015, respectively. The ORGANIZATION HAS SIX SEPARATE FUNDS FOR SIX DISTINCT PURPOSES. THESE FUNDS INCLU. DE THE AFFORDABLE HOUSING FUND, THE BUILDER REALTOR FUND, THE POST LICENSE GRANT FUND, the Young Professionals Network fund, Commercial Investment Division and National association of realtors Foreclosure fund. AFFORDABLE HOUSING FUND. THE PRIMARY PURPOSE OF THE AFFORD. ABLE HOUSING FUND IS TO PAY FOR THE SUPERSUNDAY AFFORDABLE HOUSING OPEN HOUSE EVENT. THIS EVENT IS HELD SEMIANNUALLY AND IS FUNDED THROUGH PARTICIPANT FEES AND CONTRIBUTIONS FROM LENDERS BUILDER REALTOR FUND. THE PRIMARY PURPOSE OF THE BUILDER REALTOR FUND IS TO PROVIDE SCHOLARSHIPS FOR STUDENTS WHO ARE PURSUING A REAL-ESTATE EDUCATION DEGREE. THE SCHOLARS HIPS ARE GENERALLY IN THE AMOUNT OF \$500. THE FUND RECEIVES MONIES FROM FEES GENERATED BY BUILDE. STORM SHOULD BE ACHIEVED AND STANDARD FOR THE BUILDE. RS' PREVIEW SHOW, HELD EACH JANUARY POST LICENSE GRANT FUND. THE PRIMARY PURPOSE OF THE POST LICENSE GRANT FUND IS TO PROVIDE MULTICULTURAL, POST-LICENSING ASSISTANCE TO NEW REAL TORS. THESE GRANTS ARE \$500. TO HELP WITH START-UP COSTS AND ARE AWARDED SEMIANNUALLY. Youn g Professionals Network-funds are used to sponsor events of the young professionals networ k for realtors. Commercial Investment Division-this fund is used to sponsor an awards cere money to recognize outstanding real estate professionals in the region. National Association of Fealtors Forclosure Fund-this is a grant from the national association of real
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Supplemental Information	
Return Reference	Explanation
Part X, Line 2	Fin 48 Footnote Generally accepted accounting principles required the Organization to eva luate the level of uncertainty related to whether tax positions taken will be sustained up on 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 accompaning balance sheet along with any associated 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 Organization believes that none of the tax positions taken would materially impact the financial statements and no such liabilities have been recorded.

upplemental Information						
Return Reference	Explanation					
Part XI, Line 2d - Other Adjustments	NET INCOME EARNED BY SUBSIDIARIES RENTAL EXPENSES NETTED WITH RENTAL INCOME ON FORM 990					

Supplemental Information	
Return Reference	Explanation
Part XI, Line 4b - Other Adjustments	BUILDING EXPENSES NETTED WITH BUILDING INCOME ON F/S, NOT 990 CONTINUING EDUCATION EXPENSE S NETTED ON FINANCIAL STATEMENTS, NOT 990 MEMBER SERVICE CENTER EXPENSES NETTED ON FINANCI AL STATEMENTS, NOT 990 IN CONTRACT MAGAZINE EXPENSES NETTED ON FINANCIAL STATEMENTS, NOT 9 90 RESTRICTED FUNDS INCOME NETTED WITH RESTRICTED FUNDS EXPENSE ON F/S, NOT 99 NET GAIN ON INVESTMENTS

Supplemental Information	
Return Reference	Explanation
Part XII, Line 2d - Other Adjustments	MEMBER SERVICE CENTER EXPENSES NETTED ON FINANCIAL STATEMENTS, NOT 990 CONTINUING EDUCATIO N EXPENSES NETTED ON FINACIAL STATEMENTS, NOT 990 IN CONTRACT MAGAZINE EXPENSES NETTED ON FINANCIAL STATEMENTS, NOT 990

Supplemental Information	
Return Reference	Explanation
Part XII, Line 4b - Other Adjustments	BUILDING EXPENSES NETTED WITH BUILDING INCOME ON F/S, NOT 990 RESTRICTED FUNDS INCOME NETT ED WITH RESTRICTED FUNDS EXPENSE ON F/S, NOT 99 RENTAL EXPENSES NETTED WITH RENTAL INCOME ON FORM 990

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efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -					DLN	N: 93493145008017
Schedule I (Form 990)  Department of the		Governments a	Other Assistance to Organizations,  and Individuals in the United States  Ition answered "Yes," on Form 990, Part IV, line 21 or 22.  Attach to Form 990.				OMB No 1545-0047  2016  Open to Public	
Treasury Internal Revenue Service	► Inforr	nation about Schedule	I (Form 990) and its i		w.irs.gov/form990.			Inspection
Name of the organization Columbus Association of Realtors						Emplo	yer ıdentifica	ition number
						31-41	54020	
Part I General Inform	ation on Grants	and Assistance						
<ol> <li>Does the organization mail the selection criteria used</li> <li>Describe in Part IV the org</li> </ol>	to award the grants	or assistance?				e, and		☑ Yes ☐ No
		estic Organizations ar can be duplicated if add		nts. Complete if the oi	rganization answered "Yes"	on Form 990, F	art IV, line	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descri non-cash as		(h) Purpose of grant or assistance
(1) COLUMBUS HOUSING PARTNERSHIP INC 562 EAST MAIN STREET COLUMBUS, OH 43215	31-1208260	501(C)(3)	28,000					BUILDING VIBRANT COMMUNITIES
(2) GREATER COLUMBUS CHAMBER OF COMMERCE 150 SOUTH FRONT STREET SUITE 200 COLUMBUS, OH 43219	31-4152950	501(C)(3)	25,000					BRINGING BUSINESS TO THE COLUMBUS REGION
<ul><li>2 Enter total number of sectors</li><li>3 Enter total number of other</li></ul>		-					<u> </u>	2
For Paperwork Reduction Act Notice			<u> </u>	Cat No 50055	, , , , , , , , , , , , , , , , , , ,			edule I (Form 990) 2016

Schedule I (Form 990) 2016						Page <b>2</b>
		Domestic Individuational space is needed	als. Complete If the org	ganization answered "Yes	on Form 990, Part IV, line 22	
(a) Type of grant or	•	(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
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
Part IV Suppleme	ental Informati	on. Provide the inf	ormation required in	Part I, line 2, Part III	, column (b), and any other ad	ldıtıonal ınformatıon.
Return Reference	Explanati	on				
Part I, Line 2		THE COLUMBUS ASSOCIATION OF REALTORS MAKES CONTRIBUTIONS TO OTHER NON-PROFIT ORGANIZATIONS with purposes similar to the COLUMBUS ASSOCIATION OF REALTORS TO FURTHER THE EXEMPT PURPOSE OF THE COLUMBUS ASSOCIATION OF REALTORS				

#### Additional Data

SUITE 200

COLUMBUS, OH 43219

#### **EIN:** 31-4154020 Name: Columbus Association of Realtors Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation

Software ID: Software Version:

if applicable organization cash (book, FMV, appraisal, grant or government assistance other)

(q) Description of

non-cash assistance

(h) Purpose of grant

or assistance

COMMUNITIES

REGION

BUILDING VIBRANT

BRINGING BUSINESS

TO THE COLUMBUS

31-1208260 28,000

COLUMBUS HOUSING 501(C)(3)

PARTNERSHIP INC.

562 EAST MAIN STREET COLUMBUS, OH 43215

31-4152950

25,000 501(C)(3)

CHAMBER OF COMMERCE 150 SOUTH FRONT STREET

GREATER COLUMBUS

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493145008017 **Compensation Information** OMB No 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest 2016 Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at Open to Public Department of the Treasury www.irs.gov/form990. Inspection Internal Revenue Service **Employer identification number** Name of the organization Columbus Association of Realtors 31-4154020 Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on 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 Personal services (e g, maid, chauffeur, chef) Discretionary spending account If any of the boxes in 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 **1**b Yes 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes 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 establish compensation of the CEO/Executive Director, but explain in Part III  $\overline{\mathbf{v}}$ Compensation committee Written employment contract Independent compensation consultant Compensation survey or study  $\overline{\mathbf{v}}$ Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a No 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? No 4c Participate in, or receive payment from, an equity-based compensation arrangement? No If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 5 compensation contingent on the revenues of The organization? 5a 5b Any related organization? If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 6 compensation contingent on the net earnings of 6a The organization? Any related organization? 6b If "Yes," on line 6a or 6b, describe in Part III 7 For persons listed on 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 on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2016 Cat No 50053T

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

For each individual whose compensation must be reported on 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

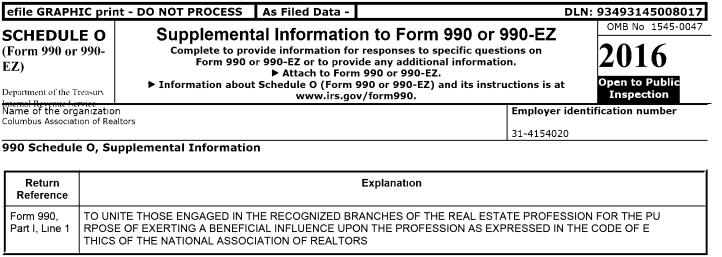
(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 STANLEY COLLINSCEO	(i)	100,610	0	0	7,600	7,181	115,391	0
	(ii)	100,610	0	0	0	0	100,610	0
See Additional Data Table								
	+							

			Schodule	1 (Form 990) 2016

Schedule J (Form 990) 2016	Page <b>3</b>						
Part III Supplemental Inform	Part III Supplemental Information						
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information						
Return Reference	Explanation						
,	UNDER CERTAIN CIRCUMSTANCES, THE COLUMBUS ASSOCIATION OF REALTORS REIMBURSES TRAVEL EXPENSES FOR THE SPOUSES OF THE PRESIDENT, PRESIDENT ELECT, AND THE CHIEF EXECUTIVE OFFICER NO AMOUNT IS INCLUDED IN WAGES WHERE TRAVEL REIMBURSEMENTS ARE FOR SPOUSES HAVING A BUSINESS PURPOSES IN CONNECTION WITH THE TRAVEL THE BOARD OF DIRECTORS OF THE COLUMBUS ASSOCIATION OF REALTORS APPROVED MEMBERSHIP DUES TO THE ATHLETIC CLUB OF COLUMBUS FOR THE CEO THIS MEMBERSHIP IS USED FOR BUSINESS PURPOSES, INCLUDING BOARD MEETINGS AND ENTERTAINING INDIVIDUALS WITH WHICH THE ORGANIZATION HAS A BUSINESS PURPOSE TO THE EXTENT THAT A MEMBERSHIP IS USED FOR PERSONAL						

PURPOSES, THE RESPECTIVE EMPLOYEE IS REQUIRED TO REIMBURSE THE ORGANIZATION FOR ANY PERSONAL USE OF THE CLUB MEMBERSHIP.

Schedule J (Form 990) 2016



Return Reference	Explanation
form 990, part III, line 1, description of organization mission	The Columbus Association of REALTORS is a local level, not-for-profit trade association. Founded in 1908, COLUMBUS ASSOCIATION OF REALTORS is comprised of more than 7,000 real estate professionals engaged in residential sales and leasing, commercial sales and leasing, property management, appraisal, consultation, real estate syndication, and land development. The territorial jurisdiction of CAR as a member of the National Association of REALTORS is Fayette, Franklin, Madison, Morrow, Pickaway and Union counties in Ohio COLUMBUS ASSOC IATION OF REALTORS provides leadership for the REALTOR community by protecting the interests of its members, promoting their value to the real estate consumer, setting high standar ds for professional practice, and advocating private property rights. Its mission is accomplished through the enforcement of the Code of Ethics, committee and general membership me etings, a monthly magazine provided to the members, other communications, and education se minars.

Reference	Explanation
Form 990, Part VI,	THE COLUMBUS ASSOCIATION OF REALTORS OFFERS TWO CLASSES OF MEMBERSHIP, REALTOR MEMBERSHIP AND AFFILIATE/SUSTAINING MEMBERSHIP THERE ARE FOUR TYPES OF REALTOR MEMBERSHIPS. INCLUDIN
· ·	G DESIGNATED REALTOR, REALTOR, REALTOR APPRAISER, AND INSTITUTE AFFILIATE. THE REALTOR MEM BERSHIP IS LIMITED TO INDIVIDUALS WHO HAVE A REAL ESTATE LICENSE OR APPRAISER LICENSES. TH

Section A, line 6

G DESIGNATED REALTOR, REALTOR APPRAISER, AND INSTITUTE AFFILIATE. THE REALTOR MEM BERSHIP IS LIMITED TO INDIVIDUALS WHO HAVE A REAL ESTATE LICENSE OR APPRAISER LICENSES. THERE ARE THREE TYPES OF AFFILIATE/SUSTAINING MEMBERSHIPS, INCLUDING CORPORATE AFFILIATE, IN DIVIDUAL AFFILIATE, AND SUSTAINING. THE AFFILIATE/SUSTAINING MEMBERSHIP IS AVAILABLE TO IN DIVIDUALS WHO DO NOT HAVE A REAL ESTATE OR APPRAISER LICENSES BUT HAVE AN INTEREST IN THE REAL ESTATE INDUSTRY.

Return Explanation

line 7a

Form 990, THE MEMBERS OF THE BOARD OF DIRECTORS ARE ELECTED BY THE GENERAL MEMBERSHIP Section A.

Return Explanation
Reference

Form 990,
Part VI,
Section A,
Inne 7b

THE ONLY ACTION OR DECISION OF THE BOARD OF DIRECTORS THAT REQUIRES APPROVAL BY THE GENERA
L MEMBERSHIP IS THE DECISION TO CEASE MEMBERSHIP IN THE OHIO ASSOCIATION OF REALTORS AND T

990 Schedule O, Supplemental Information

Return
Reference

Explanation

Form 990, Part VI,	THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM PRIOR TO BEING FILED, THE FORM 990 IS REVIEWED BY THE CEO AND THE BUDGET, FINANCE & INVESTMENT COMMITTEE THE BUDGET, FINANC
Section B,	E & INVESTMENT COMMITTEE IS COMPRISED OF THE OFFICERS, SOME MEMBERS OF THE BOARD OF DIRECT
line 11b	ORS, AND ADDITIONAL MEMBERS-AT-LARGE OF THE ASSOCIATION A COPY OF THE FORM 990 IS PROVIDE
	D TO THE FULL BOARD PRIOR TO FILING

Return Explanation
Reference

Form 990,	EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH BOARD-DELEGATED POWERS SHA
Part VI,	LL ANNUALLY SIGN A STATEMENT AFFIRMING THAT SUCH PERSON HAS RECEIVED A COPY OF THE CONFLI
Section B,	CTS OF INTEREST POLICY, READ AND UNDERSTANDS THE POLICY, AGREED TO COMPLY WITH THE POLICY,
line 12c	AND UNDERSTANDS THAT THE COLUMBUS ASSOCIATION OF REALTORS IS A NOT-FOR-PROFIT ORGANIZATIO
	N AND THAT IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTI
	VITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PLIRPOSES

Reference	Explanation
Form 990, Part VI, Section B, Iine 15a	THE PROCESS FOR DETERMINING THE COMPENSATION OF THE CEO STARTS WITH THE SELECTION OF THE C EO EVALUATION COMMITTEE, APPOINTED BY THE PRESIDENT AND CONSISTING OF THE FOLLOWING PRESIDENT, PRESIDENT-ELECT, TREASURER, SECRETARY, 3 DIRECTORS, 2 IMMEDIATE PAST PRESIDENTS, STE ERING COMMITTEE CHAIRMAN, AND 1 ELECTED DIRECTOR THIS CEO EVALUATION COMMITTEE THEN COMPLETES EVALUATION FORMS CONCERNING THE CEO THE CEO ALSO COMPLETES A SELF-ASSESSMENT FORM THE COMMITTEE MEMBERS THEN REVIEW AND DISCUSS THE CEO'S PERFORMANCE BASED ON PERSONAL KNOWLEDGE AND THE COMPLETED EVALUATIONS THE COMMITTEE THEN CREATES AN OVERALL EVALUATION AND PREPARES A RECOMMENDATION REGARDING ANY COMPENSATION ADJUSTMENT TO BE GIVEN TO THE CEO ANY SUGGESTED COMPENSATION INCREASE IS SUBJECT TO THE APPROVAL OF THE OFFICERS OF THE COLUMBUS ASSOCIATION OF REALTORS AND FINALLY THE BOARD OF DIRECTORS AS A WHOLE THERE ARE NO OTHE ROFFICERS OR KEY EMPLOYEES OF THE ORGANIZATION THAT RECEIVE COMPENSATION AS SUCH, QUESTION 15B ON PAGE 6 OF THE FORM 990 HAS BEEN ANSWERED "NO"

Funlametics.

Return Explanation
Reference

line 19

Form 990,
Part VI,
Section C,

THE COLUMBUS ASSOCIATION OF REALTORS MAKES THEIR GOVERNING DOCUMENTS, CONFLICT OF INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

990 Schedule O, Supplemental Information Return Explanation Reference

Form 990,
Part XI, line

Return Explanation
Reference

FORM 990,	THE BUDGET, FINANCE & INVESTMENT COMMITTEE SERVES AS THE AUDIT COMMITTEE FOR THE BOARD OF
PART XI,	DIRECTORS THE BUDGET, FINANCE & INVESTMENT COMMITTEE RECEIVES AND REVIEWS THE AUDITED FIN
LINE 2C	ANCIAL STATEMENTS BEFORE THEY ARE OFFICIALLY RECEIVED FOR APPROVAL BY THE BOARD OF DIRECTO
	RS THE PROCESS FOR OVERSEEING THE AUDIT AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NO
	T CHANGED DURING THE TAX YEAR

Return Explanation

SCHEDULE	THE COLUMBUS ASSOCIATION OF REALTORS, INC. AND THE MULTIPLE LISTING SERVICES OF THE COLUMB
R, PART V,	US BOARD OF REALTORS, INC. SHARE PAID EMPLOYEES. BOTH THE COLUMBUS ASSOCIATION OF REALTORS
LINE 2(2)	, INC_AND THE MULTIPLE LISTING SERVICES OF COLUMBUS BOARD OF REALTORS, INC_SEPARATELY PA
	Y FOR THE FAIR MARKET VALUE OF THE SERVICES PROVIDED BY THE EMPLOYEES

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493145008017 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships 2016** (Form 990) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** Columbus Association of Realtors 31-4154020 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I **(f)** Direct controlling (a)
Name, address, and EIN (if applicable) of disregarded entity **(b)** Primary activity (c) Legal domicile (state (d) (e) End-of-year assets Total income or foreign country) entity

Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	ns Complete if the orga	nization answered '	"Yes" on Form 990,	Part IV, line 34 be	cause it had one or	more	
(a) Name, address, and EIN of related organization	<b>(b)</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	Section (13) con entit	512(b) ntrolled
(1)CENTRAL OHIO REALTORS POLITICAL ACTION COMMITTEE 2700 AIRPORT DRIVE	LOCAL POLITICAL ACTION COMMITTEE	ОН	527	N/A	N/A	Yes	No No
COLUMBUS, OH 43219 31-1721082							<u>                                     </u>
							<u></u>
For Paperwork Reduction Act Notice, see the Instructions for Form 9	990.	Cat No 5013!			Schedule R (Form	990) 20	16

(a) Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predomir Income(rel unrelate excluded tax und sections 5 514)	ated, total incor ed, from er 512-		Olsprop alloca	rtionate	(i) Code V-UB amount in b 20 of Schedule K (Form 1065	Gen mai pai 1	(j) neral or naging rtner?	( <b>k)</b> Percentag ownershi
								163	140		168	3 110	
											+		
							swered "Yes	on F	orm 99	<u> </u> 90, Part I'	/, line	e 34	
Part IV Identification of Related Organization because it had one or more related organization  (a)  Name, address, and EIN of related organization		a corporation (		st during			swered "Yes  (f)  Share of total Income	Share	(g) of end- year assets	of- Pero	/, line (h) entage iership	e s	13) control entity?
because it had one or more related of (a)  Name, address, and EIN of	rganizations treated as	a corporation (	on or trus (c) egal micile or foreign	Dire COLU ASSO	(d) ect controlling	(e) Type of entity (C corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Pero	( <b>h)</b> entage	e s	ection 512 13) control entity? Yes N
Name, address, and EIN of related or related or related or related or related or related or related organization  1)  ULTIPLE LISTING SERVICE OF THE COLUMBUS BOARD OF EALTORS INC  700 AIRPORT DRIVE OLUMBUS, OH 43219	rganizations treated as  (b)  Primary activity	a corporation (	on or trus  (c)  egal  micile  or foreign  intry)	Dire COLU ASSO	the tax yea  (d) ect controlling entity  JMBUS DCIATION OF	(e) Type of entity (C corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Pero	( <b>h)</b> entage iership	e s	ection 512 13) control entity? Yes N
Name, address, and EIN of related or related or related or related or related or related organization  1)  ULTIPLE LISTING SERVICE OF THE COLUMBUS BOARD OF EALTORS INC  700 AIRPORT DRIVE OLUMBUS, OH 43219 1-0809177  2) REAL ESTATE WEEKLY INC	rganizations treated as  (b)  Primary activity	a corporatio	on or trus  (c)  egal  micile  or foreign  intry)	Dire COLU ASSO REAL COLU	the tax yea  (d) ect controlling entity  JMBUS DCIATION OF TORS  JMBUS DCIATION OF	(e) Type of entity (C corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of-Personal	( <b>h)</b> entage iership	e s	ection 512 13) control entity?  Yes No
Name, address, and EIN of related or related or related or related or related or related organization  1)  ULTIPLE LISTING SERVICE OF THE COLUMBUS BOARD OF EALTORS INC  700 AIRPORT DRIVE 0LUMBUS, OH 43219 1-0809177  2) REAL ESTATE WEEKLY INC  700 AIRPORT DRIVE 0LUMBUS, OH 43219	Primary activity  LISTING SERVICE	a corporatio	on or trus c) ggal micile or foreign intry)	Dire COLU ASSO REAL COLU	the tax yea  (d) ect controlling entity  JMBUS DCIATION OF TORS	(e) Type of entity (C corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of-Personal	(h) entage ership	e s	ection 512 13) control entity?
Name, address, and EIN of related or related or related or related or related or related organization  1)  ULTIPLE LISTING SERVICE OF THE COLUMBUS BOARD OF EALTORS INC  700 AIRPORT DRIVE 0LUMBUS, OH 43219 1-0809177  2) REAL ESTATE WEEKLY INC  700 AIRPORT DRIVE 0LUMBUS, OH 43219	Primary activity  LISTING SERVICE	a corporatio	on or trus c) ggal micile or foreign intry)	Dire COLU ASSO REAL COLU	the tax yea  (d) ect controlling entity  JMBUS DCIATION OF TORS  JMBUS DCIATION OF	(e) Type of entity (C corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of-Personal	(h) entage ership	e s	ection 512 13) control entity? Yes Ni
Decause it had one or more related of (a)  Name, address, and EIN of related organization  1)  ULTIPLE LISTING SERVICE OF THE COLUMBUS BOARD OF EALTORS INC  700 AIRPORT DRIVE OLUMBUS, OH 43219 1-0809177  2) REAL ESTATE WEEKLY INC  700 AIRPORT DRIVE OLUMBUS, OH 43219	Primary activity  LISTING SERVICE	a corporatio	on or trus c) ggal micile or foreign intry)	Dire COLU ASSO REAL COLU	the tax yea  (d) ect controlling entity  JMBUS DCIATION OF TORS  JMBUS DCIATION OF	(e) Type of entity (C corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of-Personal	(h) entage ership	e s	ection 512 13) control entity?  Yes No
Decause it had one or more related of (a)  Name, address, and EIN of related organization  1)  ULTIPLE LISTING SERVICE OF THE COLUMBUS BOARD OF EALTORS INC  700 AIRPORT DRIVE OLUMBUS, OH 43219 1-0809177  2) REAL ESTATE WEEKLY INC  700 AIRPORT DRIVE OLUMBUS, OH 43219	Primary activity  LISTING SERVICE	a corporatio	on or trus c) ggal micile or foreign intry)	Dire COLU ASSO REAL COLU	the tax yea  (d) ect controlling entity  JMBUS DCIATION OF TORS  JMBUS DCIATION OF	(e) Type of entity (C corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of-Personal	(h) entage ership	e s	ection 512 13) control entity?  Yes No
Decause it had one or more related of (a)  Name, address, and EIN of related organization  L)  ULTIPLE LISTING SERVICE OF THE COLUMBUS BOARD OF EALTORS INC  700 AIRPORT DRIVE DLUMBUS, OH 43219 1-0809177  2) REAL ESTATE WEEKLY INC  700 AIRPORT DRIVE DLUMBUS, OH 43219	Primary activity  LISTING SERVICE	a corporatio	on or trus c) ggal micile or foreign intry)	Dire COLU ASSO REAL COLU	the tax yea  (d) ect controlling entity  JMBUS DCIATION OF TORS  JMBUS DCIATION OF	(e) Type of entity (C corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of-Personal	(h) entage ership	e s	ection 512 13) control entity? Yes Ni
Decause it had one or more related of  (a)  Name, address, and EIN of related organization  1)  ULTIPLE LISTING SERVICE OF THE COLUMBUS BOARD OF EALTORS INC  700 AIRPORT DRIVE OLUMBUS, OH 43219 1-0809177	Primary activity  LISTING SERVICE	a corporatio	on or trus c) ggal micile or foreign intry)	Dire COLU ASSO REAL COLU	the tax yea  (d) ect controlling entity  JMBUS DCIATION OF TORS  JMBUS DCIATION OF	(e) Type of entity (C corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of-Personal	(h) entage ership	e s	ection 512 13) control entity?  Yes N

Schedule K (Form 990) 2016			Pa	ge <b>3</b>
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 3	36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Yes	No
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, or(iv) rent from a controlled entity		1a	Yes	
<b>b</b> Gift, grant, or capital contribution to related organization(s)		<b>1</b> b		No
c Gift, grant, or capital contribution from related organization(s)		1c		No
d Loans or loan guarantees to or for related organization(s)		1d		No
e Loans or loan guarantees by related organization(s)		1e		No
f Dividends from related organization(s)		1f		No
g Sale of assets to related organization(s)		<b>1</b> g		No
h Purchase of assets from related organization(s)		1h		No
i Exchange of assets with related organization(s)	ı	1i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)		1j		No
k Lease of facilities, equipment, or other assets from related organization(s)		1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)		11		No
m Performance of services or membership or fundraising solicitations by related organization(s)		1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1n		No
o Sharing of paid employees with related organization(s)		10	Yes	
p Reimbursement paid to related organization(s) for expenses		<b>1</b> p		No
		4 -		B1 -

j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	10	Yes	
p Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No
q Reimbursement paid by related organization(s) for expenses	<b>1</b> q		No
r Other transfer of cash or property to related organization(s)	1r		No

Schedule R (Form 990) 2016

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

<b>1</b>													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	or	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		7	<b>(k)</b> Percentage ownership
İ		'	514)	Yes	No	t i	1	Yes	No		Yes	No	
				_						Schedul	e R (Form	1 990	0) 2016

