Region/Chapter Financial Information Form Group Return Form 990

Fiscal Year Ending June 30, 2014

Name of Region/Chapter	Great Lakes/Greater	Columbus Tax/EIN#	23-7148522
Assets, Liabil	CASH BASIS - DO NOT INCLUE	DE RECEIVABLES AND PAYABLES "Beginning of 7/1/2013	"End of Year" <u>6/30/2014</u>
Cash:			
Un-deposited	Funds	\$ 160.00	\$ 160.00
Non-Interest Bearing Acco	unts	\$ 22,817.29	\$ 21,741.98
Interest Bear (CD's, Money	ng Accounts Market, etc.)		
	Total Cash	\$ 22,977.29	\$ 21,901.98
Other Assets:			
Furniture & E	quipment	<u> </u>	
Inventory			
Investments (Attach Detai	(Stocks and Bonds) I Schedule)		
Other (Please Description:	e describe)		
(1) Total Assets:		\$ 22,977.29	\$ 21,901.98
Liabilities (Exampl 1 2	e: Outstanding Loan)		
(2) Total Liabilitie	es:		
(3) Net Worth (1 I	ess 2):	Y* \$ 22,977.29	X * \$ 21,901.98

(Column 1)	(Column 2)

(*) Beginning year amounts must match last years ending numbers.

Revenues and Expenses

REVENUES: Cash basis - Do Not Include Accounts Receivable

Contributions, Grants* (Donation from AIEF, Red Cross, etc.)

Provide the following information for any contributions or grants received of \$5000 or more.

	Name	Address		Amount
	hip Dues and As	sessments	\$ 1,280.00	
Interest				
Dividends	3			
Seminars	and Meetings		\$ 13,255.12	
Special P	rojects			
Newslette	er Subscriptions			
	ng Revenue			
Other Re	venues			
(1) Total Revenue		ot Include Accounts Payable	\$14,535.12	
Contribut	ions, Grants* <i>(Do</i>	nation to AIEF, Red Cross, etc.)	\$ 180.03	
Accountir	•			
Legal Fee	-			
Printing a	nd Postage			
Supplies			\$ 16.72	
Travel			\$ 173.85	
Dues				
Seminars	and Meetings		\$ 9,137.42	
Special P	rojects			
Library				
Other (De	escribe)		\$ 6,102.41	

6161 Chapter Assessment \$770.00, 6350 Meals and Entertainment \$396.75 6360 Conference Costs \$3,575.10, 1031 Bank Service Charge \$353.57, 6580 Spring Seminar Refund \$447.00, 6670 Promotional \$355.10, 6770 Advertising \$204.89,

(2) Total Expenses – B:

\$ 15,610.43

*Provide the following information for any contributions or grants paid in excess of \$5000. These items should not include board, member, speaker gifts, awards, etc.

Name of Recipient	<u>Address</u>	Amount	Type of Contribution (donation, scholarhips, etc.)	Charity Status (501c3, etc.)	EIN

Line 3 - Line 4 =		\$0.00	Must equal \$0
Change		-\$1,075.31	C
"Beginning of Year" – Y		\$22,977.29	
"End of Year" – X		\$21,901.98	
(4) Net Worth (From page 1 line 3)			
(3) Net Revenue (line 1 less line 2)*	C = (A - B)	\$1,075.31 	С

*Net Revenue for the year (line 3 above) must agree with the change in Net Worth in line #4

Prepared By:	Kevin Gartrell
Region/Chapter Title:	Great Lakes/Greater Columbus ARMA Chapter Treasurer
Daytime Phone:	(614)584-7314 Fax Number:
E-mail:	KEVIN.G.1@BWC.STATE.OH.US
Signature:	Kevin Hartrell (e-signature accepted*)
Date:	07/19/2014

* - **NOTE:** Please see the 990 Instruction Letter on the Chpater Operations e-Handbook for directions on how to ensure that you are properly submitting this form to ARMA International HQ.

www.arma.org/leadership/ChapterAdmin/990form2.aspx

1. Total number of employees	0
2. Total number of volunteers	11
3. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office?	No
4. Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year?	No
5. Did the organization provide a grant or other assistance to an officer, director, trustee, key employee or substantial contributor, or to a person related to such an individual?	No
6. Was the organization a party to a business transaction with one of the following parties:	
A. A current or former officer, director, truste, or key employee?	No
B. A family member of a current or former officer, director, trustee, or key employee? C. An entity of which a current or former officer, director, trustee or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner?	No No
7. Provide the number reported in box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns, filed for the 2012 calendar year.	0
8. Provide the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the 2012 calendar year.	0
9. Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?10. At any time during the calendar year, did the organization have an interest in, or a	No
signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If yes, enter the name of the foreign country.	No
Foreign Country:	e 2 3 4 HALI INGING Windowsking S
11. Did the organization solicit any contributions that were not tax deductible?	No
A. If yes, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A
12. Number of voting members of the governing body	11
13. Number of voting members that are independent	0
14. 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?	No
15. Does the organization have members or stockholders?	No
16. Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	No
17. Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	Yes
18. Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	No
19. Did the organization become aware during the year of a material diversion of the organization's assets?	No

20. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	Yes
A. The governing body?	Yes
B. Each committee with authority to act on behalf of the governing body?	Yes
21. Was a copy of the Form 990 provided to the organization's governing body before i was filed?	t Yes
A. Describe the process, if any, the organization uses to review the Form 990. The President, Vice President, and Treasurer meet to review the financial statements (QuickBooks) for the year. Make sure the numbers on the 990 Form are correct before ARMA International.	
22. Does the organization have a written conflict of interest policy?	No
If yes:	
A. Are officers, directors or trustees, and key employees required to disclose annually interest that could give rise to conflicts?	/ No
B. Does the organization regularly and consistently monitor and enforce compliance with the policy? If yes, how is this done?	No
The Board Members follow the Conflict of Interest regulations of the businesses. Do fomeetings.	ollow the Roberts Rules for
23. Does the organization have a written whistleblower policy?	No
24. Does the organization have a written document retention and destruction policy?	No
25. Did the process for determining compensation of the officer or key employees of the organization include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? If yes, describe the process.	No

Own website	X ether (and if so, ho	Another's website ow) the organization makes	its governing document	Upon request X s, conflict of	
interest policy, a	nd financial statem	nents available to the public.			
The yearly financi	al, monthly meeti	ng documents, and governi	ng rules are uploaded t	o the Greater Columbus	
ARMA Chapter's v	website.				

GROUP RETURN AUTHORIZATION

The Greater Columbus ARMA Chapter Region/Chapter Representative of

	cords Managers and Administrators, Inc. authorizes the Association of Records Managers and c. (ARMA HQ) to include this Region/Chapter in the group information return, FORM 990, if eligible for
	perjury. I declare that this authorization and the information submitted to be included in the to the best of my knowledge and belief, true, correct, and complete.
Title:	Chairman and immediate past President
Name:	Martin D. Surec
Address:	3211 Tollgross Dr. Hillians, Okio 43026
Signature:	Mat D. fure (e-signature accepted*)
Date:	7/16/2014
	see the 990 Instruction Letter on the Chpater Operations e-Handbook for directions on how to ensure erly submitting this form to ARMA International HQ.

www.arma.org/leadership/ChapterAdmin/990form2.aspx