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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)

Sponsoning organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 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

2009

Open to Public Inspection

9-5

Α	For th	e 2009 calend	lar year	or tax year beginning	, 8	nd ending						
В	Check	ıf applıcable	Please	C Name of organization	n					D	Employer iden	tification numbe
	Addres	s change	use IRS label or									
	Name o		print or	KAUAI BOARI	O OF REALTO	RS		_			<u>23-7132</u>	151
	Initial re		type.	•	O box, if mail is not delive	red to street addr	ess)		Room/suite		Telephone nu	
	Termin		See Specific	4359 KUKUI	GROVE ST.				103	1	<u>808-245</u>	<u>-4049</u>
	Amend	ed return	Instruc-	City or town, state or cour	ntry, and ZIP + 4					F	Group Exemp	tion
	Applica	tion pending	tions.	LIHUE		HI 967	66				Number	<b>&gt;</b>
	• Sec	ction 501(c)(3)	) organi	zations and 4947(a)(1)	nonexempt charitable	e trusts must a	attach	ı	G Accountin	g meth	iod Cast	h X Accrual
_			a cor	npleted Schedule A (Fo	orm 990 or 990-EZ).	·			Other (specify)	<u> </u>		
1	Websi	ite: 🕨 <u>WW</u>	W.KA	UAIBOARD.COM	<u> </u>				H Check ▶	Ш.	if the organization	on is <b>not</b>
J	Tax-ex	empt status (che	eck only on	e) — 🗶 501(c) (	6 ) <b>◀</b> (insert no )	4947(a)(1) o	r	527	990-EZ, o	o aπacr r 990-F	h Schedule B (Fe F)	om 990, 
K	Check	: ▶ 📋	ıf the or	ganization is not a section	on 509(a)(3) supporting	g organization	and its	s gross	receipts are no	rmally	not more that	n \$25,000 A
	Form 9	990-EZ or Forr	m 990 re	turn is not required, but	if the organization cho	oses to file a r	eturn,	be sure	to file a compl	ete ret	turn	
L	Add line	es 5b, 6b, and 7b	o, to line 9	to determine gross receipts	s, if \$500,000 or more, file	Form 990 instead	d of Fo	rm 990-E	Z		<b>\$</b>	311,668
_	Part I	Reven	ue, Ex	penses, and Chan	iges in Net Asset	s or Fund E	Balar	ices (S	See the inst	ructio	ons for Par	t I.)
	1	Contributions,	gifts, grai	nts, and similar amounts rec	eived						1	20,405
	2	Program ser	vice rev	enue including governme	ent fees and contracts						2	72,946
	3	Membership	dues ar	nd assessments		Se	e S	State	ement 1		3	205,745
	4	Investment ii	ncome								4	11,983
	5a	Gross amou	nt from	sale of assets other than	ı inventory		5a					
	ь	Less cost or	r other b	asis and sales expenses	s		5b					
	С	Gain or (loss) f	from sale	of assets other than invento	ory (Subtract line 5b from l	ine 5a)				L	5c	
Ð	6	Special events	and activ	rities (complete applicable p	arts of Schedule G) If any	y amount is from	gamin	g, check	here 🕨 🗌			
Revenue	a	Gross reveni	ue (not i	ncluding \$	of cor	ntributions						
Ş.		reported on I	line 1)				6a					
)	b	Less direct	expense	s other than fundraising	expenses	[	6b					
)	C	Net income of	or (loss)	from special events and	d activities (Subtract lin	ne 6b from line	6a)			L	6c	
P 2	7a	Gross sales	of inven	tory, less returns and all	lowances		7a		58	39		=
	Ь	Less cost of	f goods :	sold			7b			58		
7 5	С	Gross profit	or (loss)	from sales of inventory	(Subtract line 7b from	line 7a)				:	7c	531
•	8	Other revenu	ue (desc	ribe ▶						)	8	
<u> </u>	9	Total revenu	Je. Add	ines 1, 2, 3, 4, 5c, 6c, 7	c, and 8		_			▶ _	9	311,610
ח	10	Grants and s	sımılar a	mounts paid (attach sch	edule)						10	
>	11	Benefits paid	d to or fo	r members							11	
<b>ာ</b> ဖွ	12	Salaries, oth	er comp	ensation, and employee	DEM€D					Ŀ	12	126,785
o nan	13	Professional	fees an	d other paym <del>ents to ind</del>	ependent contractors					Ŀ	13	<b>17,185</b>
	14	Occupancy,	rent, util	ities, and hamitenance	A C 2010   S					Ŀ	14	24,340
Ä	15	Printing, pub	lications	postage, and shipping	06 2010 O					Ŀ	15	
	16	Other expens	ses (des	cribe   See_Sta	atement 24					) [	16	118,154
	17	Total expens	ses. Add	l lines 10 through (16G	DEN. UT	·····				<u> </u>	17	286,464
	18	Excess or (de	eficit) fo	r the year (Subtract line	17 from line 9)						18	25,146
sets	19	Net assets of	r fund b	alances at beginning of y	year (from line 27, colu	ımn (A)) (must	agree	with				
Ass	1	end-of-year f	figure re	ported on prior year's ret	turn)						19	637,663
Net Assets	20	Other change	es in net	assets or fund balance	s (attach explanation)	Se	e S	tate	ement 3	<u></u> :	20	-22,325
_	21	Net assets of	r fund ba	alances at end of year (	Combine lines 18 throu	igh 20				<b>)</b> 2	21	640,484
F	art II	Balanc	e She	ets. If Total assets on I	ine 25, column (B) are	\$1,250,000 or	more	, file Fo	rm 990 instead	of For	m 990-EZ	
				(See the instructions fo	r Part II )			(A)	Beginning of year		(B) En	nd of year
22	Cash,	savings, and ir	nvestme	nts					741,56	50 2	22	576,151
23	Land a	nd buildings					[				23	
24	Other a	assets (describ	oe ▶	See Stateme	ent 4		)		191,81	1 2	24	105,892
25	Total a	ssets	-						933,37		25	682,043
26	Total li	iabilities (desc	cribe 🕨	See State	ment 5		)		295,70		26	41,559
27	Net as	sets or fund b	alances	(line 27 of column (B)	must agree with line 2	1)			637,66	33 2	27	640,484
For	Privac	y Act and Pap	erwork	Reduction Act Notice,	see the separate inst	ructions.					Form	990-EZ (2009)

DAA

Form 990-EZ (2009) KAUAI B	DARD OF REALTORS	23	3-713215	1			Page 2
	ram Service Accomplishments	(See the instruc	tions for Pa	rt III		Ex	penses
What is the organization's primary exem	npt purpose?				(I	Required	for section
See Statement 6					5	01(c)(3)	and 501(c)(4)
	out the organization's exempt purposes	In a clear and concise	•				ons and section
manner, describe the services provided	, the number of persons benefited, or other	er relevant informatioi	n for		4	947(a)(1	trusts, optional
each program title					fo	or others	)
	PPORT TO OVER 153 REAL ESTATE P	ROFESSIONAL MEMB	ERS			T	
	O THE GENERAL PUBLIC ABOUT REAL					i	
AND PROVIDE INCOMMENTAL						ł	
(Grants \$	) If this amount includes foreign grants,	check here		<b>▶</b> [	⁻│	. [	
29	) in this amount includes foreign grains,	CHECK HOTE			200	<del> </del>	
(Ot- f)	\ If the area and realized as foreign manufacture.	ahaali haaa					
(Grants \$	) If this amount includes foreign grants,	спеск пеге	_		29a	<del> </del>	
30					İ		
				_	_	1	
(Grants \$	) If this amount includes foreign grants,	check here			30a	<del> </del>	
31 Other program services (attach sche	edule)			_	_		
(Grants \$	) If this amount includes foreign grants,	check here		<b></b>	31a		
32 Total program service expenses (	add lines 28a through 31a)				32		
Part IV List of Officers, Direct	ors, Trustees, and Key Employees. List	each one even if not	compensated (				or Part IV )
4.5.50		(b) Title and average	(c) Compensat		(d) Contri	butions to nefit plans &	(e) Expense account and
(a) Nai	me and address	hours per week devoted to position	enter -0)		deferred cor		other allowances
KAREN ONO	LIHUE	EXECUTIVE OF	FICER				
3376-A EONO STREET	ні 96766	40.00	61,9	928		0	0
PHIL FUDGE	КАРАА	IMM PAST PRE	<u> </u>	T			
PO BOX 770	HI 96746	0.50	[	٥		o	0
KAREN AGUDONG	LIHUE	PRESIDENT		Ť			······································
3-3359 KUHIO HWY	HI 96766	1.00		٥		٥	0
CELLY LIBERATORE	WAIMEA	PRESIDENT-EL	P.C.III	∸			<del>_</del>
			l cr	ار			•
PO BOX 835	HI 96796	0.50		0		0	0
TRINETTE KAUI	ELEELE	VICE-PRESIDE	NT 				_
PO BOX 178	ні 96705	0.50	<b></b>	-		0	0
VANCY KANNA	HANAPEPE	SECRETARY				_	
PO_BOX 138	ні 96716	0.50		- 이		이	0
LAVERNE BESSERT	LIHUE	TREASURER					
1491 RICE STREET	HI 96766	0.50	1	0		0	0
ARRY HINKEL	HONOLULU	TREASURER-EL	ECT	1			
PO BOX 4453	HI 96812	0.50	_	0		0	0
ERIC YAMA	LIHUE	DIRECTOR		1			
970 KRESS STREET	HI 96766	0.50		0		0	0
ROWENA COBB	KOLOA	DIRECTOR					
PO BOX 157	ні 96756	0.50		0		0	0
ONI ISHIMOTO	LIHUE	DIR OF MEMBE	R SERV				
3235 FUJII ST.	ні 96766	40.00	47,2	91		o	0
				-			
						ĺ	
		<del></del>		+		+	
	<del></del>			-+		$\longrightarrow$	
				ļ			
				-			

	tet 4 Other information (Note the statement requirements in the instructions for i	41C V./		
20	Daily and the IDC2 is "Vee " altered and detailed	Γ	Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed	99	.	x
24	description of each activity  Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of	33		<b>├</b> ^
34		34	ľ	x
35	the changes  If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> r	<del></del>	+	-
33	on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T	cported [		
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section		1	İ
_	6033(e) notice, reporting, and proxy tax requirements?	358	.	x
b	If "Yes," has it filed a tax return on Form 990-T for this year?	351		† <del></del>
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets		1	
	during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr			
b	Did the organization file Form 1120-POL for this year?	371	, ]	X
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 outstanding at the end of the period covered by this return?	388	, ]	X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved   38b			
39	Section 501(c)(7) organizations Enter			
а	Initiation fees and capital contributions included on line 9			
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 501(c)(4) organizations Did the organization engage in any section 4958 excess benef	t		
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified			
	person in a prior year, and that the transaction has not been reported on any of the organization's prior			
	Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40t	<u> </u>	ļ
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958 ▶			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c			
	reimbursed by the organization			
0	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	406	<u> </u>	X
41	List the states with which a copy of this return is filed   HI  DOADD OF DEATHORS	phone no ▶ 808-2	<u> </u>	040
42a	The organization's books are in care of ► KAUAI BOARD OF REALTORS  Tele  4359 KUKUI GROVE STREET	phone no ▶ 808-2	45-4	1049
		ZIP+4 ▶ 96766		
_	·	ZIP + 4   90 / 00		
Ь	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		Yes	No
	account)?	42b		X
	If "Yes," enter the name of the foreign country	424	'	1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	420	.1	x
·	If "Yes," enter the name of the foreign country	720	<u> </u>	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			▶ □
75	and enter the amount of tax-exempt interest received or accrued during the tax year	▶   43		
	and onto the amount of the exempt interest received of accorded during the tax year			
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		1.55	<del>                                   </del>
• •	Form 990-EZ	44		х
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If	<u></u>		
	"Yes," Form 990 must be completed instead of Form 990-EZ	45		x
			90-EZ	
				,/

Check if

employed >

EIN

self-

06/21/10

Preparer's Identifying Number (See instr.)

26-1942379

Form 990-EZ (2009)

808-245-5620

▶ X Yes

Paid

Preparer's

**Use Only** 

Type or print name and title

Morgan Liddell

May the IRS discuss this return with the preparer shown above? See instructions

Kapaa,

Central Pacific Accounting,

96746-1760

5900 Kololia Pl

HI

Preparer's

signature

Firm's name (or yours

if self-employed)

address, and ZIP

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No 1545-0172

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No

Identifying number

	KAUAI I	BOARD OF R	<u>EALTORS</u>					23-	713	2151
	ness or activity to which this form relates									
~	ndirect Depreciat		andri Undan Ca		470					<del></del>
177	Election To Exper Note: If you have a	-	•			ı con	nnlete P	art I		
1	Maximum amount See the instruc				belore you	u COII	ipiete i	art i.	1	250,000
2	Total cost of section 179 property	•		csscs					2	250,000
3	Threshold cost of section 179 pro	•	•	instruct	ione)				3	800,000
4	Reduction in limitation Subtract li	. •	•		10113)				4	300,000
5	Dollar limitation for tax year Subtract lin		•		n senarately s	ee inst	nictions		5	
6	(a) Description		51 1035, CINCI -0- 11 1110		t (business use			Elected cost		
Ť	<del></del>	<u> </u>	-	.,,-	•					
7	Listed property Enter the amount	from line 29		<u> </u>		7				
8	Total elected cost of section 179 p		ts in column (c). lin	nes 6 an	d 7				8	
9	Tentative deduction Enter the sm		• • •						9	
10	Carryover of disallowed deduction	from line 13 of your	2008 Form 4562						10	
11	Business income limitation Enter	the smaller of busine	ess income (not les	ss than :	zero) or line	5 (see	instruction	ns)	11	
12	Section 179 expense deduction A	dd lines 9 and 10, b	ut do not enter mor	re than I	ine 11				12	
13	Carryover of disallowed deduction	to 2010 Add lines 9	and 10, less line 1	12	<b>•</b>	13				
Note	e: Do not use Part II or Part III below	for listed property	nstead, use Part V	′						
Pa	art II Special Depreciat	ion Allowance a	nd Other Depi	reciati	on (Do no	ot inc	lude list	ed prop	erty.)	(See instr.)
14	Special depreciation allowance for	r qualified property (d	other than listed pro	perty) p	olaced in ser	vice				
	during the tax year (see instruction	ns)							14	1,566
15	Property subject to section 168(f)(	1) election							15	
16	Other depreciation (including ACR	<del></del>							16	6,006
<u>P</u> a	art III MACRS Depreciat	ion (Do not incl	<u>ude listed prop</u>	erty.)	<u>(See instr</u>	uctio	ns.)			···
			Secti	on A				<del> </del>		
17	MACRS deductions for assets pla	ced in service in tax	years beginning be	efore 20	09				17	0
18	If you are electing to group any assets p								Ĺ	
	Section B—/	Assets Placed in Se	, <del>.</del>		ar Using the	Gene	ral Depre	ciation Sy	stem	· · · · · · · · · · · · · · · · · · ·
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depre (business/investme only-see instruct	ent use	(d) Recovery period	(e) C	onvention	(f) Meti	nod	(g) Depreciation deduction
19a	3-year property									
b	5-year property									
С	7-year property									
d	10-year property									
е	15-year property		1	<u>, 565</u>	15.0		HY	s/	L	52
f_	20-year property									
g	25-year property				25 yrs			S/L		
h	Residential rental				27 5 yrs		MM	S/L		
	property				27 5 yrs		MM	S/L		
i	Nonresidential real				39 yrs		MM	S/L		
	property	L			L		MM	S/L		
		sets Placed in Serv	rice During 2009 T	ax Year	Using the A	Alterna	itive Depr		ysten	<u> </u>
	Class life							S/L		
	12-year				12 yrs			S/L		
	40-year	1			40 yrs		MM	S/L		
	urt IV Summary (See ins							1		
21	Listed property Enter amount from		46 1		,	<b>.</b> . –			21	
22	Total. Add amounts from line 12, I	=					ter here			7 604
	and on the appropriate lines of you	•	•		instructions 1	T			22	7,624
23	For assets shown above and place		ne current year, en	iter the						
	portion of the basis attributable to	section 263A costs				23				

# KBOR KAUAI BOARD OF REALTORS 23-7132151 Federal Statements

FYE: 12/31/2009

### Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

Description	 Amount
KBR DUES INCOME	\$ 205,745
Total	\$ 205,745

### Statement 2 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Expenses	\$
ADVERTISING / PROMOTION	6,650
TRAVEL, ENTERTAINMENT, MEALS	9,716
MEETING ROOMS	30,123
SPEAKER FEES	11,730
TRAINING / CONFERENCE OTHER	2,438
EDUCATION OTHER	3,000
ROYALTY / COMMISSION FEE	3,783
ON-LINE REG FEE	300
INTEREST EXPENSE GENERAL	19
NON-EMPLOYEE INSURANCE	902
BANK AND MERCHANT FEES	7,098
BOOKS, SUBSCRIPTIONS, REF	593
UTILITIES	1,134
PROPERTY TAX	1,727
GENERAL EXCISE TAX	620
POSTAGE/ SHIPPING / DELIV	2,500
PRINTING & COPYING	3,368
REPAIRS AND MAINTENANCE	2,128
SUPPLIES	3,693
MISCELLANEOUS	61
DUES AND FEES	2,682
EQUIPMENT REPAIR & MAINT	1,355
FINES, PENALTIES, ADJTS	526
OTHER FUNDRAISING EXP	500
P/R FUND EXPENDITURES'	17,176
TELEPHONE / INTERNET	4,332
Total	\$ 118,154

#### Statement 3 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description	 Amount
CORRECT AP / AR BEGINNING BALANCE DISCREPANCIES	\$ 5,457
PY W/O OF MLS HAWAII INVESTMENT	 -27 <b>,</b> 782
Total	\$ -22,325

# KBOR KAUAI BOARD OF REALTORS 23-7132151 **Fe**

FYE: 12/31/2009

# **Federal Statements**

### Statement 4 - Form 990-EZ, Part II, Line 24 - Other Assets

Description		Beginning of Year		End of Year
Accounts Receivable FURNITURE AND FIXTURES Less Accumulated Depreciation	\$	94,064 165,726 98,892	\$	32,721 166,393 106,516
LEASEHOLD IMPROVEMENTS INVESTMENT IN MLS HAWAII LLC UNDEPOSITED FUNDS		3,131 27,782	_	3,131
	_	191,811		105,892

## Statement 5 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description		eginning of Year		End of Year
Accounts Payable and Accrued Expenses Deferred Revenue PASS-THRU LIAB TO HI ASSOC. OF REALT PASS-THRU LIAB TO NATIONAL ASSOC. RE PASS-THRU LIAB TO RPAC	\$ 	5,143 140,930 89,945 57,173 2,517	\$	33 15,603 15,736 9,862 325
	<del></del>	295,708	_	41,559

KBOR KÀUAI BOARD OF REALTORS
23-7132151 Federal Statements

6/21/2010 10:38 AM

FYE: 12/31/2009

	Description
OVIDE EDUCATION AND SUPPORT TO DEPROVIDE INFORMATION TO THE GE	OVER 153 REAL ESTATE PROFESSIONAL MEMBERS ENERAL PUBLIC ABOUT REAL ESTATE ON KAUAI.