



Crowe LLP

Independent Member Crowe International
225 West Wacker Drive, Suite 2600
Chicago, IL 60606-1224
Tel: 312.899.7000
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www.crowe.com

June 21, 2021

Robert P. Schmidt, CPA, MBA
Chicago Association of Realtors Business Information, Inc. & Subsidiaries
430 N. Michigan Ave, Ste. 800
Chicago, IL 60611

Dear Bob:

Enclosed is the client copy of the following returns for the year ended September 30, 2020:

- U.S. Corporation Income Tax Return (Form 1120)
- Illinois Corporation Income and Replacement Tax Return (Form IL-1120)

The above returns have been electronically filed with the IRS and Illinois Department of Revenue on your behalf. Please retain the enclosed client copy for your records.

It is understood that you have provided us with the basic information required for preparation of the return. The tax laws provide that the obligation of a preparer is based only on information of which the preparer has knowledge. Accordingly, the completeness and accuracy of the information you provide us remain the responsibility of your management. You have final and full responsibility for the income tax returns and therefore should review them carefully before signing. You must retain the documentation that supports the filed return. We understand that your staff is responsible for all other tax returns not included here, such as payroll, property, and sales tax returns.

Any tax advice expressed in this communication by Crowe LLP should not be construed as a formal tax opinion unless expressly stated. If you have any questions regarding the enclosed forms or the filing procedures, please call Robbie Williams at 202-552-8016 or Toby Kerslake at 312-966-3080.

Sincerely,

A handwritten signature in cursive script, appearing to read "Nicole Bencik".

Nicole Bencik

Enclosures

2019 TAX RETURN FILING INSTRUCTIONS
U.S. CONSOLIDATED CORPORATION INCOME TAX RETURN

FOR THE YEAR ENDING

September 30, 2020

Prepared For:

Chicago Association of Realtors Business
Information Services Inc & Subsidiaries
430 N Michigan Ave, Ste 800
Chicago, IL 60611

Prepared By:

Crowe LLP
225 West Wacker Drive, Suite 2600
Chicago, IL 60606-1224

To be Signed and Dated By:

The appropriate corporate officer(s).

Amount of Tax:

Total tax	\$	97,368
Less: payments and credits	\$	119,128
Plus: interest and penalties	\$	105
Overpayment	\$	21,655

Overpayment:

Credit to your estimated tax	\$	21,655
Refunded to you	\$	0

Make Check Payable To:

Not Applicable

Mail Tax Return and Check (if applicable) To:

This return has qualified for electronic filing. After you have reviewed the return for accuracy, please sign, date and return Form 8879-C to our office. We will transmit your return electronically to the IRS, and no further action is required.

Return Must be Mailed on or Before:

Please return federal Form 8879-C to us as soon as possible. This must be signed and returned to us by July 15, 2021.

Special Instructions:

Form **8879-C**Department of the Treasury
Internal Revenue Service**IRS e-file Signature Authorization for Form 1120**

OMB No. 1545-0123

For calendar year 2019, or tax year beginning OCT 1, 2019, ending SEP 30, 2020▶ **Do not send to the IRS. Keep for your records.**▶ **Go to www.irs.gov/Form8879C for the latest information.****2019**Name of corporation **CHICAGO ASSOCIATION OF REALTORS BUSINESS
INFORMATION SERVICES INC & SUBSIDIARIES**Employer identification number
47-4639535**Part I Tax Return Information** (Whole dollars only)

1	Total income (Form 1120, line 11)	1	1,574,209.
2	Taxable income (Form 1120, line 30)	2	463,659.
3	Total tax (Form 1120, line 31)	3	97,368.
4	Amount owed (Form 1120, line 35)	4	
5	Overpayment (Form 1120, line 36)	5	21,655.

Part II Declaration and Signature Authorization of Officer. Be sure to get a copy of the corporation's return.

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2019 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☒ I authorize CROWE LLP

ERO firm name

to enter my PIN 12345

do not enter all zeros

as my signature on the corporation's 2019 electronically filed income tax return.

As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2019 electronically filed income tax return.

Officer's signature ▶

Robert P Scholtz

Date ▶

6/21/2021

Title ▶

SENIOR VICE PRESIDENT - FINANCE**Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

36307335092

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed income tax return for the corporation indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 3112, IRS e-file Application and Participation, and Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶

Robert P Scholtz

Date ▶

6/21/2021

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see instructions.
 LHA

Form **8879-C** (2019)

Form 1120 Department of the Treasury Internal Revenue Service	U.S. Corporation Income Tax Return For calendar year 2019 or tax year beginning OCTOBER 1, 2019 , ending SEPTEMBER 30, 2020	OMB No. 1545-0123 <div style="font-size: 2em; font-weight: bold;">2019</div>																																																												
Go to www.irs.gov/Form1120 for instructions and the latest information.																																																														
A Check if: 1a Consolidated return (attach Form 851) <input checked="" type="checkbox"/> b Life/nonlife consolidated return <input type="checkbox"/> 2 Personal holding co. (attach Sch. PH) <input type="checkbox"/> 3 Personal service corp. (see instructions) <input type="checkbox"/> 4 Schedule M-3 attached <input type="checkbox"/>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td rowspan="3" style="width:10%; text-align: center; vertical-align: middle;">TYPE OR PRINT</td> <td style="width:70%;">Name CHICAGO ASSOCIATION OF REALTORS BUSINESS INFORMATION SERVICES INC & SUBSIDIARIES</td> <td style="width:20%;">B Employer identification number 47-4639535</td> </tr> <tr> <td>Number, street, and room or suite no. If a P.O. box, see instructions. 430 N MICHIGAN AVE, STE 800</td> <td>C Date incorporated 06/30/2015</td> </tr> <tr> <td>City or town, state or province, country, and ZIP or foreign postal code CHICAGO, IL 60611</td> <td>D Total assets (see instructions) \$ 5,477,441.</td> </tr> </table>	TYPE OR PRINT	Name CHICAGO ASSOCIATION OF REALTORS BUSINESS INFORMATION SERVICES INC & SUBSIDIARIES	B Employer identification number 47-4639535	Number, street, and room or suite no. If a P.O. box, see instructions. 430 N MICHIGAN AVE, STE 800	C Date incorporated 06/30/2015	City or town, state or province, country, and ZIP or foreign postal code CHICAGO, IL 60611	D Total assets (see instructions) \$ 5,477,441.																																																						
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Sign Here 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 taxpayer) is based on all information of which preparer has any knowledge.	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;"> Signature of officer _____ Date _____ </td> <td style="width:40%;"> Title SENIOR VICE PRESIDENT - FINANCE </td> <td style="width:20%;"> May the IRS discuss this return with the preparer shown below? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </td> </tr> </table>		Signature of officer _____ Date _____	Title SENIOR VICE PRESIDENT - FINANCE	May the IRS discuss this return with the preparer shown below? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																																									
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Schedule C Dividends, Inclusions, and Special Deductions (see instructions)	(a) Dividends and inclusions	(b) %	(c) Special deductions (a) x (b)
1 Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		50	
2 Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		65	
3 Dividends on certain debt-financed stock of domestic and foreign corporations		see instructions	
4 Dividends on certain preferred stock of less-than-20%-owned public utilities		23.3	
5 Dividends on certain preferred stock of 20%-or-more-owned public utilities		26.7	
6 Dividends from less-than-20%-owned foreign corporations and certain FSCs		50	
7 Dividends from 20%-or-more-owned foreign corporations and certain FSCs		65	
8 Dividends from wholly owned foreign subsidiaries		100	
9 Subtotal. Add lines 1 through 8		see instructions	
10 Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11 Dividends from affiliated group members		100	
12 Dividends from certain FSCs		100	
13 Foreign-source portion of dividends received from a specified 10%-owned foreign corporation (excluding hybrid dividends) (see instructions)		100	
14 Dividends from foreign corporations not included on line 3, 6, 7, 8, 11, 12, or 13 (including any hybrid dividends)			
15 Section 965(a) inclusion		see instructions	
16a Subpart F inclusions derived from the sale by a controlled foreign corporation (CFC) of the stock of a lower-tier foreign corporation treated as a dividend (attach Form(s) 5471) (see instructions)		100	
b Subpart F inclusions derived from hybrid dividends of tiered corporations (attach Form(s) 5471) (see instructions)			
c Other inclusions from CFCs under subpart F not included on line 15, 16a, 16b, or 17 (attach Form(s) 5471) (see instructions)			
17 Global intangible Low-Taxed income (GILTI) (attach Form(s) 5471 and Form 8992)			
18 Gross-up for foreign taxes deemed paid			
19 IC-DISC and former DISC dividends not included on line 1, 2, or 3			
20 Other dividends			
21 Deduction for dividends paid on certain preferred stock of public utilities			
22 Section 250 deduction (attach Form 8993)			
23 Total dividends and inclusions. Add column (a), lines 9 through 20. Enter here and on page 1, line 4			
24 Total special deductions. Add column (c), lines 9 through 22. Enter here and on page 1, line 29b			

Schedule J Tax Computation and Payment (see instructions)**Part I - Tax Computation**

1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120))	<input checked="" type="checkbox"/>	
2	Income tax. See instructions		97,368.
3	Base erosion minimum tax amount (attach Form 8991)		
4	Add lines 2 and 3		97,368.
5a	Foreign tax credit (attach Form 1118)	5a	
b	Credit from Form 8834 (see instructions)	5b	
c	General business credit (attach Form 3800)	5c	
d	Credit for prior year minimum tax (attach Form 8827)	5d	
e	Bond credits from Form 8912	5e	
6	Total credits. Add lines 5a through 5e	6	
7	Subtract line 6 from line 4	7	97,368.
8	Personal holding company tax (attach Schedule PH (Form 1120))	8	
9a	Recapture of investment credit (attach Form 4255)	9a	
b	Recapture of low-income housing credit (attach Form 8611)	9b	
c	Interest due under the look-back method-completed long-term contracts (attach Form 8697)	9c	
d	Interest due under the look-back method-income forecast method (attach Form 8866)	9d	
e	Alternative tax on qualifying shipping activities (attach Form 8902)	9e	
f	Other (see instructions - attach statement)	9f	
10	Total. Add lines 9a through 9f	10	
11	Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31	11	97,368.

Part II - Section 965 Payments (see instructions)

12	2019 net 965 tax liability paid from Form 965-B, Part II, column (k), line 3. Enter here and on page 1, line 32	12	
----	---	----	--

Part III - Payments, Refundable Credits, and Section 965 Net Tax Liability

13	2018 overpayment credited to 2019	13	2,018.
14	2019 estimated tax payments	14	92,110.
15	2019 refund applied for on Form 4466	15	()
16	Combine lines 13, 14, and 15	16	94,128.
17	Tax deposited with Form 7004	17	25,000.
18	Withholding (see instructions)	18	
19	Total payments. Add lines 16, 17, and 18	19	119,128.
20	Refundable credits from:		
a	Form 2439	20a	
b	Form 4136	20b	
c	Form 8827, line 5c	20c	
d	Other (attach statement - see instructions)	20d	
21	Total credits. Add lines 20a through 20d	21	
22	2019 net 965 tax liability from Form 965-B, Part I, column (d), line 3. See instructions	22	
23	Total payments, credits, and section 965 net tax liability. Add lines 19, 21, and 22. Enter here and on page 1, line 33	23	119,128.

Form **1120** (2019)

Schedule K Other Information (see instructions)

1 Check accounting method: a <input type="checkbox"/> Cash b <input checked="" type="checkbox"/> Accrual c Other (specify) _____	Yes	No
2 See the instructions and enter the:		
a Business activity code no. 531390		
b Business activity SERVICE		
c Product or service REAL ESTATE INFORMATION		
3 Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? _____ If "Yes," enter name and EIN of the parent corporation CHICAGO ASSOCIATION OF REALTORS 36-0904580	X	
4 At the end of the tax year:		
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part I of Schedule G (Form 1120) (attach Schedule G) _____	X	
b Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part II of Schedule G (Form 1120) (attach Schedule G) _____		X
5 At the end of the tax year, did the corporation:		
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on Form 851 , Affiliations Schedule? For rules of constructive ownership, see instructions _____ If "Yes," complete (i) through (iv) below.		X

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions _____ If "Yes," complete (i) through (iv) below.		X
---	--	----------

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Country of Organization	(iv) Maximum Percentage Owned in Profit, Loss, or Capital

6 During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? See sections 301 and 316 _____ If "Yes," file Form 5452 , Corporate Report of Nondividend Distributions. See the instructions for Form 5452. If this is a consolidated return, answer here for the parent corporation and on Form 851 for each subsidiary.		X
7 At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of the total voting power of all classes of the corporation's stock entitled to vote or at least 25% of the total value of all classes of the corporation's stock? _____ For rules of attribution, see section 318. If "Yes," enter: (a) Percentage owned _____ and (b) Owner's country _____ (c) The corporation may have to file Form 5472 , Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter the number of Forms 5472 attached _____		X
8 Check this box if the corporation issued publicly offered debt instruments with original issue discount _____ If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.		
9 Enter the amount of tax-exempt interest received or accrued during the tax year \$ _____		
10 Enter the number of shareholders at the end of the tax year (if 100 or fewer) 1		
11 If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here _____ If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3) must be attached or the election will not be valid.		
12 Enter the available NOL carryover from prior tax years (do not reduce it by any deduction reported on page 1, line 29a.) \$ 561,610.		

Schedule K Other Information (continued from page 4)

	Yes	No
13 Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the tax year and its total assets at the end of the tax year less than \$250,000?		X
If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the tax year ► \$		
14 Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement? See instructions		X
If "Yes," complete and attach Schedule UTP.		
15a Did the corporation make any payments in 2019 that would require it to file Form(s) 1099?	X	
b If "Yes," did or will the corporation file required Form(s) 1099?	X	
16 During this tax year, did the corporation have an 80%-or-more change in ownership, including a change due to redemption of its own stock?		X
17 During or subsequent to this tax year, but before the filing of this return, did the corporation dispose of more than 65% (by value) of its assets in a taxable, non-taxable, or tax deferred transaction?		X
18 Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million?		X
19 During the corporation's tax year, did the corporation make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474) of the Code?		X
20 Is the corporation operating on a cooperative basis?		X
21 During the tax year, did the corporation pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions		X
If "Yes," enter the total amount of the disallowed deductions ► \$		
22 Does the corporation have gross receipts of at least \$500 million in any of the 3 preceding tax years? (See sections 59A(e)(2) and (3))		X
If "Yes," complete and attach Form 8991.		
23 Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		X
24 Does the corporation satisfy one or more of the following? See instructions		X
a The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
b The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the corporation has business interest expense.		
c The corporation is a tax shelter and the corporation has business interest expense.		
If "Yes," to any, complete and attach Form 8990.		
25 Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
If "Yes," enter amount from Form 8996, line 14 ► \$		

Form **1120** (2019)

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		4,137,198.		3,999,303.
2a	Trade notes and accounts receivable	7,985.		7,808.	
b	Less allowance for bad debts	()	7,985.	()	7,808.
3	Inventories				
4	U.S. government obligations	SEE		SEE	
5	Tax-exempt securities	STATEMENT OF		STATEMENT OF	
6	Other current assets (att. stmt.)	CONSOLIDATED	10,895.	CONSOLIDATED	14,926.
7	Loans to shareholders	BEGINNING		ENDING	
8	Mortgage and real estate loans	BALANCE SHEET		BALANCE SHEET	
9	Other investments (att. stmt.)		1,401,657.		1,455,404.
10a	Buildings and other depreciable assets				
b	Less accumulated depreciation	()		()	
11a	Depletable assets				
b	Less accumulated depletion	()		()	
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization	()		()	
14	Other assets (att. stmt.)				
15	Total assets		5,557,735.		5,477,441.
Liabilities and Shareholders' Equity					
16	Accounts payable		1,293.		1,692.
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.)		3,537,810.		3,069,246.
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (att. stmt.)				
22	Capital stock: a Preferred stock				
b	Common stock	70,000.	70,000.	70,000.	70,000.
23	Additional paid-in capital		453,743.		453,743.
24	Retained earnings - Appropriated (attach statement)				
25	Retained earnings - Unappropriated		1,494,889.		1,882,760.
26	Adjustments to shareholders' equity (attach statement)				
27	Less cost of treasury stock	()		()	
28	Total liabilities and shareholders' equity		5,557,735.		5,477,441.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return

Note: The corporation may be required to file Schedule M-3. See instructions.

1	Net income (loss) per books	387,871.	7	Income recorded on books this year not included on this return (itemize):	
2	Federal income tax per books	97,561.		Tax-exempt interest \$	
3	Excess of capital losses over capital gains	40,384.			63,200.
4	Income subject to tax not recorded on books this year (itemize):				63,200.
5	Expenses recorded on books this year not deducted on this return (itemize):		8	Deductions on this return not charged against book income this year (itemize):	
a	Depreciation		a	Depreciation	\$
b	Charitable contributions		b	Charitable contributions	\$
c	Travel and entertainment	946.			
		97.			
		1,043.	9	Add lines 7 and 8	63,200.
6	Add lines 1 through 5	526,859.	10	Income (page 1, line 28) - line 6 less line 9	463,659.

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)

1	Balance at beginning of year	1,494,889.	5	Distributions: a Cash	
2	Net income (loss) per books	387,871.		b Stock	
3	Other increases (itemize):			c Property	
			6	Other decreases (itemize):	
4	Add lines 1, 2, and 3	1,882,760.	7	Add lines 5 and 6	
			8	Balance at end of year (line 4 less line 7)	1,882,760.

2019

Name **CHICAGO ASSOCIATION OF REALTORS BUSINESS
INFORMATION SERVICES INC & SUBSIDIARIES** Employer identification number **47-4639535**

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ☒ No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses (See instructions.)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37				4
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824				5
6 Unused capital loss carryover (attach computation)			SEE STATEMENT 2	6 (20,949.)
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h				7 <20,949.>

Part II Long-Term Capital Gains and Losses (See instructions.)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	222,745.	263,129.		<40,384.>
11 Enter gain from Form 4797, line 7 or 9				11
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37				12
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824				13
14 Capital gain distributions				14
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h				15 <40,384.>

Part III Summary of Parts I and II

16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)	16
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)	17
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns	18

Note: If losses exceed gains, see *Capital Losses* in the instructions.

**SCHEDULE O
(Form 1120)**

(Rev. December 2018)
Department of the Treasury
Internal Revenue Service

**Consent Plan and Apportionment Schedule
for a Controlled Group**

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-L, 1120-PC, 1120-REIT, or 1120-RIC.
▶ Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

Name	CHICAGO ASSOCIATION OF REALTORS BUSINESS INFORMATION SERVICES INC & SUBSIDIARIES	Employer identification number	47-4639535
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Part I Apportionment Plan Information

1 Type of controlled group:

- a ☒ Parent-subsidiary group
b ☐ Brother-sister group
c ☐ Combined group
d ☐ Life insurance companies only

2 This corporation has been a member of this group:

- a ☒ For the entire year.
b ☐ From _____, until _____.

3 This corporation consents and represents to:

- a ☐ Adopt an apportionment plan. All the other members of this group are adopting an apportionment plan effective for the current tax year which ends on _____, and for all succeeding tax years.
b ☐ Amend the current apportionment plan. All the other members of this group are currently amending a previously adopted plan, which was in effect for the tax year ending _____, and for all succeeding tax years.
c ☐ Terminate the current apportionment plan and not adopt a new plan. All the other members of this group are not adopting an apportionment plan.
d ☐ Terminate the current apportionment plan and adopt a new plan. All the other members of this group are adopting an apportionment plan effective for the current tax year which ends on _____, and for all succeeding tax years.

4 If you checked box 3c or 3d above, check the applicable box below to indicate if the termination of the current apportionment plan was:

- a ☐ Elected by the component members of the group.
b ☐ Required for the component members of the group.

5 If you did not check a box on line 3 above, check the applicable box below concerning the status of the group's apportionment plan (see instructions).

- a ☐ No apportionment plan is in effect and none is being adopted.
b ☒ An apportionment plan is already in effect. It was adopted for the tax year ending SEPTEMBER 30, 2015, and for all succeeding tax years.

6 If all the members of this group are adopting a plan or amending the current plan for a tax year after the due date (including extensions) of the tax return for this corporation, is there at least one year remaining on the statute of limitations from the date this corporation filed its amended return for such tax year for assessing any resulting deficiency? See instructions.

- a ☐ Yes.
(i) ☐ The statute of limitations for this year will expire on _____.
(ii) ☐ On _____, this corporation entered into an agreement with the Internal Revenue Service to extend the statute of limitations for purposes of assessment until _____.
b ☐ No. The members may not adopt or amend an apportionment plan.

7 ☐ If the corporation has a short tax year that does not include December 31, check the box. See instructions.

For Paperwork Reduction Act Notice, see Instructions for Form 1120.

Schedule O (Form 1120) (Rev. 12-2018)

Part II Apportionment (See instructions)

(a) Group member's name and employer identification number		(b) Tax year end (Yr-Mo)	Apportionment		
			(c) Accumulated earnings credit	(d) Penalty for failure to pay estimated tax	(e) Other
1 CHICAGO ASSOCIATION OF REALTORS BUSINESS INFORMATION SERVICES INC & SUBSIDIARIES	47-4639535	20-09	0.	0.	0.
2 CHICAGO ASSOCIATION OF REALTORS	36-0904580	20-09	0.	0.	0.
3					
4					
5					
6					
7					
8					
9					
10					
Total					

Schedule O (Form 1120) (Rev. 12-2018)

Cost of Goods Sold

(Rev. November 2018)

▶ **Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.**

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service▶ **Go to www.irs.gov/Form1125A for the latest information.**

Name CHICAGO ASSOCIATION OF REALTORS BUSINESS INFORMATION SERVICES INC & SUBSIDIARIES		Employer identification number 47-4639535
1 Inventory at beginning of year	1	0.
2 Purchases	2	0.
3 Cost of labor	3	0.
4 Additional section 263A costs (attach schedule)	4	0.
5 Other costs (attach schedule)	5	4,144,822.
6 Total. Add lines 1 through 5	6	4,144,822.
7 Inventory at end of year	7	0.
8 Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions	8	4,144,822.

9 a Check all methods used for valuing closing inventory:

(i) ☐ Cost

(ii) ☐ Lower of cost or market

(iii) ☐ Other (Specify method used and attach explanation) ▶ _____

b Check if there was a writedown of subnormal goods ▶ ☐

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ▶ ☐

d If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO **9d** _____

e If property is produced or acquired for resale, do the rules of Section 263A apply to the entity? See instructions ☐ Yes ☒ No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? ☐ Yes ☒ No
If "Yes," attach explanation.

For Paperwork Reduction Act Notice, see separate instructions.

Form 1125-A (Rev. 11-2018)

**SCHEDULE G
(Form 1120)**(Rev. December 2011)
Department of the Treasury
Internal Revenue Service**Information on Certain Persons Owning the
Corporation's Voting Stock**

OMB No. 1545-0123

▶ Attach to Form 1120.

Name

CHICAGO ASSOCIATION OF REALTORS BUSINESS
INFORMATION SERVICES INC & SUBSIDIARIES

Employer identification number (EIN)

47-4639535

Part I **Certain Entities Owning the Corporation's Voting Stock.** (Form 1120, Schedule K, Question 4a). Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Percentage Owned in Voting Stock
CHICAGO ASSOCIATION OF REALTORS	36-0904580	TAX-EXEMPT	UNITED STATES	100.00%

Part II **Certain Individuals and Estates Owning the Corporation's Voting Stock.** (Form 1120, Schedule K, Question 4b). Complete columns (i) through (iv) below for any individual or estate that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Percentage Owned in Voting Stock

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule G (Form 1120) (Rev. 12-2011)

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Form **851**
(Rev. October 2016)
Department of the Treasury
Internal Revenue Service

Affiliations Schedule
For tax year ending **SEPTEMBER 30, 2020**

OMB No. 1545-0123

► File with each consolidated income tax return.

► Information about Form 851 and its instructions is at www.irs.gov/form851.

Name of common parent corporation **CHICAGO ASSOCIATION OF REALTORS INFORMATION SERVICES INC & SUBSIDIARIES** Employer identification number **47-4639535**

Number, street, and room or suite no. If a P.O. box, see instructions.

430 N MICHIGAN AVE, STE 800

City or town, state, and ZIP code **CHICAGO, IL 60611**

Part I Overpayment Credits, Estimated Tax Payments, and Tax Deposits (see instructions)

Corp. No.	Name and address of corporation	Employer identification number	Portion of overpayment credits and estimated tax payments	Portion of tax deposited with Form 7004
1	Common parent corporation		160,503.	25,000.
2	Subsidiary corporations: CHICAGO ASSOCIATION OF REALTORS, INC. 430 N. MICHIGAN AVE., SUITE 800 CHICAGO, IL 60611	36-2348007	0.	0.
3	NORTHERN ILLINOIS REAL ESTATE 430 N. MICHIGAN AVE, SUITE 800 CHICAGO, IL 60611	36-3425361	0.	0.
4				
5				
6				
7				
8				
9				
10				
Totals (Must equal amounts shown on the consolidated tax return)				

Part II Principal Business Activity, Voting Stock Information, Etc. (see instructions)

Corp. No.	Principal business activity (PBA)	PBA Code No.	Did the subsidiary make any nondividend distributions?		Stock holdings at beginning of year			
			Yes	No	Number of shares	Percent of voting power	Percent of value	Owned by corporation no.
1	Common parent corporation SERVICE	531390						
2	Subsidiary corporations: SERVICE	531390		X		%100.00	%	1
3	SERVICE	531390		X		%100.00	%	1
4						%	%	
5						%	%	
6						%	%	
7						%	%	
8						%	%	
9						%	%	
10						%	%	

Page 2

Part III

[illegible]

- (e) If the equitable owners of any capital stock shown above were other than the holders of record, provide details of the changes.

-
-
-
-

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Form 851 (Rev. 10-2016)

Page 3

Part IV Additional Stock Information (see instructions)

- 1** During the tax year, did the corporation have more than one class of stock outstanding? ☐ Yes ☒ No
 If "Yes," enter the name of the corporation and list and describe each class of stock.

Corp. No.	Name of corporation	Class of stock

- 2** During the tax year, was there any member of the consolidated group that reaffiliated within 60 months of disaffiliation? ☐ Yes ☒ No
 If "Yes," enter the name of the corporation(s) and explain circumstances.

Corp. No.	Name of corporation	Explanation

- 3** During the tax year, was there any arrangement in existence by which one or more persons that were not members of the affiliated group could acquire any stock, or acquire any voting power without acquiring stock, in the corporation, other than a de minimis amount, from the corporation or another member of the affiliated group? ☐ Yes ☒ No
 If "Yes," enter the name of the corporation and see the instructions for the percentages to enter in columns (a), (b), and (c).

Corp. No.	Name of corporation	(a) Percent of value	(b) Percent of outstanding voting stock	(c) Percent of voting power
		%	%	%
		%	%	%
		%	%	%
		%	%	%
		%	%	%

Corp. No.	(d) Provide a description of any arrangement.

Form 851 (Rev. 10-2016)

Underpayment of Estimated Tax by Corporations

Department of the Treasury
Internal Revenue Service

▶ Attach to the corporation's tax return.

▶ Go to www.irs.gov/Form2220 for instructions and the latest information.

2019

Name **CHICAGO ASSOCIATION OF REALTORS BUSINESS
INFORMATION SERVICES INC & SUBSIDIARIES**Employer identification number
47-4639535

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

1	Total tax (see instructions)	1	97,368.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b	
2c	Credit for federal tax paid on fuels (see instructions)	2c	
2d	Total. Add lines 2a through 2c	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty	3	97,368.
4	Enter the tax shown on the corporation's 2018 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4	59,392.
5	Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	59,392.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6 ☐ The corporation is using the adjusted seasonal installment method.
- 7 ☐ The corporation is using the annualized income installment method.
- 8 ☐ The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	01/15/2020	03/16/2020	06/15/2020	09/15/2020
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	14,848.	14,848.	14,848.	14,848.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	2,018.	56,380.	6,270.	29,460.
Complete lines 12 through 18 of one column before going to the next column.				
12 Enter amount, if any, from line 18 of the preceding column			28,702.	20,124.
13 Add lines 11 and 12		56,380.	34,972.	49,584.
14 Add amounts on lines 16 and 17 of the preceding column		12,830.		
15 Subtract line 14 from line 13. If zero or less, enter -0-	2,018.	43,550.	34,972.	49,584.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-				
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	12,830.			
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column		28,702.	20,124.	

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2019)

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19	4		
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2019 and before 7/1/2019	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 6\% (0.06)}{365}$...	22	\$	\$	\$
23 Number of days on line 20 after 06/30/2019 and before 10/1/2019 ...	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$...	24	\$	\$	\$
25 Number of days on line 20 after 9/30/2019 and before 1/1/2020	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 5\% (0.05)}{365}$...	26	\$	\$	\$
27 Number of days on line 20 after 12/31/2019 and before 4/1/2020 ...	27			
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 5\% (0.05)}{366}$...	28	\$	\$	\$
29 Number of days on line 20 after 3/31/2020 and before 7/1/2020	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{366}$	30	\$	\$	\$
31 Number of days on line 20 after 6/30/2020 and before 10/1/2020 ...	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{366}$	32	\$	\$	\$
33 Number of days on line 20 after 9/30/2020 and before 1/1/2021	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{366}$	34	\$	\$	\$
35 Number of days on line 20 after 12/31/2020 and before 3/16/2021 ...	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$	36	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$ 105.	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	38		\$	105.

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form **4562**Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on return

Depreciation and Amortization
(Including Information on Listed Property) OTHER

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2019Attachment
Sequence No. **179****CHICAGO ASSOCIATION OF REALTORS BUSINESS
INFORMATION SERVICES INC & SUBSIDIARIES**

Business or activity to which this form relates

OTHER DEPRECIATION

Identifying number

47-4639535**Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,020,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,550,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2018 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	0.
13	Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2019	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year	/		30 yrs.	MM	S/L	
d 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V**Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)****24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use							25	
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle	(b) Vehicle	(c) Vehicle	(d) Vehicle	(e) Vehicle	(f) Vehicle
30 Total business/investment miles driven during the year (don't include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their EmployeesAnswer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **aren't** more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2019 tax year:					
43 Amortization of costs that began before your 2019 tax year					43
					13,507.
44 Total. Add amounts in column (f). See the instructions for where to report					44
					13,507.

47-4639535

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

☒ (F) Long-term transactions not reported to you on Form 1099-B

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

CAPITAL LOSS CARRYOVER

STATEMENT 2

CONSOLIDATED CAPITAL GAIN INCOME

-40,384.

	SEPARATE COMPANY CAPITAL GAIN INCOME	CAPITAL LOSS CARRYOVER AVAILABLE	TOTAL CAPITAL LOSS CARRYOVER AFTER SRLY LIMITATION	TOTAL CAPITAL LOSS CARRYOVER DEDUCTED	REMAINING CONSOLIDATED CAPITAL GAIN INCOME
YEAR END 09/30/18 NON-SRLY		CHICAGO ASSOCIATION OF REALTORS, INC. 220.	220.		
YEAR END 09/30/19 NON-SRLY		CHICAGO ASSOCIATION OF REALTORS, INC. 20,729.	20,729.		
SUBTOTAL			20,949.	0.	

ALLOCATION OF CURRENT CONSOLIDATED
CAPITAL LOSS TO MEMBER CORPORATIONS

STATEMENT 3

CURRENT CONSOLIDATED CAPITAL LOSS	X	MEMBER'S CURRENT CAPITAL LOSS WITHOUT SEC. 1231 GAIN	/	TOTAL OF ALL MEMBERS WITH CAPITAL LOSS	=	CAPITAL LOSS ALLOCATED TO THIS COMPANY
09/30/20		CHICAGO ASSOCIATION OF REALTORS, INC.				
40,384.		40,384.		40,384.		40,384.

FORM 2220

COMPUTATION OF UNDERPAYMENT PENALTY

STATEMENT 4

Q T R	EVENT AMOUNT TYPE	*	REMAINING UNDERPAYMENT	PERIOD OF UNDERPAYMENT	DAYS	INT RATE	AMOUNT OF PENALTY
A							
	Q		12,830.	01/15/2020 03/15/2020	60	5%	105.
	-56,380. P		-43,550.	03/15/2020	0	5%	0.
TOTAL TO FORM 2220, LINE 38							105.

EVENT TYPE: Q = AMOUNT UNDERPAID AT START OF QUARTER
P = PAYMENT
W = WITHHOLDING
R = INTEREST RATE CHANGE
L = SWITCH TO OR FROM A LEAP YEAR

INCOME AND DEDUCTIONS

		CONSOLIDATED AMOUNTS	ADJUSTMENTS	ELIMINATIONS	COMBINED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361
Gross receipts or sales		5,030,550.			5,030,550.		4,990,489.	40,061.
Less returns and allowances								
Net Sales		5,030,550.			5,030,550.		4,990,489.	40,061.
Cost of goods sold:								
Inventory at beginning of year								
Purchases								
Cost of labor								
Additional section 263A costs								
Other costs	STMT 8	4,144,822.			4,144,822.		4,144,822.	
Inventory end of year								
Cost of goods sold		4,144,822.			4,144,822.		4,144,822.	
Gross profit		885,728.			885,728.		845,667.	40,061.
Dividends								
Interest	STMT 9	46,292.			46,292.		46,292.	
Gross rents								
Gross royalties								
Capital gain net income								
Net gain or (loss) Form 4797								
Other income	STMT 10	642,189.			642,189.		581,314.	60,875.
Total Income		1,574,209.			1,574,209.		1,473,273.	100,936.
Deductions								
Compensation of officers								
Salaries and wages		560,538.			560,538.		496,483.	64,055.
Repairs		6,425.			6,425.		5,713.	712.
Bad debts								
Rents		56,278.			56,278.		50,929.	5,349.
Taxes	STMT 11	49,677.			49,677.		49,560.	117.
Interest		5,635.			5,635.			5,635.
Charitable Contributions	STMT 5	40,000.			40,000.		40,000.	
Depreciation not claimed elsewhere								
Depletion								
Advertising								
Pension, profit-sharing, etc., plans								
Employee benefit programs								
Other deductions	STMT 12	391,997.			391,997.		330,532.	61,465.
Total Deductions		1,110,550.			1,110,550.		973,217.	137,333.
Taxable income before NOL and special deductions		463,659.			463,659.		500,056.	-36,397.
Net operating loss deduction	STMT 6							
Special deductions								
Taxable Income		463,659.			463,659.		500,056.	-36,397.

CHARITABLE CONTRIBUTION ADJUSTMENT

STATEMENT 5

LIMITATION OF 10% OF TAXABLE INCOME AS ADJUSTED

50,366.

	ORIGINAL CONTRIBUTION	APPLIED TO DATE	CONTRIBUTION AVAILABLE	AMOUNT DEDUCTED	REMAINING LIMITATION AFTER DEDUCTION
CURRENT YEAR	CHICAGO ASSOCIATION OF REALTORS, INC. 40,000.		40,000.	40,000.	10,366.
YEAR END	09/30/20 CHICAGO ASSOCIATION OF REALTORS, INC. 40,000.	0.	40,000.	10,366.	0.
CONSOLIDATED CHARITABLE CONTRIBUTION DEDUCTION				40,000.	
LESS: COMBINED CHARITABLE CONTRIBUTION DEDUCTION				40,000.	
CONSOLIDATED ADJUSTMENT				0.	

NET OPERATING LOSS ADJUSTMENT

STATEMENT 6

CONSOLIDATED TAXABLE INCOME BEFORE NOL 463,659.

	SRLY OR SEC. 382 LIMIT	TOTAL NOL AVAILABLE	TOTAL NOL AFTER SRLY OR SEC. 382 LIMITATION	TOTAL NOL DEDUCTED	REMAINING TAXABLE INCOME AFTER NOL DEDUCTION
YEAR END SRLY	09/30/07 -36,397.	NORTHERN ILLINOIS REAL ESTATE 43,752.	0.	0.	463,659.
YEAR END SRLY	09/30/08 -36,397.	NORTHERN ILLINOIS REAL ESTATE 273,712.	0.	0.	463,659.
YEAR END SRLY	09/30/10 -36,397.	NORTHERN ILLINOIS REAL ESTATE 3,821.	0.	0.	463,659.
YEAR END SRLY	09/30/12 -36,397.	NORTHERN ILLINOIS REAL ESTATE 8,433.	0.	0.	463,659.
YEAR END SRLY	09/30/13 -36,397.	NORTHERN ILLINOIS REAL ESTATE 131,677.	0.	0.	463,659.
YEAR END SRLY	09/30/14 -36,397.	NORTHERN ILLINOIS REAL ESTATE 100,215.	0.	0.	463,659.
SUBTOTAL		561,610.	0.	0.	
CONSOLIDATED NOL DEDUCTION			0.		
COMBINED NOL DEDUCTION			0.		
CONSOLIDATED NOL ADJUSTMENT			0.		

CURRENT CHARITABLE CONTRIBUTIONS				STATEMENT 7
	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361
CHARITABLE CONTRIBUTION	40,000.		40,000.	
TOTAL CURRENT CONTRIBUTIONS	40,000.		40,000.	

SCHEDULE A	COST OF GOODS SOLD OTHER COSTS				STATEMENT 8
	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361	
LISTING SERVICES	4,144,822.		4,144,822.		
TOTAL OTHER COSTS	4,144,822.		4,144,822.		

INTEREST INCOME					STATEMENT 9
	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361	
INTEREST INCOME - THE PRIVATE BANK	46,292.		46,292.		
TOTAL INTEREST INCOME	46,292.		46,292.		

	OTHER INCOME			STATEMENT 10
	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361
APPLICATION FEES	60,400.		60,400.	
COMMERCIAL MEMBER INITIATIVE	798.			798.
CR MAGAZINE AD INCOME	5,200.		5,200.	
LICENSE HOLDING FEES	60,077.			60,077.
MLS LATE FEE	16,816.		16,816.	
OFFICE DUES	434,775.		434,775.	
PAPER INVOICE FEE	643.		643.	
PAYMENT PLAN SERVICE FEE	61,736.		61,736.	
REFUND PROCESSING FEE	1,700.		1,700.	
SALES AWARDS PROGRAM	44.		44.	
TOTAL OTHER INCOME	642,189.		581,314.	60,875.

TAXES					STATEMENT 11
	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361	
OTHER STATE AND LOCAL TAXES	48,671.		48,671.		
REAL ESTATE TAXES	1,006.		889.	117.	
TOTAL TAXES	49,677.		49,560.	117.	

	OTHER DEDUCTIONS			STATEMENT 12
	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361
ALLOCATED OVERHEAD	46,607.		41,252.	5,355.
AMORTIZATION	13,507.		11,957.	1,550.
BANK & CREDIT CARD FEES	122,927.		119,399.	3,528.
COMPUTER SYSTEM	22,627.		20,020.	2,607.
DUES & SUBSCRIPTIONS	1,174.		815.	359.
INSURANCE	10,602.		9,530.	1,072.
MEALS	946.		669.	277.
MEMBER PROMOTION	10,434.		10,256.	178.
MISCELLANEOUS	20,936.		20,632.	304.
OFFICE EXPENSES	5,378.		4,739.	639.
POSTAGE & DELIVERY	695.		488.	207.
PRINTING	118.		105.	13.
PROFESSIONAL FEES	100,464.		64,251.	36,213.
RECRUITMENT EXPENSE	687.		623.	64.
STAFF TRAINING & RECOGNITION	11,791.		10,498.	1,293.
SUBSCRIBER EVENTS & OUTREACH	5,500.			5,500.
TELEPHONE	15,294.		13,518.	1,776.
TRANSPORTATION	392.		82.	310.
UTILITIES	1,918.		1,698.	220.
TOTAL OTHER DEDUCTIONS	391,997.		330,532.	61,465.

BEGINNING BALANCE SHEET

	CONSOLIDATED AMOUNTS	ADJUSTMENTS	ELIMINATIONS	COMBINED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361
Assets							
Cash	4,137,198.			4,137,198.		4,137,198.	
Trade notes and accounts receivable	7,985.			7,985.		7,985.	
Less allowance for bad debts							
Inventories							
U.S. government obligations							
Tax-exempt securities							
Other current assets STATEMENT 13	10,895.			10,895.		10,498.	397.
Loans to stockholders							
Mortgage and real estate loans							
Other investments STATEMENT 14	1,401,657.			1,401,657.		1,401,657.	
Buildings and other depreciable assets							
Less accumulated depreciation							
Depletable assets							
Less accumulated depletion							
Land (net of any amortization)							
Intangible assets (amortizable only)							
Less accumulated amortization							
Other assets							
Total Assets	5,557,735.			5,557,735.		5,557,338.	397.
Liabilities and Stockholders' Equity							
Accounts payable	1,293.			1,293.		1,180.	113.
Mortgages, notes, bonds payable in less than 1 year							
Other current liabilities STATEMENT 15	3,537,810.			3,537,810.		2,940,623.	597,187.
Loans from stockholders							
Mortgages, notes, bonds payable in 1 year or more							
Other liabilities							
Capital stock: a Preferred stock							
b Common stock	70,000.			70,000.			70,000.
Additional paid-in capital	453,743.			453,743.			453,743.
Retained earnings - Appropriated							
Retained earnings - Unappropriated	1,494,889.			1,494,889.		2,615,535.	-1,120,646.
Adjustments to shareholders' equity							
Less cost of treasury stock							
Total Liabilities and Stockholders' Equity	5,557,735.			5,557,735.		5,557,338.	397.

SCHEDULE L	OTHER CURRENT ASSETS				STATEMENT 13
	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361	
PREPAID EXPENSES & OTHER RECEIVABLES	10,498.		10,498.		
PREPAID INSURANCE	397.			397.	
TOTAL OTHER CURRENT ASSETS	10,895.		10,498.	397.	

SCHEDULE L	OTHER INVESTMENTS				STATEMENT 14
	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361	
PUBLICLY TRADED SECURITIES	1,401,657.		1,401,657.		
TOTAL OTHER INVESTMENTS	1,401,657.		1,401,657.		

SCHEDULE L

CURRENT LIABILITIES

STATEMENT 15

	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361
ACCRUED INCOME TAX	-2,471.			-2,471.
DEFERRED INCOME	18,030.			18,030.
DEFERRED REVENUE	2,916,577.		2,916,577.	
FEDERAL ACCRUED TAXES	20,574.		20,574.	
INTERCOMPANY PAYABLE	581,600.			581,600.
STATE ACCRUED TAXES	3,472.		3,472.	
UNCLAIMED PROPERTY	28.			28.
TOTAL OTHER CURRENT LIABILITIES	3,537,810.		2,940,623.	597,187.

ENDING BALANCE SHEET AND SCHEDULE M-2

	CONSOLIDATED AMOUNTS	ADJUSTMENTS	ELIMINATIONS	COMBINED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361
Assets							
Cash	3,999,303.			3,999,303.		3,999,303.	
Trade notes and accounts receivable	7,808.			7,808.		7,808.	
Less allowance for bad debts							
Inventories							
U.S. government obligations							
Tax-exempt securities							
Other current assets STATEMENT 16	14,926.			14,926.		14,417.	509.
Loans to stockholders							
Mortgage and real estate loans							
Other investments STATEMENT 17	1,455,404.			1,455,404.		1,455,404.	
Buildings and other depreciable assets							
Less accumulated depreciation							
Depletable assets							
Less accumulated depletion							
Land (net of any amortization)							
Intangible assets (amortizable only)							
Less accumulated amortization							
Other assets							
Total Assets	5,477,441.			5,477,441.		5,476,932.	509.
Liabilities and Stockholders' Equity							
Accounts payable	1,692.			1,692.		1,579.	113.
Short term mortgages, notes, and bonds							
Other current liabilities STATEMENT 18	3,069,246.			3,069,246.		2,435,271.	633,975.
Loans from stockholders							
Long term mortgages, notes, and bonds							
Other liabilities							
Capital stock: a Preferred stock							
b Common stock	70,000.			70,000.			70,000.
Additional paid-in capital	453,743.			453,743.			453,743.
Retained earnings - Appropriated							
Retained earnings - Unappropriated	1,882,760.			1,882,760.		3,040,082.	-1,157,322.
Adjustments to shareholders' equity							
Less cost of treasury stock							
Total Liabilities and Stockholders' Equity	5,477,441.			5,477,441.		5,476,932.	509.
Schedule M-2							
Balance at beginning of year	1,494,889.			1,494,889.		2,615,535.	-1,120,646.
Net income per books	387,871.			387,871.		414,270.	-26,399.
Other increases STATEMENT 19						10,277.	-10,277.
Total Increases	1,882,760.			1,882,760.		3,040,082.	-1,157,322.
Distributions: Cash							
Stock							
Property							
Other decreases							
Total Decreases							
Balance at End of Year	1,882,760.			1,882,760.		3,040,082.	-1,157,322.

SCHEDULE L	OTHER CURRENT ASSETS				STATEMENT 16
	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361	
PREPAID EXPENSES & OTHER RECEIVABLES	14,417.		14,417.		
PREPAID INSURANCE	509.			509.	
TOTAL OTHER CURRENT ASSETS	14,926.		14,417.	509.	

SCHEDULE L	OTHER INVESTMENTS				STATEMENT 17
	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361	
PUBLICLY TRADED SECURITIES	1,455,404.		1,455,404.		
TOTAL OTHER INVESTMENTS	1,455,404.		1,455,404.		

SCHEDULE L	CURRENT LIABILITIES				STATEMENT 18
	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361	
ACCRUED INCOME TAX	-2,471.			-2,471.	
DEFERRED INCOME	21,237.			21,237.	
DEFERRED REVENUE	2,403,036.		2,403,036.		
FEDERAL ACCRUED TAXES	26,025.		26,025.		
IAR AFFILIATE DUES PAYABLE	245.			245.	
INTERCOMPANY PAYABLE	614,941.			614,941.	
STATE ACCRUED TAXES	6,210.		6,210.		
UNCLAIMED PROPERTY	23.			23.	
TOTAL OTHER CURRENT LIABILITIES	3,069,246.		2,435,271.	633,975.	

SCHEDULE M-2	COMBINED OTHER INCREASES				STATEMENT 19
	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361	
CAPITAL CONTRIBUTION TO NIREIN			10,277.	-10,277.	
TOTAL OTHER INCREASES			10,277.	-10,277.	

SCHEDULE M-1

	CONSOLIDATED AMOUNTS	ADJUSTMENTS	ELIMINATIONS	COMBINED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361
Schedule M-1							
Net income per books	387,871.			387,871.		414,270.	-26,399.
Federal income tax	97,561.			97,561.		97,561.	
Excess of capital losses over capital gains	40,384.			40,384.		40,384.	
Income subject to tax not recorded on books this year (itemize):							
Expenses recorded on books this year not deducted in this return (itemize):							
Depreciation							
Contribution carryover							
Travel and entertainment	946.			946.		669.	277.
Other SEE STATEMENT 20	97.			97.		10,374.	-10,277.
Total Increases	526,859.			526,859.		563,258.	-36,399.
Income recorded on books this year not included in this return (itemize):							
Tax-exempt interest							
Other SEE STATEMENT 21	63,200.			63,200.		63,200.	
Deductions in this tax return not charged against book income this year (itemize):							
Depreciation							
Contribution carryover							
Other							
Total Decreases	63,200.			63,200.		63,200.	
Taxable Income	463,659.			463,659.		500,058.	-36,399.

SCHEDULE M-1

EXPENSES NOT DEDUCTED IN RETURN

STATEMENT 20

	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361
INCOME TAX EXPENSE	-10,277.			-10,277.
STATE TAXES	10,374.		10,374.	
TOTAL EXPENSES NOT IN RETURN	97.		10,374.	-10,277.

SCHEDULE M-1

INCOME NOT INCLUDED IN RETURN

STATEMENT 21

	CONSOLIDATED AMOUNTS	CHICAGO ASSOCIATION OF REALTORS INFORMAT 47-4639535	CHICAGO ASSOCIATION OF REALTORS, INC. 36-2348007	NORTHERN ILLINOIS REAL ESTATE 36-3425361
UNREALIZED GAIN	63,200.		63,200.	
TOTAL INCOME NOT INCLUDED IN RETURN	63,200.		63,200.	

**Application for Automatic Extension of Time To File Certain
Business Income Tax, Information, and Other Returns**

OMB No. 1545-0233

► **File a separate application for each return.**
► **Go to www.irs.gov/Form7004 for instructions and the latest information.**

**Print
or
Type**

Name

**CHICAGO ASSOCIATION OF REALTORS BUSINESS
INFORMATION SERVICES, INC. & SUBSIDIARIES**

Identifying number

47-4639535

Number, street, and room or suite no. (If P.O. box, see instructions.)

430 N. MICHIGAN AVE, STE 800

City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code).)

CHICAGO, IL 60611

Note: File request for extension by the due date of the return. See instructions before completing this form.

Part I Automatic Extension for Certain Business Income Tax, Information, and Other Returns. See instructions.

1 Enter the form code for the return listed below that this application is for **12**

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041 (estate other than a bankruptcy estate)	04	Form 1120-REIT	23
Form 1041 (trust)	05	Form 1120-RIC	24
Form 1041-N	06	Form 1120S	25
Form 1041-QFT	07	Form 1120-SF	26
Form 1042	08	Form 3520-A	27
Form 1065	09	Form 8612	28
Form 1066	11	Form 8613	29
Form 1120	12	Form 8725	30
Form 1120-C	34	Form 8804	31
Form 1120-F	15	Form 8831	32
Form 1120-FSC	16	Form 8876	33
Form 1120-H	17	Form 8924	35
Form 1120-L	18	Form 8928	36
Form 1120-ND	19		

Part II All Filers Must Complete This Part

- 2** If the organization is a foreign corporation that does not have an office or place of business in the United States, check here ►
- 3** If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here **STMT 1** ► ☒ **X**
If checked, attach a statement listing the name, address, and employer identification number (EIN) for each member covered by this application.
- 4** If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here ►
- 5a** The application is for calendar year _____, or tax year beginning **OCTOBER 1, 2019**, and ending **SEPTEMBER 30, 2020**
- b Short tax year.** If this tax year is less than 12 months, check the reason: Initial return ☐ Final return ☐
Change in accounting period Consolidated return to be filed Other (See instructions - attach explanation.)

6 Tentative total tax	6	115.
7 Total payments and credits. See instructions	7	25,000.
8 Balance due. Subtract line 7 from line 6. See instructions	8	0.

LHA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form **7004** (Rev. 12-2018)

FORM 7004

AFFILIATED GROUP INFORMATION

STATEMENT 1

NAME AND ADDRESS OF EACH MEMBER OF THE AFFILIATED GROUP

FEIN

CHICAGO ASSOCIATION OF REALTORS, INC.
430 N. MICHIGAN AVE., SUITE 800
CHICAGO, IL 60611

36-2348007

NORTHERN ILLINOIS REAL ESTATE
430 N. MICHIGAN AVE, SUITE 800
CHICAGO, IL 60611

36-3425361

2019 TAX RETURN FILING INSTRUCTIONS

ILLINOIS FORM IL-1120

FOR THE YEAR ENDING

September 30, 2020

Prepared For:

Chicago Association of Realtors Business
Information Services Inc & Subsidiaries
430 N Michigan Ave, Ste 800
Chicago, IL 60611

Prepared By:

Crowe LLP
225 West Wacker Drive, Suite 2600
Chicago, IL 60606-1224

To Be Signed and Dated By:

The appropriate corporate officer(s).

Amount of Tax:

Total tax	\$	48,671
Less: payments and credits	\$	59,052
Plus: other amount	\$	0
Plus: interest and penalties	\$	640
Overpayment	\$	9,741

Overpayment:

Credit to your estimated tax	\$	9,741
Other amount	\$	0
Refunded to you	\$	0

Make Check Payable to:

Not applicable

Mail Tax Return and Check (if applicable) to:

This return has qualified for electronic filing. After you have reviewed your return for accuracy, please sign, date and return Form 8879-SO to our office. We will then transmit your return to the IDOR. Do not mail a copy of the return.

Return Must be Mailed On or Before:

Please return signed IDOR authorization form to us as soon as possible. This must be signed and returned to us by July 15, 2021.

Special Instructions:

8879-SO**State-Only e-file Signature Authorization****2019**

- ▶ Do not send to the Taxing Authority. This is not a tax return.
▶ Keep this form for your records.

Taxpayer name

CHICAGO ASSOCIATION OF REALTORS BUSINESS

FEIN

47 14639535**Part I Electronically Filed States****ILLINOIS****Part II Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

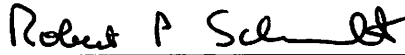
Under penalties of perjury, I declare that I have examined a copy of my electronic income tax return and accompanying schedules and statements for tax year 2019, and to the best of my knowledge and belief, it is true, correct, and complete. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the taxing authority and to receive from the taxing authority (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the taxing authority and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my state taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. I further understand that this also authorizes the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

☒ I authorize **CROWE LLP** to enter or generate my PIN **12345**
ERO firm name
as my signature on my tax year 2019 electronically filed income tax return. Enter five numbers, but do not enter all zeros

I will enter my PIN as my signature on my tax year 2019 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶



Date ▶

6/21/2021

Title ▶

SENIOR VICE PRESIDENT - FINANCE**Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

36307335092

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2019 electronically filed income tax return for the taxpayer indicated above.

ERO's signature ▶



Date ▶

6/21/2021

ERO Must Retain This Form
Do Not Submit This Form to the Taxing Authority

Illinois Department of Revenue
2019 Form IL-1120
Corporation Income and Replacement Tax Return



See "When should I file?" in the Form IL-1120 instructions for a list of due dates.

If this return is not for calendar year 2019, enter your fiscal tax year here.

Tax year beginning OCTOBER 1, 2019, ending SEPTEMBER 30, 2020
month day month day year

Enter the amount you are paying.

\$ 0.00

This form is for tax years ending on or after December 31, 2019, and before December 31, 2020.

WARNING For all other situations, see instructions to determine the correct form to use.

Step 1: Identify your corporation

A Enter your complete legal business name.

If you have a name change, check this box. ☐

CHICAGO ASSOCIATION OF REALTORS BUSIN
Name: **INFORMATION SERVICES INC & SUBSIDIARI**

B Enter your mailing address.

Check this box if either of the following apply: ☐

- this is your **first return**, or
- you have an **address change**.

C/O: _____

Mailing address: 430 N MICHIGAN AVE, STE 800

City: CHICAGO State: IL ZIP: 60611

C If this is the first or final return, check the applicable box(es).

☐ First return

☐ Final return (Enter the date of termination. mm dd yyyy)

D If this is a final return because you sold this business, enter the date sold (mm dd yyyy) _____, and the new owner's FEIN. _____

E Check the box and see the instructions if your business is a:

☒ Unitary Filer (Combined return) ☐ Foreign insurer

F If you completed the following, check the box and **attach** the federal form(s) to this return.

☐ Federal Form 8886 ☐ Federal Schedule M-3,
Part II, Line 12

G Apportionment Formulas. Mark the appropriate box or boxes and see

Apportionment Formula instructions.

☒ Sales companies
☐ Insurance companies ☐ Financial organizations
☐ Transportation companies ☐ Federally regulated exchanges

H Check this box if you attached Illinois Schedule UB. ☒

I Check this box if you attached the Subgroup Schedule. ☐

J Check this box if you attached Illinois Schedule 1299-D. ☐

K Check this box if you attached Form IL-4562. ☐

L Check this box if you attached Illinois Schedule M (for businesses). ☐

M Check this box if you attached Schedule 80/20. ☐

N Enter your federal employer identification number (FEIN).

47-4639535

O If you are a member of a group filing a federal consolidated return, enter the FEIN of the parent. _____

P Enter your North American Industry Classification System (NAICS) Code. See instructions.

531390

Q Enter your corporate file (charter) number assigned to you by the Secretary of State.

70105977

R Enter the city, state, and ZIP code where your accounting records are kept. (Use the two-letter postal abbreviation, e.g., IL, GA, etc.)

CHICAGO IL 60611
City State ZIP

S If you are making the business income election to treat all nonbusiness income as business income, check this box and enter zero on Lines 24 and 32. ☐

T Check your method of accounting.

☐ Cash ☒ Accrual ☐ Other _____

U If you are making a discharge of indebtedness adjustment on Schedules NLD or UB/NLD, or Form IL-1120, Line 36, check this box and **attach** federal Form 982. ☐

V Check this box if you attached Schedule INL. ☐

W If you annualized your income on Form IL-2220, check this box and **attach** Form IL-2220. ☐

X Check this box if your business activity is protected under Public Law 86-272. ☐

Y Check this box if you are a 52/53 week filer. ☐

▲ Attach your payment and Form IL-1120-V here.

► If you owe tax on Line 67, complete a payment voucher, Form IL-1120-V. Write your FEIN, tax year ending, and "IL-1120-V" on your check or money order and make it payable to "Illinois Department of Revenue." Attach your voucher and payment here.

► Refer to the 2019 IL-1120 Instructions for the address to mail your return.

ID: 2BX

949401 01-08-20

IL-1120 (R-12/19)

This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty.

IR

NS

DR

**Step 2: Figure your income or loss**

(Whole dollars only)

1	Federal taxable income from U.S. Form 1120, Line 30. Attach a copy of your federal return.	1	463,659 .00
2	Net operating loss deduction from U.S. Form 1120, Line 29a. This amount cannot be negative.	2	.00
3	State, municipal, and other interest income excluded from Line 1.	3	.00
4	Illinois income and replacement tax and surcharge deducted in arriving at Line 1.	4	48,671 .00
5	Illinois Special Depreciation addition. Attach Form IL-4562.	5	.00
6	Related-Party Expenses additions. Attach Schedule 80/20.	6	.00
7	Distributive share of additions. Attach Schedule(s) K-1-P or K-1-T.	7	.00
8	Other additions. Attach Schedule M (for businesses).	8	.00
9	Add Lines 1 through 8. This amount is your income or loss.	9	512,330 .00

Step 3: Figure your base income or loss

10	Interest income from U.S. Treasury and other exempt federal obligations.	10	.00
11	River Edge Redevelopment Zone Dividend subtraction. Attach Schedule 1299-B.	11	.00
12	River Edge Redevelopment Zone Interest subtraction. Attach Schedule 1299-B.	12	.00
13	High Impact Business Dividend subtraction. Attach Schedule 1299-B.	13	.00
14	High Impact Business Interest subtraction. Attach Schedule 1299-B.	14	.00
15	Contribution subtraction. Attach Schedule 1299-B.	15	.00
16	Contributions to certain job training projects. See instructions.	16	.00
17	Foreign Dividend subtraction. Attach Schedule J. See instructions.	17	.00
18	Illinois Special Depreciation subtraction. Attach Form IL-4562.	18	.00
19	Related-Party Expenses subtraction. Attach Schedule 80/20.	19	.00
20	Distributive share of subtractions. Attach Schedule(s) K-1-P or K-1-T.	20	.00
21	Other subtractions. Attach Schedule M (for businesses).	21	.00
22	Total subtractions. Add Lines 10 through 21.	22	.00
23	Base income or loss. Subtract Line 22 from Line 9.	23	512,330 .00

STOP	A If the amount on Line 23 is derived inside Illinois only, check this box and enter the amount from Step 3, Line 23 on Step 5, Line 35. You may not complete Step 4. (You must leave Step 4, Lines 24 through 34 blank.) <input type="checkbox"/>
	Note → If you are a unitary filer, do not check this box. Check the box on Line B and complete Step 4.
	B If any portion of the amount on Line 23 is derived outside Illinois, or you are a unitary filer, check this box and complete all lines of Step 4. (Do not leave Lines 28 through 30 blank.) See instructions. <input checked="" type="checkbox"/>

Step 4: Figure your income allocable to Illinois (Complete only if you checked the box on Line B, above.)

24	Nonbusiness income or loss. Attach Schedule NB.	24	0 .00
25	Business income or loss included in Line 23 from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates. See instructions.	25	0 .00
26	Add Lines 24 and 25.	26	0 .00
27	Business income or loss. Subtract Line 26 from Line 23.	27	512,330 .00
28	Total sales everywhere. This amount cannot be negative.	28	5,030,550
29	Total sales inside Illinois. This amount cannot be negative.	29	5,030,550
30	Apportionment Factor. Divide Line 29 by Line 28. Round to six decimal places.	30	1.000000
31	Business income or loss apportionable to Illinois. Multiply Line 27 by Line 30.	31	512,330 .00
32	Nonbusiness income or loss allocable to Illinois. Attach Schedule NB.	32	0 .00
33	Business income or loss apportionable to Illinois from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates. See instructions.	33	0 .00
34	Base income or loss allocable to Illinois. Add Lines 31 through 33.	34	512,330 .00

**Step 5: Figure your net income**

35	Base income or net loss from Step 3, Line 23, or Step 4, Line 34.	35	512,330 .00
36	Discharge of indebtedness adjustment. Attach federal Form 982. See instructions.	36	.00
37	Adjusted base income or net loss. Add Lines 35 and 36. See instructions.	37	512,330 .00
38	Illinois net loss deduction. Attach Schedule NLD or UB/NLD. If Line 37 is zero or a negative amount, enter zero.	38	0 .00
39	Net income. Subtract Line 38 from Line 37.	39	512,330 .00

Step 6: Figure your replacement tax after credits

40	Replacement tax. Multiply Line 39 by 2.5% (.025).	40	12,808 .00
41	Recapture of investment credits. Attach Schedule 4255.	41	.00
42	Replacement tax before credits. Add Lines 40 and 41.	42	12,808 .00
43	Investment credits. Attach Form IL-477.	43	.00
44	Replacement tax after credits. Subtract Line 43 from Line 42. If the amount is negative, enter zero.	44	12,808 .00

Step 7: Figure your income tax after credits

45	Income tax. Multiply Line 39 by 7.00% (.07)	45	35,863 .00
46	Recapture of investment credits. Attach Schedule 4255.	46	.00
47	Income tax before credits. Add Lines 45 and 46.	47	35,863 .00
48	Income tax credits. Attach Schedule 1299-D.	48	.00
49	Income tax after credits. Subtract Line 48 from Line 47. If the amount is negative, enter zero.	49	35,863 .00

Step 8: Figure your refund or balance due

50	Replacement tax before reductions. Enter the amount from Line 44.	50	12,808 .00
51	Foreign Insurer replacement tax reduction. Attach Schedule INS or UB/INS. See instructions.	51	.00
52	Subtract Line 51 from Line 50. This is your net replacement tax.	52	12,808 .00
53	Income tax before reductions. Enter the amount from Line 49.	53	35,863 .00
54	Foreign Insurer income tax reduction. Attach Schedule INS or UB/INS. See instructions.	54	.00
55	Subtract Line 54 from Line 53. This is your net income tax.	55	35,863 .00
56	Compassionate Use of Medical Cannabis Program Act surcharge. See instructions.	56	.00
57	Sale of assets by gaming licensee surcharge. See instructions.	57	.00
58	Total net income and replacement taxes and surcharges. Add Lines 52, 55, 56, and 57.	58	48,671 .00
59	Underpayment of estimated tax penalty from Form IL-2220. See instructions.	59	640 .00
60	Total taxes, surcharges, and penalty. Add Lines 58 and 59.	60	49,311 .00

61	Payments. See instructions.		
a	Credits from previous overpayments.	61a	1,022 .00
b	Total payments made before the date this return is filed.	61b	58,030 .00
c	Pass-through withholding reported to you on Schedule(s) K-1-P or K-1-T. Attach Schedule(s) K-1-P or K-1-T.	61c	.00
d	Illinois gambling withholding. Attach Form(s) W-2G.	61d	.00

62	Total payments. Add Lines 61a through 61d.	62	59,052 .00
63	Overpayment. If Line 62 is greater than Line 60, subtract Line 60 from Line 62.	63	9,741 .00
64	Amount to be credited forward. See instructions.	64	9,741 .00
65	Refund. Subtract Line 64 from Line 63. This is the amount to be refunded.	65	.00

66 Complete to direct deposit your refund.

Routing Number _____ Checking or Savings
Account Number _____

67	Tax due. If Line 60 is greater than Line 62, subtract Line 62 from Line 60. This is the amount you owe.	67	.00
----	--	----	-----

Step 9: Sign below - Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct and complete.

Sign Here	Signature of authorized officer	Date (mm/dd/yyyy)	SENIOR VICE PRESIDENT - FINANCE 312-803-4900	<input checked="" type="checkbox"/> Check if the Department may discuss this return with the paid preparer shown in this step.
	NICOLE BENCIK	6/21/2021	312-803-4900	
Paid Preparer Use Only	Print/Type paid preparer's name	Paid preparer's signature	Date (mm/dd/yyyy)	Check if self-employed <input type="checkbox"/> Paid Preparer's PTIN
	Firm's name ▶ CROWE LLP		Firm's FEIN ▶ 35-0921680	
	Firm's address ▶ 225 WEST WACKER DRIVE, SUITE 2600 CHICAGO, IL 60606-1224	Firm's phone ▶ 312-899-7000		

▶ Enter the amount of your payment on the top of page 1 in the space provided.

Illinois Department of Revenue
2019 Schedule UB

**Combined Apportionment for
Unitary Business Group**

For tax years ending on or after December 31, 2019

Common year ending for the
unitary business group
09 20
Month Year

Attach to your Form IL-1120, Form IL-1120-ST, and Form IL-1065.

IL Attachment no. 5

Step 1 - Provide Your Membership Information CHICAGO ASSOCIATION OF REALTORS BUSINESS

◆ **INFORMATION SERVICES INC & SUBSIDIARIES**

47-4639535

Enter the name of the designated agent (see general instructions).

Enter the federal employer identification
number (FEIN).

Enter the name of the designated agent last year, if it is different than above.

Enter the FEIN, if it is different than above.

◆ **CHICAGO ASSOCIATION OF REALTORS BUSINESS INFORMATION SERVICES INC & SUBSIDIARIES**

47-4639535

Enter the name of the controlling corporation (see general instructions).

Enter the FEIN, if it is different than above.

◆ If the controlling corporation is a member of this unitary group, check the box. ☒ **X**

Section A - List all members. See Specific Instructions.

A	B	C	D	E	F	G	H	I
Name	FEIN	Year ending (Mo/Year)	Protected by P.L. 86-272	New member	Inactive member	Holding company	Appor- tionment method	Member Type
◆ 1 CHICAGO ASSOCIATON OF REALTORS BUSINESS								
◆ 2 INFORMATION SERVICES INC & SUBSIDIARIES	47-4639535	09/20					S	
◆ 3 CHICAGO ASSOCIATION OF REALTORS, INC.								
◆ 4 MULTIPLE LISTING SERVICES	36-2348007	09/20					S	
◆ 5 NORTHERN ILLINOIS REAL ESTATE								
◆ 6 INFORMATION NETWORK INC.	36-3425361	09/20					S	
◆ 7								
◆ 8								
◆ 9								
◆ 10								

Section B - List any mergers with members listed in Section A. See Specific Instructions.

A	B
Person who has merged with member	Member listed in Section A
◆ 1 Name FEIN	◆ Name FEIN Date of merger
◆ 2 Name FEIN	◆ Name FEIN Date of merger
◆ 3 Name FEIN	◆ Name FEIN Date of merger

Section C - List all members who left the group during this tax year. See Specific Instructions.

A	B
Member who was sold	Entity to which member in Column A was sold
◆ 1 Name FEIN	◆ Name FEIN Date of sale
◆ 2 Name FEIN	◆ Name FEIN Date of sale
◆ 3 Name FEIN	◆ Name FEIN Date of sale

Section D - Provide information about your excluded members

See Specific Instructions and complete Step 5 if the answer below is 1 or greater.

1 Enter the total number of members excluded. ◆

Illinois Department of Revenue
Schedule UB



CHICAGO ASSOCIATION OF REALTORS BUSINESS
INFORMATION SERVICES INC & SUBSIDIARIES

47-4639535

Enter your name as shown on the tax return of the member filing the Schedule UB.

Enter your federal employer identification no. (FEIN).

Step 2 - Figure your federal taxable income ♦ **Read specific instructions before completing.** ♦

	A	B	C	D	E
	47-4639535	36-2348007	36-3425361	Eliminations and adjustments between members (attach explanation)	Combined totals
	FEIN	FEIN	FEIN		
1 Net receipts or sales	.00	4,990,489.00	40,061.00	.00	5,030,550.00
2 Cost of goods sold	.00	4,144,822.00	.00	.00	4,144,822.00
3 Gross profit. Subtract Line 2 from Line 1.	.00	845,667.00	40,061.00	.00	885,728.00
4 Dividends	.00	.00	.00	.00	.00
5 Interest	.00	46,292.00	.00	.00	46,292.00
6 Gross rents	.00	.00	.00	.00	.00
7 Gross royalties	.00	.00	.00	.00	.00
8 Capital gain net income	.00	.00	.00	.00	.00
9 Net gain or loss from U.S. Form 4797	.00	.00	.00	.00	.00
10 Other income	.00	581,314.00	60,875.00	.00	642,189.00
11 Total income. Add Lines 3 through 10.	.00	1,473,273.00	100,936.00	.00	1,574,209.00
12 Compensation of officers	.00	.00	.00	.00	.00
13 Salaries and wages less employment credit	.00	496,483.00	64,055.00	.00	560,538.00
14 Repairs and maintenance	.00	5,713.00	712.00	.00	6,425.00
15 Bad debts	.00	.00	.00	.00	.00
16 Rents	.00	50,929.00	5,349.00	.00	56,278.00
17 Taxes and licenses	.00	49,560.00	117.00	.00	49,677.00
18 Interest	.00	.00	5,635.00	.00	5,635.00
19 Charitable Contributions	.00	40,000.00	.00	.00	40,000.00
20 Depreciation	.00	.00	.00	.00	.00
21 Depletion	.00	.00	.00	.00	.00
22 Advertising	.00	.00	.00	.00	.00
23 Pension plan, etc.	.00	.00	.00	.00	.00
24 Employee benefit programs	.00	.00	.00	.00	.00
25 RESERVED					
26 Other deductions	.00	330,532.00	61,465.00	.00	391,997.00
27 Total deductions. Add Lines 12 through 26.	.00	973,217.00	137,333.00	.00	1,110,550.00
28 Taxable income. Subtract Line 27 from Line 11.	.00	500,056.00	-36,397.00	.00	463,659.00
29 a Net operating loss deduction	.00	.00	.00	.00	.00
b Special deductions	.00	.00	.00	.00	.00
c Total NOL and special deductions	.00	.00	.00	.00	.00
30 Federal taxable income or loss for Illinois purposes. Subtract Line 29c from Line 28.	.00	500,056.00	-36,397.00	.00	463,659.00

Illinois Department of Revenue

Schedule UB CHICAGO ASSOCIATION OF REALTORS BUSINESS
INFORMATION SERVICES INC & SUBSIDIARIES

47-4639535

Enter your name as shown on the tax return of the member filing the Schedule UB.

Enter your federal employer identification no. (FEIN).

Step 3 - Figure your combined business income

	A	B	C	D	E
	47-4639535	36-2348007	36-3425361	Eliminations and adjustments between members (attach explanation)	Combined totals
	FEIN	FEIN	FEIN		
1 Enter the amounts from Step 2, Line 30.	.00	500,056.00	-36,397.00	.00	1 463,659
Addition Modifications					
2 Net operating loss deduction from Step 2, Line 29a	.00	.00	.00	0.00	2 .00
3 State, municipal, and other interest income excluded in arriving at Line 1	.00	.00	.00	.00	3 .00
4 Illinois income and replacement tax and surcharge deducted in arriving at Line 1	.00	48,671.00	.00	.00	4 48,671.00
5 Illinois Special Depreciation	.00	.00	.00	.00	5 .00
6 Related-party expenses	.00	.00	.00	.00	6 .00
7 Distributive share of additions	.00	.00	.00	.00	7 .00
8 Other additions	.00	.00	.00	.00	8 .00
9 Total income or loss. Add Lines 1 through 8.	.00	548,727.00	-36,397.00	.00	9 512,330.00
Subtraction Modifications					
10 Interest income from U.S. Treasury and other exempt federal obligations	.00	.00	.00	.00	10 .00
11 River Edge Redevelopment Zone Dividend subtraction	.00	.00	.00	.00	11 .00
12 River Edge Redevelopment Zone Interest subtraction	.00	.00	.00	.00	12 .00
13 High Impact Business Dividend subtraction	.00	.00	.00	.00	13 .00
14 High Impact Business Interest subtraction	.00	.00	.00	.00	14 .00
15 Contribution subtraction	.00	.00	.00	.00	15 .00
16 Contributions to certain job training projects	.00	.00	.00	.00	16 .00
17 Foreign Dividend subtraction	.00	.00	.00	.00	17 .00
18 Illinois Special Depreciation subtraction	.00	.00	.00	.00	18 .00
19 Related-Party expenses subtraction	.00	.00	.00	.00	19 .00
20 Distributive share of subtractions	.00	.00	.00	.00	20 .00
21 Other subtractions	.00	.00	.00	.00	21 .00
22 Total subtractions. Add Lines 10 through 21.	.00	.00	.00	.00	22 .00
23 Base income or loss. Subtract Line 22 from Line 9.	.00	548,727.00	-36,397.00	.00	23 512,330.00
24 Nonbusiness income or loss	.00	.00	.00	.00	24 .00
25 Business income or loss from non-unitary partnerships, partnerships included on this Schedule UB, S corporations, trusts, or estates. (See inst.)	.00	.00	.00	.00	25 .00
26 Add Lines 24 and 25.	.00	.00	.00	.00	26 .00
27 Combined unitary business income or loss. Subtract Line 26 from Line 23.	.00	548,727.00	-36,397.00	.00	27 512,330.00

Illinois Department of Revenue
Schedule UB



CHICAGO ASSOCIATION OF REALTORS BUSINESS
INFORMATION SERVICES INC & SUBSIDIARIES

47-4639535

Enter your name as shown on the tax return of the member filing the Schedule UB.

Enter your federal employer identification number (FEIN).

Step 4 - Figure your apportionment factor

Complete a separate Subgroup Schedule for each Insurance Company Subgroup, Financial Organization Subgroup, Regulated Exchange Subgroup, and Transportation Company Subgroup, in order to determine the amounts to enter on Schedule UB, Step 4, Lines 2 and 3 for each member of that subgroup.

A ◆	B ◆	C ◆
47-4639535	36-2348007	36-3425361
FEIN	FEIN	FEIN

D
Combined
totals

1 Enter your combined unitary business income or loss from Step 3, Column E, Line 27 here. ►

1 512,330

2 Enter the net sales everywhere. ◆ 0.00 ◆ 4,990,489.00 ◆ 40,061.00 2 5,030,550.00

3 Enter the net sales within Illinois. ◆ 0.00 ◆ 4,990,489.00 ◆ 40,061.00 3 5,030,550.00

4 Apportionment factor

Divide Line 3 of each
Column by Line 2,

Column D. (Round to
six decimal places.)

.000000 .992036 .007964 4 1.000000

5 Illinois business income or loss. 0.00 508,250.00 4,080.00 5 512,330.00

6 Nonbusiness income or loss. ◆ .00 ◆ .00 ◆ .00 6 .00

7 Non-unitary or combined partnership business income or loss. ◆ .00 ◆ .00 ◆ .00 7 .00

8 Net income or loss. 0.00 508,250.00 4,080.00 8 512,330.00

9 Net income or loss of members who are not C corporations. ◆ .00 ◆ .00 ◆ .00 9 .00

10 Combined net income. 0.00 508,250.00 4,080.00 10 512,330.00

If the amount in Column D, Line 10 is negative, complete Lines 11 through 13.

11 Net loss from Line 8. .00 .00 .00 11 .00

12 Divide Line 11 of each Column A through C, by the amount in Line 11, Column D. (Round to six decimal places.) 12

13 Allocated net loss. Multiply Line 12 by Line 10, Column D. .00 .00 .00 13 .00

After you have completed this schedule, see the specific instructions for completing Form IL-1120, Form IL-1120-ST, or Form IL-1065 in the Schedule UB instructions.

47-4639535

Enter your federal employer identification no. (FEIN).

A	B	C Reason for exclusion (check one)	
Name	FEIN	80/20 company	not unitary

[illegible]



Illinois Department of Revenue

2019 IL-2220 Computation of Penalties for Businesses

Attach to your Form IL-1120, IL-1120-ST, IL-1065, IL-1041, or IL-990-T
For tax years ending **on or after** December 31, 2019.

IL Attachment No. 19

Read this information first - We encourage you to let us figure your penalties and send you a bill instead of completing this form yourself. You must complete this form if you are using the annualized income installment method for late-payment penalty for underpayment of estimated tax in Step 6. You do not owe the late-payment penalty for underpayment of estimated tax if you made timely estimated installment payments equaling at least 90 percent of this year's tax liability or 100 percent of the prior year's tax liability (provided you reported a liability in the prior year and it was not a short taxable year). See the Specific Instructions for more information. The late-payment penalty for underpayment of estimated tax is based on the tax shown due on your original return. Do not use the tax shown on an amended return filed after the extended due date of the return to compute your required installments in Step 2.

Step 1: Provide the following information

- 1 This form is for the 2019 calendar year or fiscal year beginning OCTOBER 1, 2019 , and ending SEPTEMBER 30, 2020
Month Day Year Month Day Year
- 2 Enter your FEIN as it appears on your annual return. 47-4639535
CHICAGO ASSOCIATION OF REALTORS BUSINESS
- 3 Enter your name as it appears on your annual return. 3 INFORMATION SERVICES INC & SUBSIDIARIES
- 4 If your prior year return was filed under a different FEIN than the one shown on Line 2, enter that number here. 4

Step 2: Figure your required installments - Form IL-1120 filers only

	A This year		B Last year	
5 Enter the total net income and replacement taxes and surcharges from Form IL-1120. If prior year's tax was zero or you filed a short year return, enter "N/A" in Column B. You may be required to make installments even if you enter "N/A" in Column B. See instructions.	5	<u>48,671.00</u>		<u>29,688.00</u>
6 Enter the total amount of pass-through withholding and Illinois gambling withholding from Form IL-1120. See instructions.	6	<u>0.00</u>		
7 Subtract Line 6 from Line 5, Column A.	7	<u>48,671.00</u>		
8 Multiply Line 5, Column A, by 90% (.9).	8	<u>43,804.00</u>		
9 If Line 7, is \$400 or less, enter zero and go to Step 3. Otherwise, enter the lesser of Line 8, or Line 5, Column B. (If Line 7 is more than \$400 and you entered "N/A" in Line 5, Column B, enter the amount from Line 8.)	9	<u>29,688.00</u>		
10 Divide the amount on Line 9 by four. This is the amount of each required installment. (If you used the annualized income installment method, see instructions for Line 12.)	10	<u>7,422.00</u>		
11 Enter in Quarters 1 through 4, the installment date that corresponds with the 15th day of the 4th, 6th, 9th, and 12th month of your tax year.		Quarter 1	Quarter 2	Quarter 3
	11	<u>01/15/20</u>	<u>03/16/20</u>	<u>06/15/20</u>
12 Enter the required installment. See instructions.	12	<u>7,422.00</u>	<u>7,422.00</u>	<u>7,422.00</u>
13 Enter the amount of any pass-through and gambling withholding. See instructions.	13	<u>.00</u>	<u>.00</u>	<u>.00</u>
14 Subtract Line 13 from Line 12. If the amount is negative, use brackets.	14	<u>7,422.00</u>	<u>7,422.00</u>	<u>7,422.00</u>
15 If the amount on Line 16 of the previous quarter is negative, enter that amount as a positive here. Otherwise, enter zero.	15	<u>Skip this line for Quarter 1.</u>	<u>.00</u>	<u>.00</u>
16 Subtract Line 15 from Line 14. If the amount is negative, use brackets.	16	<u>7,422.00</u>	<u>7,422.00</u>	<u>7,422.00</u>



Step 3: Figure your unpaid tax - all taxpayers

- 17 Enter your total net income and replacement tax, surcharge, and pass-through withholding you owed and reported on behalf of your members. See instructions. 17 48,671.00
- 18 a Enter the total amount of all payments made on or before the original due date of your tax return. Include credit(s) carried forward from a prior year (see instructions); total estimated payments, prepayments, extension payments or annual payments made with your tax return; pass-through withholding reported on your behalf; and withholding shown on your W-2G or 1099 forms. 18a 59,052.00
- b Form IL-1120 filers only: Enter the total of all Columns, Line 12. All others, enter zero. 18b 29,688.00
- Enter the **greater** of Line 18a or Line 18b here. 18 59,052.00
- 19 Subtract Line 18 from Line 17. If this amount is
-positive, enter that amount here. Continue to Step 4 and enter this amount in
Penalty Worksheet 2, Line 23, Column C.
-zero or negative, enter that amount here and, if negative, use brackets. 19 <10,381>.00

Step 4: Figure your late-payment penalty

Use Penalty Worksheet 1 to figure your late-payment penalty for underpayment of estimated tax.
Use Penalty Worksheet 2 to figure your late-payment penalty for unpaid tax.

You must follow the instructions in order to properly complete the penalty worksheets.

- 20 Enter the amount and the date of each payment you made. Include any credit(s) carried forward from a prior year. See instructions.

Amount	Date paid	Amount	Date paid	Amount	Date paid
a <u>1,022</u>	<u>01/15/20</u>	e _____	_____	i _____	_____
b <u>28,190</u>	<u>03/15/20</u>	f _____	_____	j _____	_____
c <u>3,110</u>	<u>06/15/20</u>	g _____	_____	k _____	_____
d <u>14,730</u>	<u>09/15/20</u>	h _____	_____	l _____	_____

Penalty rates

Number of days late	Penalty rate
1 - 3002
31 or more10



Penalty Worksheet 1 - Late-payment penalty for underpayment of estimated tax - Form IL-1120 filers only

If you paid the required amount from Line 16 by the payment due date on Line 11 for each quarter, do not complete this worksheet.

21 Enter the unpaid amounts from Line 16, Quarters 1 through 4, on the first line of the appropriate quarters in Column C below.

A	B	C	D	E	F	G	H	I
Period	Due date	Unpaid amount	Payment applied	Balance due (Col. C - Col. D)	Payment date	No. of days late	Penalty rate (see above)	Penalty
Qtr. 1	SEE STATEMENT 1							
Qtr. 2								
Qtr. 3								
Qtr. 4								

22 Add Column I, Quarters 1 through 4. This is your **late-payment penalty for underpayment of estimated tax**.

Enter the total amount here and on Form IL-1120, Step 8, Line 59.

22 640

You may apply any remaining overpayment from the 4th quarter in Column E above to any underpayment when figuring

Penalty Worksheet 2, only if the payment date shown in the 4th quarter of Column F is after the original due date of the return.

Penalty Worksheet 2 - Late-payment penalty for unpaid tax

23 Enter any positive amount from Line 19 on the first line of Column C below.

A	B	C	D	E	F	G	H	I
	Due date	Unpaid amount	Payment applied	Balance due (Col. C - Col. D)	Payment date	No. of days late	Penalty rate (see above)	Penalty
Return								

24 Add Column I. This is your **late-payment penalty for unpaid tax**.

Enter the total amount here and on Step 5, Line 28.

24

Step 5: Figure your late-filing penalty, total penalties, and the amount you owe

Complete Lines 25 through 27 to figure your late-filing penalty only if

- you are filing your return after the extended due date; and
- your tax was not paid by your original due date.

25 Enter the amount of your tax due from your return. See instructions.

25 .00

26 Multiply the amount on Line 25 by 2% (.02).

26 .00

27 Enter the lesser of Line 26 or \$250. This is your **late-filing penalty**.

27 .00

28 Enter your **late-payment penalty for unpaid tax** from Line 24.

28 .00

29 If you have an overpayment on your tax return*, enter that amount as a <negative number>.

If you have an amount due on your tax return*, enter that amount here.

29 <9,741>

* See instructions for the correct line references for all tax returns.

30 Add Lines 27, 28, and 29. If the result is positive, this is the total amount you owe. If the result is negative, this is the amount you are overpaid.

30 <9,741>

This amount may not match your overpayment or tax due on your original tax form. Pay the amount on Line 30 if you wish to pay your penalties at this time. Otherwise, we will send you a bill.



Step 6: Complete the annualization worksheet for Step 2, Line 12

Complete this worksheet if your income was not received evenly throughout the year and you choose to annualize your income. **Beginning with Column A, complete Lines 31 through 51 of each column.** If you fail to complete all lines of Step 6, Lines 31 through 51, Columns A through D, we may disregard your election to annualize your income and calculate your late-payment penalty for underpayment of estimated tax based on four equal installments.

	A	B	C	D
		First 3 months	First 6 months	First 9 months
31 Enter your Illinois net income for each period. If negative, enter zero.	31			
32 Annualization factors	32			
33 Multiply Line 31 by Line 32.	33			
34 Enter your Illinois net income for each period. If negative, enter zero.	34			
35 Annualization factors	35			
36 Multiply Line 34 by Line 35.	36			
37 In Column A, enter the amount from Line 36, Column A. In Columns B, C, and D, enter the lesser of Line 33 or 36 for each period.	37			
38 Net replacement tax for the period. See instructions.	38			
39 Net income tax for the period. See instructions.	39			
40 Cannabis surcharge for the period. See instructions.	40			
41 Sale of Assets by Gaming Licensee surcharge for the period. See instructions.	41			
42 Add Lines 38, 39, 40, and 41.	42			
43 Applicable percentage	43			
44 Multiply Line 42 by Line 43. This is your annualized installment.	44			
45 Add the amounts on Line 51 of each of the preceding columns and enter the total here.	45			
46 Subtract Line 45 from Line 44. If less than zero, enter zero.	46			
47 See instructions.	47			
48 Enter the amount from Line 50 of the preceding column.	48			
49 Add Lines 47 and 48.	49			
50 If Line 49 is greater than Line 46, subtract Line 46 from Line 49. Otherwise, enter zero.	50			
51 Enter the lesser of Line 46 or 49 here and on Step 2, Line 12. This is your required installment.	51			

For Column A only: Go directly to Line 34

Go to Column B, Line 31

Go to Column C, Line 31

Go to Column D, Line 31

FORM IL-2220

PENALTY WORKSHEET 1

STATEMENT 1

A	B	C	D	E	F	G	H	I
PERIOD	DUE DATE	UNPAID AMOUNT	PAYMENT APPLIED	BALANCE DUE (COL C - D)	PAYMENT DATE	DAYS LATE	RATE	PENALTY
QTR. 1	01/15/2020	7,422	1,022	6,400	01/15/2020	0		0
		6,400	28,190	-21,790	03/15/2020	60	.10	640
QTR. 2	03/15/2020	7,422	21,790	-14,368	03/15/2020	0		0
QTR. 3	06/15/2020	7,422	14,368	-6,946	03/15/2020	0		0
QTR. 4	09/15/2020	7,422	6,946	476	03/15/2020	0		0
		476	3,110	-2,634	06/15/2020	0		0
TOTAL TO IL-2220, LINE 22								640

Form 1120 Department of the Treasury Internal Revenue Service	U.S. Corporation Income Tax Return For calendar year 2019 or tax year beginning OCTOBER 1, 2019 , ending SEPTEMBER 30, 2020	OMB No. 1545-0123 <div style="font-size: 2em; font-weight: bold; margin-top: 10px;">2019</div>																																																												
▶ Go to www.irs.gov/Form1120 for instructions and the latest information.																																																														
A Check if: 1a Consolidated return (attach Form 851) <input checked="" type="checkbox"/> b Life/nonlife consolidated return <input type="checkbox"/> 2 Personal holding co. (attach Sch. PH) <input type="checkbox"/> 3 Personal service corp. (see instructions) <input type="checkbox"/> 4 Schedule M-3 attached <input type="checkbox"/>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td rowspan="3" style="width:10%; text-align: center; vertical-align: middle;">TYPE OR PRINT</td> <td style="width:70%;">Name CHICAGO ASSOCIATION OF REALTORS BUSINESS INFORMATION SERVICES INC & SUBSIDIARIES</td> <td style="width:20%;">B Employer identification number 47-4639535</td> </tr> <tr> <td>Number, street, and room or suite no. If a P.O. box, see instructions. 430 N MICHIGAN AVE, STE 800</td> <td>C Date incorporated 06/30/2015</td> </tr> <tr> <td>City or town, state or province, country, and ZIP or foreign postal code CHICAGO, IL 60611</td> <td>D Total assets (see instructions) \$ 5,477,441.</td> </tr> </table>	TYPE OR PRINT	Name CHICAGO ASSOCIATION OF REALTORS BUSINESS INFORMATION SERVICES INC & SUBSIDIARIES	B Employer identification number 47-4639535	Number, street, and room or suite no. If a P.O. box, see instructions. 430 N MICHIGAN AVE, STE 800	C Date incorporated 06/30/2015	City or town, state or province, country, and ZIP or foreign postal code CHICAGO, IL 60611	D Total assets (see instructions) \$ 5,477,441.																																																						
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	City or town, state or province, country, and ZIP or foreign postal code CHICAGO, IL 60611	D Total assets (see instructions) \$ 5,477,441.																																																												
E Check if: (1) Initial return (2) Final return (3) Name change (4) Address change																																																														
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Sign Here 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 taxpayer) is based on all information of which preparer has any knowledge.	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;"> Signature of officer _____ Date _____ </td> <td style="width:40%;"> Title SENIOR VICE PRESIDENT </td> <td style="width:20%;"> May the IRS discuss this return with the preparer shown below? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </td> </tr> </table>		Signature of officer _____ Date _____	Title SENIOR VICE PRESIDENT	May the IRS discuss this return with the preparer shown below? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																																									
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Schedule C Dividends, Inclusions, and Special Deductions (see instructions)	(a) Dividends and inclusions	(b) %	(c) Special deductions (a) x (b)
1 Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		50	
2 Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		65	
3 Dividends on certain debt-financed stock of domestic and foreign corporations		see instructions	
4 Dividends on certain preferred stock of less-than-20%-owned public utilities		23.3	
5 Dividends on certain preferred stock of 20%-or-more-owned public utilities		26.7	
6 Dividends from less-than-20%-owned foreign corporations and certain FSCs		50	
7 Dividends from 20%-or-more-owned foreign corporations and certain FSCs		65	
8 Dividends from wholly owned foreign subsidiaries		100	
9 Subtotal. Add lines 1 through 8		see instructions	
10 Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11 Dividends from affiliated group members		100	
12 Dividends from certain FSCs		100	
13 Foreign-source portion of dividends received from a specified 10%-owned foreign corporation (excluding hybrid dividends) (see instructions)		100	
14 Dividends from foreign corporations not included on line 3, 6, 7, 8, 11, 12, or 13 (including any hybrid dividends)			
15 Section 965(a) inclusion		see instructions	
16a Subpart F inclusions derived from the sale by a controlled foreign corporation (CFC) of the stock of a lower-tier foreign corporation treated as a dividend (attach Form(s) 5471) (see instructions)		100	
b Subpart F inclusions derived from hybrid dividends of tiered corporations (attach Form(s) 5471) (see instructions)			
c Other inclusions from CFCs under subpart F not included on line 15, 16a, 16b, or 17 (attach Form(s) 5471) (see instructions)			
17 Global intangible Low-Taxed income (GILTI) (attach Form(s) 5471 and Form 8992)			
18 Gross-up for foreign taxes deemed paid			
19 IC-DISC and former DISC dividends not included on line 1, 2, or 3			
20 Other dividends			
21 Deduction for dividends paid on certain preferred stock of public utilities			
22 Section 250 deduction (attach Form 8993)			
23 Total dividends and inclusions. Add column (a), lines 9 through 20. Enter here and on page 1, line 4			
24 Total special deductions. Add column (c), lines 9 through 22. Enter here and on page 1, line 29b			

Schedule J Tax Computation and Payment (see instructions)**Part I - Tax Computation**

1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120))	<input checked="" type="checkbox"/>	
2	Income tax. See instructions		97,368.
3	Base erosion minimum tax amount (attach Form 8991)		
4	Add lines 2 and 3		97,368.
5a	Foreign tax credit (attach Form 1118)	5a	
b	Credit from Form 8834 (see instructions)	5b	
c	General business credit (attach Form 3800)	5c	
d	Credit for prior year minimum tax (attach Form 8827)	5d	
e	Bond credits from Form 8912	5e	
6	Total credits. Add lines 5a through 5e	6	
7	Subtract line 6 from line 4	7	97,368.
8	Personal holding company tax (attach Schedule PH (Form 1120))	8	
9a	Recapture of investment credit (attach Form 4255)	9a	
b	Recapture of low-income housing credit (attach Form 8611)	9b	
c	Interest due under the look-back method-completed long-term contracts (attach Form 8697)	9c	
d	Interest due under the look-back method-income forecast method (attach Form 8866)	9d	
e	Alternative tax on qualifying shipping activities (attach Form 8902)	9e	
f	Other (see instructions - attach statement)	9f	
10	Total. Add lines 9a through 9f	10	
11	Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31	11	97,368.

Part II - Section 965 Payments (see instructions)

12	2019 net 965 tax liability paid from Form 965-B, Part II, column (k), line 3. Enter here and on page 1, line 32	12	
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Part III - Payments, Refundable Credits, and Section 965 Net Tax Liability

13	2018 overpayment credited to 2019	13	2,018.
14	2019 estimated tax payments	14	92,110.
15	2019 refund applied for on Form 4466	15	()
16	Combine lines 13, 14, and 15	16	94,128.
17	Tax deposited with Form 7004	17	25,000.
18	Withholding (see instructions)	18	
19	Total payments. Add lines 16, 17, and 18	19	119,128.
20	Refundable credits from:		
a	Form 2439	20a	
b	Form 4136	20b	
c	Form 8827, line 5c	20c	
d	Other (attach statement - see instructions)	20d	
21	Total credits. Add lines 20a through 20d	21	
22	2019 net 965 tax liability from Form 965-B, Part I, column (d), line 3. See instructions	22	
23	Total payments, credits, and section 965 net tax liability. Add lines 19, 21, and 22. Enter here and on page 1, line 33	23	119,128.

Form **1120** (2019)

Schedule K Other Information (see instructions)

1 Check accounting method: a <input type="checkbox"/> Cash b <input checked="" type="checkbox"/> Accrual c Other (specify) _____	Yes	No
2 See the instructions and enter the:		
a Business activity code no. 531390		
b Business activity SERVICE		
c Product or service REAL ESTATE INFORMATION		
3 Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? _____ If "Yes," enter name and EIN of the parent corporation CHICAGO ASSOCIATION OF REALTORS 36-0904580	X	
4 At the end of the tax year:		
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part I of Schedule G (Form 1120) (attach Schedule G) _____	X	
b Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part II of Schedule G (Form 1120) (attach Schedule G) _____		X
5 At the end of the tax year, did the corporation:		
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on Form 851 , Affiliations Schedule? For rules of constructive ownership, see instructions _____ If "Yes," complete (i) through (iv) below.		X

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions _____ If "Yes," complete (i) through (iv) below.		X
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(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Country of Organization	(iv) Maximum Percentage Owned in Profit, Loss, or Capital

6 During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? See sections 301 and 316 _____ If "Yes," file Form 5452 , Corporate Report of Nondividend Distributions. See the instructions for Form 5452. If this is a consolidated return, answer here for the parent corporation and on Form 851 for each subsidiary.		X
7 At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of the total voting power of all classes of the corporation's stock entitled to vote or at least 25% of the total value of all classes of the corporation's stock? _____ For rules of attribution, see section 318. If "Yes," enter: (a) Percentage owned _____ and (b) Owner's country _____ (c) The corporation may have to file Form 5472 , Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter the number of Forms 5472 attached _____		X
8 Check this box if the corporation issued publicly offered debt instruments with original issue discount _____ If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.		
9 Enter the amount of tax-exempt interest received or accrued during the tax year \$ _____		
10 Enter the number of shareholders at the end of the tax year (if 100 or fewer) 1		
11 If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here _____ If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3) must be attached or the election will not be valid.		
12 Enter the available NOL carryover from prior tax years (do not reduce it by any deduction reported on page 1, line 29a.) \$ 561,610.		

Schedule K Other Information (continued from page 4)

	Yes	No
13 Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the tax year and its total assets at the end of the tax year less than \$250,000?		X
If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the tax year ► \$		
14 Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement? See instructions		X
If "Yes," complete and attach Schedule UTP.		
15a Did the corporation make any payments in 2019 that would require it to file Form(s) 1099?	X	
b If "Yes," did or will the corporation file required Form(s) 1099?	X	
16 During this tax year, did the corporation have an 80%-or-more change in ownership, including a change due to redemption of its own stock?		X
17 During or subsequent to this tax year, but before the filing of this return, did the corporation dispose of more than 65% (by value) of its assets in a taxable, non-taxable, or tax deferred transaction?		X
18 Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million?		X
19 During the corporation's tax year, did the corporation make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474) of the Code?		X
20 Is the corporation operating on a cooperative basis?		X
21 During the tax year, did the corporation pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions		X
If "Yes," enter the total amount of the disallowed deductions ► \$		
22 Does the corporation have gross receipts of at least \$500 million in any of the 3 preceding tax years? (See sections 59A(e)(2) and (3))		X
If "Yes," complete and attach Form 8991.		
23 Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		X
24 Does the corporation satisfy one or more of the following? See instructions		X
a The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
b The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the corporation has business interest expense.		
c The corporation is a tax shelter and the corporation has business interest expense.		
If "Yes," to any, complete and attach Form 8990.		
25 Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
If "Yes," enter amount from Form 8996, line 14 ► \$		

Form **1120** (2019)

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		4,137,198.		3,999,303.
2a	Trade notes and accounts receivable	7,985.		7,808.	
b	Less allowance for bad debts	()	7,985.	()	7,808.
3	Inventories				
4	U.S. government obligations	SEE		SEE	
5	Tax-exempt securities	STATEMENT OF		STATEMENT OF	
6	Other current assets (att. stmt.)	CONSOLIDATED	10,895.	CONSOLIDATED	14,926.
7	Loans to shareholders	BEGINNING		ENDING	
8	Mortgage and real estate loans	BALANCE SHEET		BALANCE SHEET	
9	Other investments (att. stmt.)		1,401,657.		1,455,404.
10a	Buildings and other depreciable assets				
b	Less accumulated depreciation	()		()	
11a	Depletable assets				
b	Less accumulated depletion	()		()	
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization	()		()	
14	Other assets (att. stmt.)				
15	Total assets		5,557,735.		5,477,441.
Liabilities and Shareholders' Equity					
16	Accounts payable		1,293.		1,692.
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.)		3,537,810.		3,069,246.
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (att. stmt.)				
22	Capital stock: a Preferred stock				
b	Common stock	70,000.	70,000.	70,000.	70,000.
23	Additional paid-in capital		453,743.		453,743.
24	Retained earnings - Appropriated (attach statement)				
25	Retained earnings - Unappropriated		1,494,889.		1,882,760.
26	Adjustments to shareholders' equity (attach statement)				
27	Less cost of treasury stock	()		()	
28	Total liabilities and shareholders' equity		5,557,735.		5,477,441.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return

Note: The corporation may be required to file Schedule M-3. See instructions.

1	Net income (loss) per books	387,871.	7	Income recorded on books this year not included on this return (itemize):	
2	Federal income tax per books	97,561.		Tax-exempt interest \$	
3	Excess of capital losses over capital gains	40,384.			63,200.
4	Income subject to tax not recorded on books this year (itemize):				63,200.
5	Expenses recorded on books this year not deducted on this return (itemize):		8	Deductions on this return not charged against book income this year (itemize):	
a	Depreciation		a	Depreciation	\$
b	Charitable contributions		b	Charitable contributions	\$
c	Travel and entertainment	946.			
		97.			
		1,043.	9	Add lines 7 and 8	63,200.
6	Add lines 1 through 5	526,859.	10	Income (page 1, line 28) - line 6 less line 9	463,659.

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)

1	Balance at beginning of year	1,494,889.	5	Distributions: a Cash	
2	Net income (loss) per books	387,871.		b Stock	
3	Other increases (itemize):			c Property	
			6	Other decreases (itemize):	
4	Add lines 1, 2, and 3	1,882,760.	7	Add lines 5 and 6	
			8	Balance at end of year (line 4 less line 7)	1,882,760.