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## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2007

Department of the Treasury Internal Revenue Service(77

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

Open to Public Inspection

<b>3</b>	A	For t	he 2007 calend	dar year, e	or tax year beginning	, 2007,	and e	nding				
ENVELOPE DATE	В		ıf applicable		C Name of organization				D Emplo	yer lden	tification Number	
<b>5</b> 3	1	Ac	ldress change	Please use IRS label	BRISTOL TN-VA ASSO	CIATION OF REAL	TOR	S	62-	1268	8836	
異点		Na	ame change	or print or type.	Number and street (or P O box if ri				E Telepi	hone nur	mber	
24		in	itial return	See specific	900 ANDERSON ST, 21	ND FLOOR			(42	23) 9	968-1192	
#		Те	ermination	Instruc- tions.	City, town or country	State	ŻIP	code + 4	F Accou	inting	Cash X	Accrual
0		Ar	mended return		BRISTOL	TN	37	620		Other (sp	ecify) ►	
$\tilde{\square}$		ΠAΓ	oplication pending	Section	on 501(c)(3) organizations and	4947(a)(1) nonexempt		H and I are not apple			organizations	
0		٠ ـــــا		charit	table trusts must attach a com	pleted Schedule A		<b>H (a)</b> Is this a grou	up return for	affiliates	yes Yes	X No
~ 4	_			(Form	1 990 or 990-EZ).			<b>H (b)</b> If 'Yes,' ente			; <b>&gt;</b>	
		Web	site: ► N/A					H (C) Are all affilia			Yes	No
201			nization type					(If 'No,' attac				
Θ.		_	k only one)		301(c) • (III3CIT IIC	· · · · · · · · · · · · · · · · · · ·		H (d) Is this a sepa organization		-		<b>.</b>
					ization is not a 509(a)(3) suppo			<del></del>				X No
		orgai	nization choos	es to file a	<b>not</b> more than \$25,000. A returr a return, be sure to file a compl	lete return.		I Group Ex  M Check ▶			ation is not required	<del></del>
-					<u> </u>						), 990-EZ, or 990-PF	
ľ		rt I			8b, 9b, and 10b to line 12 ► 1 nses, and Changes in Ne		Palar		<u> </u>			
Į	Pa						oaiai	ices (See the	<del>2 11 15 (1 ()</del>	CHOIS	5.)	
		1			ants, and similar amounts recei	vea	. و ا	.1		_		
					advised funds		1 a			, .		
			·		not included on line 1a)		11					
			•	• •	(not included on line 1a)	1-1	10			. ]		
					ons (grants) (not included on lin		10	21		٠ , ا		
		i _	Total (add lines la through 1d) (c		noncash	·		02)		1 e		
		2			ue including government fees a		VII, I	ine 93)		3		300
		3	•		assessments RECE					4		300. 398.
		4			temporary cash investments_	00		•		5		396.
		5		a interest	from securities.	8 2010   9	ے ا	.1		7	<del></del>	
			Gross rents			[ \( \oldsymbol{O} \) \( \oldsymbol{O} \)	61	+				
			Less rental e			<u> </u>	[ 61	0		-		
		C	Net rental inc	come or (i	oss) Subtract line 6b from line	.P₹, U ! · _			,	6c		
	R E V	′	Other investr	nent incor	ne (describe	(A) Securities	1	(B) Othe	) or	<del>- '-</del> -	<del></del>	
	Ε	8a			es of assets other	(A) Securities	<del>                                     </del>	<del>-  </del>	-			
	N		than inventor	•			88	· · · · · · · · · · · · · · · · · · ·				
2010	E				is and sales expenses .		86			-		
20			Gain or (loss) (a		•	(D)	1 00	<u> </u>		0.4		
6					nbine line 8c, columns (A) and ivities (attach schedule) If any		cho	ck here ►	_	89		
8			Gross revenu			of contributions	, cne	ck liefe [				
<u> </u>		u	reported on I				9:	a				
100		b	•	•	other than fundraising expense	S	91					
					om special events. Subtract lin					9c		
SCANNED					ry, less returns and allowances		10:	al				
2			Less cost of		=		10			] [-]		
<b>E</b>				-	ales of inventory (attach schedule). Sub	stract line 10b from line 10a		··· 1 · · · · · · · · · · · · · · · · ·		10 c		
$\mathcal{Q}$		11			art VII, line 103)					11	76.	,272.
<b>U</b> 3		12			es 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c,	10c and 11				12		970.
•		13			n line 44, column (B))	100, 0,10 11				13		,021.
	E X P	14			eral (from line 44, column (C))					14	•	,320.
	P	15			44, column (D))					15		0.
	N S	16	_		(attach schedule)					16	<del></del>	
	S E S	17	=		nes 16 and 44, column (A)					17	143	,341.
•		18			the year Subtract line 17 from	line 12			<del></del>	18		629.
	N S	19		-	ances at beginning of year (from			•		19	57	,384.
	N S E E	20			issets or fund balances (attach					20	377	
	' T S	21	_		ances at end of year. Combine					21	58	,013.
•	ВА				work Reduction Act Notice, se		ions.		TEEA0101	<del></del>		

Form 990 (2007) BRISTOL TN-VA ASSOCIATION OF REALTORS Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required

υ	o not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 a	Grants paid from donor advised funds (attach sch)					,
	(cash \$					•
	non-cash \$)				-	
	If this amount includes foreign grants, check here	22 a			,	•
22 h	foreign grants, check here  Other grants and allocations (att sch)	22 a				, ,
	(cash \$					-
	non-cash \$)					•
	If this amount includes foreign grants, check here	22 b			The second of th	<u>.</u>
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule)	24				· · · · · · · · · · · · · · · · · · ·
25 a	Compensation of current officers,					
	directors, key employees, etc. listed in Part V-A	25 a	0.			
b	Compensation of former officers, directors, key employees, etc listed in Part V-B	25b				
c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section					
	4958(c)(3)(B)	25 c				
26	Salaries and wages of employees not included on lines 25a, b, and c	. 26	43,500.	30,450.	13,050.	0.
27	Pension plan contributions not included on lines 25a, b, and c	27				
28	Employee benefits not included on lines 25a - 27	28				
29	Payroll taxes	29	3,407.	2,385.	1,022.	0
30	Professional fundraising fees	30	500	0.	500.	0
31	Accounting fees Legal fees	31	500.	<u> </u>	300.	
32 33	Supplies	33	2,710.	2,710.	0.	0
34	Telephone .	34	3,210.	3,210.	ō.	0
35	Postage and shipping	35	703.	703.	0.	0
36	Occupancy .	36	3,300.	3,300.	0.	0
37	Equipment rental and maintenance	37				
38	Printing and publications	38				
39	Travel	39	12,279.	12,279.		0
40	Conferences, conventions, and meetings	40	8,676.	8,676.	0.	0
41	Interest	41	448.	0.	448.	0
42 43	Depreciation, depletion, etc (attach schedule) Other expenses not covered above (itemize)	42	770.		110.	† <u>-</u>
	CORPORATE FILING FEE	43a	20.	0.	20.	0
	ANNUAL BANQUET	43b	17,015.	17,015.		0
•	EDUCATION & LITERATURE	43c	17,253.	17,253.		0
	INSURANCE	43d	6,142.	0.	<del> </del>	0
•	MISCELLANEOUS EXPENSE	43e	1,347.	1,347.		0
	WEBPAGE	431	1,885.	1,885.		0
•	See Other Expenses Stmt	43g	20,946.	18,808.	2,138.	0
	Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B) · (D), carry these totals to lines 13 · 15)	44	143,341.	120,021.	23,320.	0
	t Costs. Check If you are followin	-			2	►
	any joint costs from a combined educatio es,' enter (i) the aggregate amount of the			licitation reported in (E	3) Program services? amount allocated to Pro	Yes X No

Partille: Statement of Program Service Accomplishments (See the Instructions.)

organization. How the publ	ic nerceives an organiz:	r some people, serves as the primary or sole source of information about ation in such cases may be determined by the information presented on it rate and fully describes, in Part III, the organization's programs and acco	is return ineretore.
What is the organization's i	orimary exempt purpose		Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
a ASSOCIATION I	PROMOTES AND FO	OSTERS HIGH STANDARDS OF CONDUCT ION, ADVANCES PROFESSIONAL GOALS FORMS SERVICES FOR ITS MEMBERS.	
		0.) If this amount includes foreign grants, check here	120,021.
	ns \$	) If this amount includes foreign grants, check here ▶	
	ons \$	) If this amount includes foreign grants, check here ►	
(Grants and allocation	ces	) If this amount includes foreign grants, check here ▶ ☐	
(Grants and allocation	<del></del>	) If this amount includes foreign grants, check here	100 001
	rvice Expenses (should	l equal line 44, column (B), Program services)	120,021.
BAA			Form <b>990</b> (2007)

Not	e: V	Where required, attached schedules and amounts within olumn should be for end-of-year amounts only.	the de	scription		(A) Beginning of year		<b>(B)</b> End of year
	45	Cash - non-interest-bearing .				15,930.	45	24,963.
	46	Savings and temporary cash investments				45,162.	46	47,874.
							,	
	47 a	Accounts receivable .	47 a		16,003.		-	
	b	Less, allowance for doubtful accounts	47 b			12,512.	47 c	16,003.
			13, 5					
	48 a	Pledges receivable	48 a					
	b	Less: allowance for doubtful accounts	48 b				48 c	
	49	Grants receivable					49	
	50 a	Receivables from current and former officers, directors employees (attach schedule)	s, trust	ees, and ke	y		50 a	
	b	Receivables from other disqualified persons (as define and persons described in section 4958(c)(3)(B) (attack	d unde	er section 49 dule)	958(f)(1))		50 b	
ASSETS	51 a	Other notes and loans receivable (attach schedule)	51 a				砂波	
T S	b	Less allowance for doubtful accounts	51 b				51 c	
	52	Inventories for sale or use					52	
	53	Prepaid expenses and deferred charges					53	
	54 a	Investments — publicly-traded securities	•	► ☐ Cost	∏FMV		54 a	
	b	Investments - other securities (attach sch)		► Cost	∏FMV		54 b	
	55 a	Investments - land, buildings, & equipment basis	55 a		28,151.		,	
	b	Less accumulated depreciation (attach schedule) . L-55 Stmt	55 b		26,741.	178.	55 c	1,410.
	56	Investments - other (attach schedule)					56	
	57 a	Land, buildings, and equipment basis	57 a				100	j
	b	Less. accumulated depreciation (attach schedule)	57 b				57 c	
	58	Other assets, including program-related investments					ļ	
		(describe >			)		58	
	59	Total assets (must equal line 74) Add lines 45 throug	h 58			73,782.	59	90,250.
	60	Accounts payable and accrued expenses				5,009.	60	1,728.
	61	Grants payable					61	
Ļ	62	Deferred revenue				11,389.	62	30,509.
A B I	63	Loans from officers, directors, trustees, and key employees (attach schedule)					63	
L	64 a	Tax-exempt bond liabilities (attach schedule)					64 a	1
T E S	b	Mortgages and other notes payable (attach schedule)					64 t	)
ร	65	Other liabilities (describe	<b>_</b> _		)		65	
	66	Total liabilities. Add lines 60 through 65				16,398.	66	32,237.
N	Orga	anizations that follow SFAS 117, check here 🕨 🛛 🗓	nd cor	mplete lines	67			
N E T		through 69 and lines 73 and 74						
	67	Unrestricted		•		57,384.	67	58,013.
ASSETS	68	Temporarily restricted					68	<u> </u>
Ş	69	Permanently restricted					69	
Q R	Orga	anizations that do not follow SFAS 117, check here	L	and comple	ete lines			
		70 through 74						
FUZD	70	Capital stock, trust principal, or current funds		E			70	
	71	Paid-in or capital surplus, or land, building, and equip					71	<del> </del>
Ĺ	72	Retained earnings, endowment, accumulated income,					72	
BALAZOES	73	Total net assets or fund balances. Add lines 67 throu 72. (Column (A) must equal line 19 and column (B) m	gh 69	or lines 70	through	57,384.	73	58,013.
Š	74	Total liabilities and not assets/fund balances. Add in				73 782	74	90.250

	rm <b>990</b> (2007) BRISTOL TN-VA AS	SOCIATION OF REALT	or <u>s</u>		268836 Page 5
P	art IV-A Reconciliation of Revenue	e per Audited Financial	Statements wit	h Revenue per Retu	ırn (See the
	instructions.)			<del></del>	<del></del>
а	Total revenue, gains, and other support p		S		a 143,970.
b	Amounts included on line a but not on Pa	rt I, line 12.	1 1		₹
	1 Net unrealized gains on investments		<u>b1</u>		
	2Donated services and use of facilities	•	. <b>b2</b>		
	3Recoveries of prior year grants		b3		
	4Other (specify)				
			<u>b4</u>	:	
	Add lines <b>b1</b> through <b>b4</b>			<u> </u>	<u>b</u>
C	Subtract line <b>b</b> from line <b>a</b>				c 143,970.
d	Amounts included on Part I, line 12, but r	not on line <b>a:</b>		17	`
	1 Investment expenses not included on Par	t I, line 6b	d1	,	<u> </u>
	2Other (specify)			[-	
			d2		<u>.</u>
	Add lines d1 and d2		~		d
е	Total revenue (Part I, line 12) Add lines	<b>c</b> and <b>d</b> .		▶	e 143,970.
P	art IV-B Reconciliation of Expens		I Statements wi	th Expenses per Re	
_					
а	Total expenses and losses per audited fir	nancial statements			a 143,341.
Ь	Amounts included on line a but not on Pa				-
	1 Donated services and use of facilities		Ь1		
	2Prior year adjustments reported on Part I	line 20	b2	, A	-
	3Losses reported on Part I, line 20	, into 20	b3		
			03		*
	4Other (specify).		b4	2	5- "4.
	Add been by the scale by				in.
	Add lines <b>b1</b> through <b>b4</b>			-	142 241
С	Subtract line <b>b</b> from line <b>a</b>			-	c 143,341.
d	Amounts included on Part I, line 17, but i		11		
	1 Investment expenses not included on Pai	rt I, line 6b	<u>d1</u>		
	2Other (specify)			F	
			d2		` <u>.</u>
	Add lines d1 and d2		* *	_	<u>d</u>
e	Total expenses (Part I, line 17). Add line				e 143,341.
P	art V-A Current Officers, Director or key employee at any time dur	s, Trustees, and Key E	mployees (List e	ach person who was an	officer, director, trustee,
_	or key employee at any time dur				
	(A) Nowa and address	(B) Title and average hours per week devoted	(C) Compensation (if not paid,	n (D) Contributions to employee benefit	(E) Expense account and other
	(A) Name and address	to position	enter -0-)	plans and deferred	l allowances
_				compensation plan	\$
	EE				
A'	TTACHED				
L.	IST TN 37620	Director 2.00		0. 0.	0.
_					
			•		
_		·		<u> </u>	<del> </del>
_	······································		<u> </u>		<del>                                     </del>
		]			1
_		TEEA0105 0	L		Form 000 (0007)
B/	NA	IEEAU105 U	0/02/0/		Form <b>990</b> (2007)

Form 990 (2007) BRISTOL TN-VA ASSOCIA	TION OF REALTO	ORS	62-1268836	Page <b>6</b>
Part V-A Current Officers, Directors, Tru	stees, and Key Er	nployees (continue	d)	Yes No
75 a Enter the total number of officers, directors, and trustees pe				
b Are any officers, directors, trustees, or key emplished in Schedule A, Part I, or highest compens A, Part II-A or II-B, related to each other throug identifies the individuals and explains the relation.	sated professional and h family or business re	other independent contra	actors listed in Schedule	75b X
c Do any officers, directors, trustees, or key emplisted in Schedule A, Part I, or highest compens A, Part II-A or II-B, receive compensation from to the organization? See the instructions for the	sated professional and any other organization definition of 'related o	other independent contri ns, whether tax exempt of organization'	actors listed in Schedule	75c X
If 'Yes,' attach a statement that includes the inf		the instructions.		75d X
d Does the organization have a written conflict of		unlayees That Base	ived Componention o	
Part V-B Former Officers, Directors, Trus  Benefits (If any former officer, directo during the year, list that person below at the instructions)	r trustee or key empl	lovee received compensa	ation or other benefits (descr	ibed below)
(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense ccount and other allowances
NONE				
		İ		
Part VI Other Information (See the inst	ructions.)			Yes No
76 Did the organization make a change in its active if 'Yes,' attach a detailed statement of each change in the statement of e		nducting activities?		76 X
77 Were any changes made in the organizing or g If 'Yes,' attach a conformed copy of the change		ut not reported to the IRS	S?	77 X
78a Did the organization have unrelated business g b If 'Yes,' has it filed a tax return on Form 990-T		or more during the year	r covered by this return?	78a X 78b
79 Was there a liquidation, dissolution, termination year? If 'Yes,' attach a statement	-	action during the		79 X
80 a Is the organization related (other than by associatements), governing bodies, trustees, office	ciation with a statewiders, etc., to any other e	e or nationwide organiza xempt or nonexempt org	tion) through common anization?	80 a X
<b>b</b> If 'Yes,' enter the name of the organization ▶			· <del></del>	
81 a Enter direct and indirect political expenditures.		check whether it is e ons )	exempt or nonexempt	
b Did the organization file Form 1120-POL for the	s year?			81 b X
BAA				Form <b>990</b> (2007

Form 990 (2007) BRISTOL TN-VA ASSOCIATION OF REALTORS	62-126883	5	F	Page <b>7</b>
Part VI4 Other Information (continued)			Yes	No
82 a Did the organization receive donated services or the use of materials, equipment, or facilities substantially less than fair rental value?	at no charge or at	82 a		<u>x</u> _
<b>b</b> If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	826	ر در		
83 a Did the organization comply with the public inspection requirements for returns and exemption	applications?	83 a	X	
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contribu		83 b	N/	Α
84a Did the organization solicit any contributions or gifts that were not tax deductible?		84 a		X
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such connot tax deductible?	ntributions or gifts were	84 b	i :	لمدند
85 a 501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	•	85 a		X
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85 b		X
If 'Yes' was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the waiver for proxy tax owed for the prior year.	e organization received a			
c Dues, assessments, and similar amounts from members	85c N/A	1	, , , ,	7.5
d Section 162(e) lobbying and political expenditures .	85d N/A			14.5°
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A			á,
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A		をなった	EG 4 1
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	•	85 g	N/	<u> </u>
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reason dues allocable to nondeductible lobbying and political expenditures for the following tax year?	nable estimate of	85 h	N/	A X
86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on	100 1	4 12 1s		
line 12	86a N/A 86b N/A	13/2		A
<ul> <li>b Gross receipts, included on line 12, for public use of club facilities</li> <li>501(c)(12) organizations Enter a Gross income from members or shareholders</li> </ul>	86 b   N/A   87 a   N/A	۵. ١	 -5-,	
<b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b N/A	ا را د شاه	3	
·			5 ,	~ } ***
88 a At any time during the year, did the organization own a 50% or greater interest in a taxable c or an entity disregarded as separate from the organization under Regulations sections 301 77 If 'Yes,' complete Part IX	orporation of partnership, 01-2 and 301 7701-3?	88 a	`````````	X
<b>b</b> At any time during the year, did the organization, directly or indirectly, own a controlled entity section 512(b)(13)? If 'Yes,' complete Part XI	within the meaning of	88 ь		х
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year un	nder.	- 1	00 ,	-7.
section 4911 ►N/A , section 4912 ►N/A ; section	4955 <b> N/A</b>			
b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 exceeduring the year or did it become aware of an excess benefit transaction from a prior year? If explaining each transaction	ss benefit transaction 'Yes,' attach a statement	89 b	n/	A
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	ne 🕨	4		
d Enter Amount of tax on line 89c, above, reimbursed by the organization	<b>&gt;</b>	أَنْ أَنْ الْ	14 E 3	أنستنأ
e All organizations. At any time during the tax year, was the organization a party to a prohibite	d tax shelter transaction?	89 e		х
f All organizations Did the organization acquire a direct or indirect interest in any applicable in	surance contract?	89 f	, , , .	X
g For supporting organizations and sponsoring organizations maintaining donor advised funds. organization, or a fund maintained by a sponsoring organization, have excess business holding	Did the supporting ngs at any time during		12 47 13 22 1	[
the year?  90 a List the states with which a copy of this return is filed ► <u>See States Filed In</u>	· 	89 g		X
<b>b</b> Number of employees employed in the pay period that includes March 12, 2007 (See instructions)		90 b		1
91 a The books are in care of ► DEBBIE FLICK Telephone n	umber ► (423) 968-	1192	2	
Located at ► 900 ANDERSON STREET, 2ND FLOOR BRISTOL,	TN ZIP + 4 > 3762	0	T	Т
b At any time during the calendar year, did the organization have an interest in or a signature of	or other authority over a	02.	Yes	No
financial account in a foreign country (such as a bank account, securities account, or other fi	nanciai account)?	91 b	1 - 1,50 - 18	13.7
If 'Yes,' enter the name of the foreign country		- 138.T.		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Financial Accounts	oreign Bank and	7		
BAA		Forr	n <b>990</b>	(2007)

Form 990 (2007) BRISTOL TN-VA ASS		OF REAL	TORS		62-1268	836	Page 8
Part VI Other Information (continu					<del></del>		Yes No
c At any time during the calendar year, did		on maintair	n an office o	utside of the Un	ited States?	91 c	<u></u>
If 'Yes,' enter the name of the foreign co							
92 Section 4947(a)(1) nonexempt charitable					nere	l	<b>-</b> []
and enter the amount of tax-exempt inte					▶ 92		<del></del>
Part VII Analysis of Income-Produ						<del></del>	
	Unrelated	business i	ncome	Excluded by se	ection 512, 513, or 514		(E)
<b>Note:</b> Enter gross amounts unless otherwise indicated	(A) Business code		B) ount	(C) Exclusion code	<b>(D)</b> Amount	Related	or exempt n income
93 Program service revenue:							
a	ļ					<del></del>	
b							
c	ļ						
d	<b></b>						
e				<u></u>		<u> </u>	
f Medicare/Medicaid payments							
g Fees & contracts from government agencies	<u></u>				· · · · · · · · · · · · · · · · · · ·	ļ	
94 Membership dues and assessments							65,300.
95 Interest on savings & temporary cash invmnts							2,398.
96 Dividends & interest from securities							
97 Net rental income or (loss) from real estate:	Francisco (Francisco)			1 4 A A B A B A B A B A B A B A B A B A B	The second of the	11 }	
a debt-financed property					<u> </u>	ļ	
<b>b</b> not debt-financed property							
98 Net rental income or (loss) from pers prop							
99 Other investment income							
100 Gain or (loss) from sales of assets other than inventory							
101 Net income or (loss) from special events			<del></del>				-
102 Gross profit or (loss) from sales of inventory		<del></del>	<del></del>				
103 Other revenue a	-30 214 W	المعتبرين المعتقدين		45			- 1.1
b BANQUET	22.7						6,757.
c EDUCATION-SEMINARS			•				10,259.
d HOMES MAG ADVERTISING							56,756.
e MISCELLANEOUS						<u> </u>	2,500.
104 Subtotal (add columns (B), (D), and (E))	Selver Little	·	· · · · · · · · · · · · · · · · · · ·	. S			143,970.
105 Total (add line 104, columns (B), (D),		-		1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	<u> </u>		143,970.
Note: Line 105 plus line 1e, Part I, should equ		on line 12	Part I				
Part VIII Relationship of Activities				empt Purpos	es (See the instru	ctions.)	
Line No. Explain how each activity for whice of the organization's exempt purp	oses (other tha	n by provid	ling funds fo	or such purposes	ided importantly to the	accompilsi	IIIIeiit
94 DUES AND FEES ASSESSI	ED FOR ME	MBERSHI	P AND S	ERVICES P	ROVIDED		
95 INVESTED FUNDS GENERA	ATE INTER	EST INC	OME USE	D IN MEMB	ER SERVICES		
103 FEES: FUNCTION-RELAT	ED ACTIVI	TIES					
						/	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Part.IX Information Regarding Tax	xable Subsi	<u>diaries a</u>	nd Disrec	jarded Entiti	<b>es</b> (See the instruc	ctions.)	N/A
(A)	(B)	1	(0	<b>:</b> )	(D)		(E)
Name, address, and EIN of corporation,	Percentage	e of	Nature of	activities	Total	End	-of-year
partnership, or disregarded entity	ownership in	terest			ıncome	a	ssets
		8		<del></del>	<u> </u>		
		8				<u> </u>	
		ૠ					<del> </del>
		%			<u> </u>	<u> </u>	
Part X Information Regarding Tra	ansfers Ass	ociated v	with Perso	onal Benefit	Contracts (See th	<u>e instruc</u>	
a Did the organization, during the year, receive any f	unds, directly or in	ndirectly, to pa	y premiums on	a personal benefit	contract?	Yes	<b>—</b>
<b>b</b> Did the organization, during the year, pa	iy premiums, d	lirectly or in	directly, on	a personal bene	efit contract?	Yes	x No
Note: If 'Yes' to (b), file Form 8870 and Fo	orm 4720 (see	instructions	s)				

Form 9	990 (	2007) BRISTOL TN-VA ASSOCIATION C			62-1268836	F	Page <b>9</b>
Par	t XI		nd From Controlled En	tities. Complete	only if the		
		organization is a controlling organization	n as defined in section	1512(b)(13).		N/A	
						Yes	No
106	Did	the reporting organization make any transfers to a s,' complete the schedule below for each controlled	controlled entity as defined	in section 512(b)(13)	of the Code? If		
$\overline{}$	163		T	(C)			<del></del>
		(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description transfer	of Amo	(D) unt of tran	sfer
a	- <b></b>						
b							
С							
		Totals					
			》 第5個社会學 57 West 2013年	The state of the s	, 1472 ( - 17 <u>1</u>	Yes	No
				E10/b	(12) of the Code2		1
107	Yes	the reporting organization receive any transfers from s,' complete the schedule below for each controlled	entity	ined in Section 512(b)	(13) of the Code?	11	<u> </u>
		(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description transfer	of Amo	(D) ount of tra	nsfer
а							
ь							
С							
		Totals					
			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	REPART OF THE	1 Walt 12 4 6	Yes	No
108	Did	the organization have a binding written contract in nuities described in question 107 above?	effect on August 17, 2006,	covering the interest,	rents, royalties, ar	1	110
Pleas	se	Under penalties of perjury, I declare that I have examined this ret true, correct, and complete Declaration of preparer (other than o	urn, including accompanying schedul fficer) is based on all information of v	es and statements, and to the which preparer has any know	ne best of my knowledge rledge	and belief, it	15
Sign Here		Signature of officer  Type or print heme and title	ident	Date			
Paid Pre-	-	Preparer's signature Daugh Shackle	CPA 09	Check self- employ		SSN or PTII	N (See
pare	r's	Firm's name (or yours if self-	ASSOCIATES, PLLC				
Use Only	,	employed), address and	···	EIN	<b>•</b>		_
Unity		ZIP + 4 BRISTOL	TN 37620	Phone	no ► (423) 9	89-338	7

Form 990 (2007)

BAA

Form 990, Page 2, Part II, Line 43

Other Expenses Stmt	nses Str	es Stmt	ner Expe	Oth
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Other expenses not covered above (itemize).	(A) Total	( <b>B)</b> Program services	(C) Management and general	<b>(D)</b> Fundraising
HOMES MAG. ADVERTISING EXPENSE	16,789.	16,789.	0.	0.
REGISTRATION EXPENSE	2,019.	2,019.	0.	0.
AWARDS	1,712.	0.	1,712.	0.
BANK CHARGES	426.	0.	426.	0.
Total	20,946.	18,808.	2,138.	0.

Form 990. Part VI, Page 7, Line 90a

States Filed In

Virginia

Tennessee

Form 990, Page 4, Part IV, Lines 55a & 55b

Investments - Land, Buildings and Equipment Statement

	(a) Cost/Other Basis	<b>(b)</b> Accumulated Depreciation	<b>(c)</b> Book Value
FURNITURE & FIXTURES	28,151.	26,741.	1,410.
Total	28,151.	26,741.	1,410.







900 Anderson Street, 2<sup>nd</sup> Floor, Bristol, Tennessee 37620 ~ 423-968-1192 ~ Fax 423-968-2840 ~ email btvar@earthlink.net

## 2007 Board of Directors

President	Wiley Webb	190 Bluff City Highway, Bristol, TN 37620
President Elect	Jim Warren	1916 Euclid Avenue, Bristol, VA 24201
Vice President	Pat Callebs	425 State Street, Bristol, VA 24201
Secretary	Cindy Eller-Vaughn	1845 Lee Highway, Bristol, VA 24201
Treasurer	Victoria Warren	824 Cumberland St., Bristol, VA 24201
Immed. Past President	Marie Hodge	403 Sixth Street, Bristol, Tennessee 37620

Director	Mike Mumpower	190 Bluff City Highway, Bristol, TN 37620
Director	Phyllis Harrison	836 State Street, Bristol, TN 37620
Director	Howard Morris	603 Volunteer Parkway, Ste. 2, Bristol, TN 37620
Director	Gracie Hines	601 Volunteer Parkway, Bristol, TN 37620
Director	David Leonard	601 Volunteer Parkway, Bristol, TN 37620
Director	Doug Murray	3285 Lee Highway, Bristol, VA 24201
Sr. MLS Rep	Karen Cox	1916 Euclid Avenue, Bristol, VA 24201