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Form 990-EZ

Department of the Treasury
Internal Revenue Service

Short Form

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)

► Sponsoring organizations and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

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

OMB No 1545-1150

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 10-01-2008, and ending 09-30-2009

B Check if applicable

Address change

Name change

Initial return

Termination

Amended return

Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization

WISCONSIN REALTORS ASSOC - MANITOWOC
COUNTY BOARD OF REALTORS

Number and street (or P O box, if mail is not delivered to street address)Room/suite

117b Gardner St

City or town, state or country, and ZIP + 4

Two Rivers, WI 54241

D Employer identification number

23-7393185

E Telephone number

(920) 553-6227

F Group Exemption Number

◆ Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method ☒ Cash ☐ Accrual
Other (specify) ►

I Website:► www.mcbrealtors.org

H Check ► ☒ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

J Organization type (check only one)—☒ 501(c) (6) ☐ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check ☐ if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than \$25,000 A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ

► \$ 210,094

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	189,396
	4	Investment income	4	3,909
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less cost or other basis and sales expenses	5b	2,286
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c	-2,286
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming , check here ☐	6c	2,391
	a	Gross revenue (not including \$ ____ 0 ____ of contributions reported on line 1)		
	b	Less direct expenses other than fundraising expenses		
Expenses	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
	7a	Gross sales of inventory, less returns and allowances	7a	
	b	Less cost of goods sold	7b	
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe )	8	6,158
	9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	199,568
	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	21,150
	13	Professional fees and other payments to independent contractors	13	2,775
Net Assets	14	Occupancy, rent, utilities, and maintenance	14	8,343
	15	Printing, publications, postage, and shipping	15	510
	16	Other expenses (describe )	16	125,923
	17	Total expenses (add lines 10 through 16)	17	158,701
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	40,867
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	279,638
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year (combine lines 18 through 20)	21	320,505

Part II Balance Sheets—If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)		(A) Beginning of year		(B) End of year	
22	Cash, savings, and investments	240,020	22	295,319	
23	Land and buildings		23		
24	Other assets (describe )	41,557	24	27,055	
25	Total assets	281,577	25	322,374	
26	Total liabilities (describe )	1,939	26	1,869	
27	Net assets or fund balances (line 27 of column (B) must agree with line 21) .	279,638	27	320,505	

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

Cat No 10642I

Form 990-EZ (2008)

Part III Statement of Program Service Accomplishments (See the instructions for Part III)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)	
What is the organization's primary exempt purpose? TRADE ASSOCIATION			
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title			
28 publication of multiple listing real estate periodical issues published semi-monthly & distributed to over 100 members (Grants \$ 0) If this amount includes foreign grants, check here . . . ☐		28a	0
29 provide educational programs for members to improve & elevate professional status & competency of members (Grants \$ 0) If this amount includes foreign grants, check here . . . ☐		29a	0
30 provide orientation programs for new members provide professional standards & arbitration proceedings for all members (Grants \$ 0) If this amount includes foreign grants, check here . . . ☐		30a	0
31 Other program services (attach schedule) (Grants \$) If this amount includes foreign grants, check here . . . ☐		31a	
32 Total program service expenses (add lines 28a through 31a)		32	

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)				
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
See Additional Data Table				

Additional Data

Software ID:
Software Version:
EIN: 23-7393185
Name: WISCONSIN REALTORS ASSOC - MANITOWOC
COUNTY BOARD OF REALTORS

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
tami thompson 117b gardner st two rivers, WI 54241	president 1 00	0	0	0
jolene funk 117b gardner st two rivers, WI 54241	vice president 1 00	0	0	0
judy barnette 117b gardner st two rivers, WI 54241	secretary/treasurer 1 00	0	0	0
tom lenz 117b gardner st two rivers, WI 54241	director 1 00	0	0	0
joan dolan 117b gardner st two rivers, WI 54241	director 1 00	0	0	0
bill illgen 117b gardner st two rivers, WI 54241	director 1 00	0	0	0
corey kornely 117b gardner st two rivers, WI 54241	director 1 00	0	0	0
beth kolbeck 117b gardner st two rivers, WI 54241	director 1 00	0	0	0
deb rohr 117b gardner st two rivers, WI 54241	director 1 00	0	0	0
lori hagenow 117b gardner st two rivers, WI 54241	association executive 20 00	21,150	0	0

Part V

Other Information (Note the statement requirements in the instructions for Part VI.)

Yes

No

33

Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity

33

No

34

Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes

34

No

35

If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but **not** reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T

a

Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?

35a

No

b

If "Yes," has it filed a tax return on **Form 990-T** for this year?

35b

36

Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N

36

No

37a

Enter amount of political expenditures, direct or indirect, as described in the instructions

37a

0

b

Did the organization file **Form 1120-POL** for this year?

37b

38a

Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?

38a

No

b

If "Yes," complete Schedule L, Part II and enter the total amount involved

38b

39

501(c)(7) organizations. Enter

a

Initiation fees and capital contributions included on line 9

39a

b

Gross receipts, included on line 9, for public use of club facilities

39b

40a

Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955

b

Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I.

40b

c

Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958

0

d

Enter amount of tax on line 40c reimbursed by the organization

0

e

All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?

40e

No

41

List the states with which a copy of this return is filed

42a

The books are in care of Lori Hagenow
117B Gardner St
Located at Two rivers, WI
Telephone no (920) 553-6227
ZIP + 4 54241

b

At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
If "Yes," enter the name of the foreign country
See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.**

42b

Yes

No

c

At any time during the calendar year, did the organization maintain an office outside of the U S ?
If "Yes," enter the name of the foreign country

42c

No

43

Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**—Check here and enter the amount of tax-exempt interest received or accrued during the tax year

43

44

Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.

44

No

45

Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes", Form 990 must be completed instead of Form 990-EZ.

45

No

Part VI

Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

46	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	Yes	No
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		
48	Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "yes," complete Schedule E		
49a	Did the organization make any transfers to an exempt non-charitable related organization?		
49b	If "Yes," was the related organization(s) a section 527 organization?		
50	Complete this table for the five highest compensated employees (other than officers, directors, trustees, and key employees) who received more than \$100,000 of compensation from the organization. If there are none, enter "None."		

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Total number of other employees paid over \$100,000				

51	Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there are none, enter "None."	
(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
Total number of other independent contractors receiving over \$100,000		

Please 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 officer) is based on all information of which preparer has any knowledge.				
	Signature of officer		Date		
Paid Preparer's Use Only	Preparer's signature		Date	Check if self-employed	Preparer's PTIN (See Gen. Inst. X)
	Firm's name (or yours if self-employed), address, and ZIP + 4				EIN
	Manitowoc, WI 54220				Phone no. (920) 686-2200
May the IRS discuss this return with the preparer shown above? See instructions.					

TY 2008 Other Assets Schedule

Name: WISCONSIN REALTORS ASSOC - MANITOWOC

COUNTY BOARD OF REALTORS

EIN: 23-7393185

Description	Beginning of Year Amount	End of Year Amount
Other Depreciable Assets	41,557	27,055

TY 2008 Other Expenses Schedule**Name:** WISCONSIN REALTORS ASSOC - MANITOWOC

COUNTY BOARD OF REALTORS

EIN: 23-7393185

Description	Amount
payroll taxes	2,035
advertising	590
office expense	5,343
travel	3,230
meetings	8,234
depreciation	12,363
dues and subscriptions	60,268
lockbox fees	8,867
mls service	20,819
miscellaneous	367
continuing education	3,807

TY 2008 Other Liabilities Schedule

Name: WISCONSIN REALTORS ASSOC - MANITOWOC
COUNTY BOARD OF REALTORS

EIN: 23-7393185

Description	Beginning of Year Amount	End of Year Amount
accrued expenses	1,939	1,869

TY 2008 Other Revenues Schedule

Name: WISCONSIN REALTORS ASSOC - MANITOWOC

COUNTY BOARD OF REALTORS

EIN: 23-7393185

Description	Amount
continuing education	3,543
miscellaneous	740
convention rebate	1,875