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Form **990**

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

	For the	e 2009 calend	lar year, c	or tax year beginning		, 2009, a	and endin	g			1		
В	Check if	applicable		C Name of organization					D Employ	er Iden	tification Nun	ıber	
	Add	lress change	Please use IRS label	MONTROSE ASSO	CIATION OF RE	ALTORS		i	23-	7216	117		
	Nar	ne change	or print or type		P O box if mail is not delive		r) Room/s	uite	E Telepho	ne num	ber		
	Ħ	al return	Sée specific	125 MERCHANT	DRIVE				(97)	0) 2	49-621	3	
	H	mination	Instruc- tions	City, town or country		State	ZIP code + 4		, , , ,				
		ended return	-	MONTROSE			81401		G Gross re	a a a unit a	\$ 258,	200	
	\vdash	- · · · · · · · · · · · · · · · · · · ·		and address of principal office			01401	H(a) Is this a				_	X No
	☐ App	dication pending						H(b) Are all	-			Yes	A No
		<u>-</u>		· · · · · · · · · · · · · · · · · · ·	HANT DR MONTROS		81401		attach a list		structions)	7 .62	□ "0
<u> </u>		exempt status		(c) (6) ((ins	ert no) 4947(a)(1) or	527						
<u>J</u>	Web	site: ► N/Z						H(c) Group e	exemption nu	ımber ¹	<u> </u>		_
K			X Corpora	ation Trust As	sociation Other	L Ye	ar of Format	ion 1991	_ Ms	tate of	legal domicile	. CO	
Pa	art I	Summa											
	1 E	Briefly describ	e the org	anızatıon's mıssıon o	r most significant activ	uties <u>REA</u>	ALTOR 1	EDUCAT	ION				
ø	_												_
auc	i	-					. .						_
Z U I U Governance	_	. -											
Z-U IU Rovern		Check this box			continued its operatio		ed of more	e than 25%	% of its as				
ල අ					body (Part VI, line 1a						3		
≓ <u>8</u>			-	-	he governing body (Pa	irt VI, line 1b))				200		
==				vees (Part V, line 2a)						5	2.0		
Activi				eers (estimate if nece		10				6	30		
7 ~	l .	_			Part VIII, Icolumn (C)	, ine 12				7a			0.
; —	b 1	<u>vet unrelated</u>	business	taxable income from	Form 990-1, line 34			1		7 b			
2	1							P	rior Year			ent Ye	
. 0				ts (Part VIII, line 1h)				<u> </u>	339,1				<u>,860.</u>
ביים	9 Program service revenue (Part VIII, line 2g)								29 <u>,</u> 5				<u>,041.</u>
Revenue	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)							1,269.			2	<u>,626.</u>	
	1					-				02.			682.
					t equal Part VIII, colu	nn (A), line	12)		370,1	.88		<u>258</u>	<u>,209.</u>
				unts paid (Part IX)	THE RESERVE OF THE PERSON OF T	1							
				nembers (Par IX, col									
ø	15 5	Salaries, other	r compens	sation, employee beg	efita (Ban Nagcolum	(A), lines 5-	10)		122,8	05.		111	<u>,708.</u>
36	16a F	Professional fu	undraising	g fees (Partily, colum	in (A), line 11e)	j							
Expenses	Ьī	otal fundraisi	na expen	ses (Part X colimb	क्षाचित्रविद्या								
Ã	17 (ther evenes	o (Part I)	ses (Part X, column X, column (A), lines) 			242,1	96		100	,984.
						lino OEN							,692.
	i	•			Part IX, column (A),	iiie 25)			<u>365,0</u>				
	19 F	revenue less o	expenses	Subtract line 18 from	n line 12		_	 	5,1				<u>,483.</u>
.e or								Begin	ning of Y			of Ye	
90 a		otal assets (F	-	•					480,0				<u>,893.</u>
Net Assets Fund Batan	21 T	otal liabilities	(Part X,	line 26)					111,5	38.		143	<u>,836.</u>
		let assets or f	fund balar	nces Subtract line 21	from line 20				368,5	38.		<u>315</u>	<u>,057.</u>
Pa	rt II	Signatu	re Bloc	k									
		Under penalties	of perjury, I	declare that I have examine	ed this return, including accorder than officer) is based on a	mpanying schedi	ules and state	ements, and	to the best o	f my kn	owledge and l	oelief, i	t 1s
		true, correct, an	ia complete	Declaration of preparer (our	er than officer) is based on a	ili information of	wnich prepa	rer nas any k	nowleage				
Sig			Node	ene Hau	lhe				5/17	110			
He	re	Signature of	f officer					Dat	e / /	,			
		► X Ma	SOFN	E GAULKE	•								
			nt name and					·					
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Pai	id		$\overline{}$			ŀ		sel		\square	ce msauction	3)	
Pre		Preparer's signature		w Mull	m	0.5	5/12/10			-			
pai	er's		Maya	anna and Accor	ister IIC		·/ 14/ 1	'		- 1			
Ųs		Firm's name (or yours if self	-	enna and Assoc									
On	ly	employed), address, and		E. Main Stree				EIN					
		ZIP + 4		rose	C		-3931	Ph	one no				٦
May	the IR:	S discuss this	return w	ith the preparer show	n above? (see instruc	tions)					X Yes		No

	1 990 (2009) MONTROSE ASSOCIATION OF REALITORS	23-1	21611		Page 2
Pa					
1	Briefly describe the organization's mission:				
	REALTOR EDUCATION				
,					
			 -		
2	Did the organization undertake any significant program services during the year which were not listed on the	prior		_	1
	Form 990 or 990-EZ?			Yes X	No
	If 'Yes,' describe these new services on Schedule O				
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	s?		Yes X	No
	If 'Yes,' describe these changes on Schedule O				,
4	Describe the exempt purpose achievements for each of the organization's three largest program services by	ovnonc	or Soctio	n E01/a)	(2)
7	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and all	ocations	s to other	s. the total	al
	expenses, and revenue, if any, for each program service reported.				
4 a	(Code) (Expenses \$ 311,692. including grants of \$) (Re	evenue	\$	258,	209.)
	BOARD OF REALTORS				
					- -
				. – – – -	
		-			
				 	
4 h	(Code) (Expenses \$ including grants of \$) (Re	wenue	¢		1
	(code) (Expenses ψ	vende	٧		—–′
				. 	
				_ _	
4c	(Code:) (Expenses \$ including grants of \$) (Re	venue	\$)
	~				
		-			_
					
4d	Other program services (Describe in Schedule O)				
	(Expenses \$ including grants of \$) (Revenue \$)	
	Total program service expenses ► 311,692.				
	Land and a substitution of the substitution of				

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 X Schedule A 2 Is the organization required to complete Schedule B, Schedule of Contributors? Х 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 3 Х Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 4 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III 5 Х Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, 6 Х Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 Х complete Schedule D, Part III Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete 9 Х Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V 10 Х Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or 11 11 Х X as applicable Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI • Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII • Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If Yes, 'complete Schedule D, Part X Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 Х Yes No 12AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A X 13 X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Х **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If 'Yes,' complete Schedule F, Part I* 14b Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II 15 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III 16 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 Х column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Х lines 1c and 8a? If 'Yes,' complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'

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complete Schedule G, Part III

Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

Form 990 (2009) MONTROSE ASSOCIATION OF REALTORS 23-7216117 Page 4 **Checklist of Required Schedules** Part IV (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule I 23 Х 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L. Part I 25a b is the organization 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 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III 27 27 Х 28 Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a Х b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28b Х c An entity of which a current or former officer, director, trustee or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N. Part II 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I

Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI

Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V,

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O

Form 990 (2009)

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line 1

A Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S	Part V Statements Regarding Other IRS Filings and Tax Compliance			
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization compty with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmital of Wage and Tax Statements, filed for the catendar year ending with or within the year covered by this return 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If Yes' has it filed a Form 990-T for this year? If No, 'provide an explanation in Schedule O 4a 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). See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Sa Was the organization a party to a prohibited tax shelter transaction? c If Yes, to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5b If Yes, did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization of the value of the goods or services provided? 6c Did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 7c Dynalizations that may receive deductible contributions under section 170(c). a Did the organization sell, exchange, or otherwise dis			Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garning (gambling) witnings to prize winners? 2 a Enter the number of employees (good for form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 bif at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? bif Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 4 a 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 of years, and the programation have an interest in or a signature or other authority over, a financial account in a foreign country of years, and the programation in a foreign country or years, and the interest of years, and the programation and fining requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 a Was the organization a party to a prohibited tax sheller transaction? 5 b Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? 5 c If 'Yes,' to line 5 a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Sheller Transaction? 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization should the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 7 b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contri	1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable 1a 0			
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 bit if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return? Note if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this returns (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3b Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3b Dif Yes has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3a Diff Yes,' enter 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 - See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If 'Yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If 'Yes,' to the fear organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not lax deductible? 6a X 6b Joes the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 6b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7b If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization for qualiti	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	į		
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3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a X bit Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 4a 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)? 5 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. 5 a Was the organization a party to a prohibited tax shelter transaction? 5 a Was the organization a party to a prohibited tax shelter transaction? 5 b Did any taxable party notify the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5 c If Yes,' to line 5 a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6 b If Yes,' did the organization include with every solicitation an express statement that such contributions or giffs were not deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 5 b If Yes, did the organization notify the donor of the value of the goods or services provided? 6 c If Yes, indicate the number of Forms 8282 filed during the year 6 d If Yes, indicate the number of Forms 8282 filed during the year 9 c If the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 organization, during the year, receive any	2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
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		8		
a Did the organization make any taxable distributions under section 4966? 9a	· · · · · · · · · · · · · · · · · · ·			
b Did the organization make any distribution to a donor, donor advisor, or related person? 9b		96		
10 Section 501(c)(7) organizations. Enter		İ		
a Initiation fees and capital contributions included on Part VIII, line 12 b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10a 10b	· · · · · · · · · · · · · · · · · · ·	İ		
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter				
a Gross income from other members or shareholders				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	b Gross income from other sources (Do not net amounts due or paid to other sources against			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	· · · · · · · · · · · · · · · · · · ·	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	The state of the s		\	

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Form 990 (2009)

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ction A.	Governing Body and Management				
					Yes	No
1	a Enter the	number of voting members of the governing body	1a 3			
	b Enter the	number of voting members that are independent	1b 200			
2	Did any of officer, d	officer, director, trustee, or key employee have a family relationship or a business rirector, trustee or key employee?	elationship with any other	2		x
3	Did the o	rganization delegate control over management duties customarily performed by or s, directors or trustees, or key employees to a management company or other pers	under the direct supervision son?	3		х
4	Did the c	rganization make any significant changes to its organizational documents		_4		Х
	since the	prior Form 990 was filed?				
5	Did the o	rganization become aware during the year of a material diversion of the organization	on's assets?	5		Х_
6	Does the	organization have members or stockholders?		6	_X_	
7	a Does the governing	organization have members, stockholders, or other persons who may elect one or ${\rm j}\ {\rm body}^2$	more members of the	7a	х	
	b Are any	decisions of the governing body subject to approval by members, stockholders, or o	other persons?	7b		x
8	Did the o	rganization contemporaneously document the meetings held or written actions und Jing	ertaken during the year by			
	a The gove	rning body?		8a	х	
	b Each cor	nmittee with authority to act on behalf of the governing body?		8ь	Х	
9	Is there a organizat	iny officer, director or trustee, or key employee listed in Part VII, Section A, who ca ion's mailing address? <i>If 'Yes,' provide the names and addresses in Schedule O</i>	annot be reached at the	9		х
Se	ction B.	Policies (This Section B requests information about policies no	ot required by the Internal			
Rev	enue Code)				
					Yes	No
		organization have local chapters, branches, or affiliates?		10a		Х
	and bran	loes the organization have written policies and procedures governing the activities ches to ensure their operations are consistent with those of the organization?		10b		
		organization provided a copy of this Form 990 to all members of its governing body	=	11	Х	
		in Schedule O the process, if any, used by the organization to review this Form 99	0.	-		
		organization have a written conflict of interest policy? If 'No,' go to line 13		12a	Х	
	to conflic		-	12b		Х
		organization regularly and consistently monitor and enforce compliance with the p O how this is done	olicy? If 'Yes,' describe in	12c	х	
13	Does the	organization have a written whistleblower policy?		13	Х	
14		organization have a written document retention and destruction policy?		14	X	
15	Did the p persons,	rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and de	l approval by independent ecision?			
	a The orga	nization's CEO, Executive Director, or top management official		15a		_X
		cers of key employees of the organization		15b		_X
	If 'Yes' to	line 15a or 15b, describe the process in Schedule O (See instructions.)				
16	a Did the o entity dur	rganization invest in, contribute assets to, or participate in a joint venture or simila ing the year?	r arrangement with a taxable	16 a		x
	in joint ve	as the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard	n to evaluate its participation d the organization's exempt	16b		
Sec		h respect to such arrangements? Disclosures		i ion		
		tates with which a copy of this Form 990 is required to be filed Colorado				
	Section 6	104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an Indicate how you make these available. Check all that apply	and 990-T (501(c)(3)s only) ava	 ilable f	or put	olic
	_	website Another's website X Upon request				
19		in Schedule O whether (and if so, how) the organization makes its governing docul is available to the public	ments, conflict of interest policy	, and t	inanci	ıal
20		name, physical address, and telephone number of the person who possesses the	· ·			
	► MCKENN	A & ASSOCIATES LLC 521 E. MAIN STREET, MONTROSE	<u>CO _ 81401 (9</u>	70)_2	<u>49-</u> 3	<u> 1499</u>

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of 'key employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order. Individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did no	t compens	ate ar	пу сі	urrei	nt of	fficer,	direc	ctor, or trustee		
(A)	(B)	(c)						(D)	(E)	(F)
Name and Title	Average hours		ition		k all	that app		Reportable compensation from	Reportable compensation from	Estimated
	per week	adividial trasser or director	unstitutional trustee	Officer	Key amployee	Highest coin्ट्रहाडलोल employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
VICTORIA CHRIESTENSON										
CEO	40.00			х	х	Х		61,083.	0.	0.
ELIZABETH SPITZER										
CHAIRMAN	8.00	Х						0.	0.	0.
CHAIRMAN-ELECT	4.00	Х						0.	0.	0.
DON BAILEY										
IMM PAST CHAIRMAN	4.00	Х						0	0.	0.
KARI WAGE										
DIRECTOR	4.00	X						0.	0.	0.
GARY COOPER										
DIRECTOR	4.00	Х						0.	0.	0.
DEBBIE REED										
DIRECTOR	4.00	_X			L			0.	0.	0.
LESLIE_TRIESCH					ĺ					
DIRECTOR	4.00	Х						0.	0.	0.
PAMELA LA POINTE								_		_
DIRECTOR	4.00	<u> </u>					_	0	0.	0.
VALERIE MEYERS										•
DIRECTOR	4.00	Х						0.	0.	0.
									-	
			_	_			_			
		1								

Part VII Section A. Officers, Directors, Trust (A)	(B)	(ey			bye c)	es,	an	(D)	(E)	(F)	_
Name and Title	Average			-	-	that a	pply)		Reportable	Estimated	
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099 MISC)	amount of other compensation from the organization and related organizations	
									_		_
				1							•
1 b Total							<u> </u>	61,083.	0	<u>. </u>	0 .
2 Total number of individuals (including but not limited from the organization ►	to those	e list	ed a	abov	e) v	vho	rece	eived more than \$	100,000 in reportat 	le compensation	
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such inc. 4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the individual. 5 Did any person listed on line 1a receive or accrue co rendered to the organization? If 'Yes,' complete Schedule 1. 	dividual ortable o an \$150 mpensa	com ,000	pen:	satio ' <i>'Ye</i> : m an	on a s' <i>c</i> o	nd o	other <i>lete</i>	compensation fro Schedule J for su	om ch	4 2	X X
Section B. Independent Contractors											
Complete this table for your five highest compensate compensation from the organization	a indepe	ende	nt c	ontr	acto	ors t	nat i		·- · · · · · · · · · · · · · · · · · ·		
Name and business address	S							Description o	of Services	(C) Compensation	
											_
	_										_
	_					— <u> </u>					_
2 Total number of independent contractors (including b \$100,000 in compensation from the organization ►	ut not lii	mite	d to	tho	se li	ste	abo	ove) who received	more than		

Ра	rt V	iii Statement of Revenue		· · · · · · · · · · · · · · · · · · ·			T
1 1 1 1				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u>د، د،</u>	1a	Federated campaigns 1	a				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		` -	b 237,860.				
R O		· —	c				
F A		-	d				
≅ٍ≦			e				
SS.	-	dovernment grants (contributions)					
ĔŸ	f	All other contributions, gifts, grants, and					
8 E			f		1		
88	_	Noncash contributes included in lns 1a-1f	\$		}		
	_ <u>h</u>	Total. Add lines 1a-1f	Summer Code	237,860.			
Ž	_		Business Code				
Š		REALTOR ASSOCIATION	900099	17,041.	17,041.	0.	0.
PROGRAM SERVICE REVENUE	b	'					
ž	С		_				
SE	d		_				
Σ	е		_				
OGR	f	All other program service revenue		_			
8	g	Total. Add lines 2a-2f	•	17,041.			
	3	Investment income (including divider	ids, interest and				
		other similar amounts)	· •	2,626.	2,626.	0.	0.
	4	Income from investment of tax-exem	pt bond proceeds				
	5	Royalties	•				
	İ	(i) Real	(II) Personal				
	6a	Gross Rents					
	b	Less rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)	▶				
		(i) Securities	(II) Other	-			
	/ a	Gross amount from sales of assets other than inventory					
	D	Less cost or other basis and sales expenses					
	_	Gain or (loss)					
		Net gain or (loss)	<u> </u>				
		Gross income from fundraising event					
NUE		(not including \$	_				
OTHER REVEN		of contributions reported on line 1c)					
8		See Part IV, line 18	а				
E		Less direct expenses	b				
	С	Net income or (loss) from fundraising	events				
	9a	Gross income from gaming activities See Part IV, line 19	a				
		Less direct expenses .	ь				
		Net income or (loss) from gaming act	tivities				
		Gross sales of inventory, less returns and allowances			-		
			a				
		Less cost of goods sold	b				
	с	Net income or (loss) from sales of inv					-
		Miscellaneous Revenue	Business Code				
	_	MISCELLANEOUS		682.	682.	0.	0.
	Ь				-		
	С		-	-			
		All other revenue	1		<u> </u>		
		Total. Add lines 11a-11d	•	682.			
	12	Total revenue. See instructions	•	258,209.	20,349.	0.	0.

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (D) Fundraising (A) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Program service Management and Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in 2 the U.S See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 61,083 61,083 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) Other salaries and wages 31,500 31,500 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 2,720 2,720 9 Other employee benefits 8,584. 8,584 10 Payroll taxes 7,821 7,821 Fees for services (non-employees) a Management **b** Legal 490 490 3,010 c Accounting 3,010 **d** Lobbying e Prof fundraising svcs See Part IV, In 17 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 7,071 7,071 14 Information technology 15 Royalties . 16 Occupancy 15,063 15,063 17 Travel 20,280 20,280 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 6,390 6,390 21 Payments to affiliates 22 Depreciation, depletion, and amortization 6,906 6,906 2 2

23 Insurance				
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a AFFILIATE AFTER HOURS	5,165.	5,165.		
b BAD DEBT	174.	174.		
c BANK & CREDIT CARD FEES	5,558.	5,558.		
d BANQUET	2,976.	2,976.	_	
e BOARD_RETREAT	403.	403.		
f All other expenses	126,498.	126,498.		
25 Total functional expenses. Add lines 1 through 24f	311,692.	311,692.		
SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

•					(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing			75,523.	1	106,076
	2	Savings and temporary cash investments			107,088.	2	64,306
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			9,231.	4	7,182
	5	Receivables from current and former officers, directors and highest compensated employees. Complete Part I	, trust	ees, key employees, hedule L		5	
	6	Receivables from other disqualified persons (as define	d unde	er section 4958(f)(1))			man and the second and the second and the second
.		and persons described in section 4958(c)(3)(B). Comp	lete Pa	art II of Schedule L		6	
A S	7	Notes and loans receivable, net				7	
<u> </u>	8	Inventories for sale or use				8	
\$	9	Prepaid expenses and deferred charges	enses and deferred charges				
'	10 a	Land, buildings, and equipment cost or other basis	10a	35 <u>3,</u> 386.			
		Complete Part VI of Schedule D					
1	b	Less accumulated depreciation	10b	74,207.	286,084.	10 c	279,179
1	11	Investments - publicly-traded securities		,		11	
- 1	12	Investments – other securities See Part IV, line 11				12	
	13	Investments – program-related See Part IV, line 11				13	
-	14	Intangible assets				14	
1	15	Other assets See Part IV, line 11			2,150.	15	2,150
	16	Total assets. Add lines 1 through 15 (must equal line	34)		480,076.	16	458,893
Π.	17	Accounts payable and accrued expenses		3,636.	17	49,033	
-	18	Grants payable		6,462.	18	4,973	
	19	Deferred revenue			19		
: :	20	Tax-exempt bond liabilities		20			
à :	21	Escrow or custodial account liability Complete Part IV	hedule D		21		
<u> </u>	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified personal compensation.	ey employees, . Complete Part II				
<u> </u>		of Schedule L				22	
E	23	Secured mortgages and notes payable to unrelated the	rd part	ies	<u>.</u>	23	
:	24	Unsecured notes and loans payable to unrelated third	parties	;	101,440.	24	89,83 <u>0</u>
	25	Other liabilities Complete Part X of Schedule D				25	
:	26	Total liabilities. Add lines 17 through 25			1 11,538.	26	143,836
N E T		Organizations that follow SFAS 117, check here ▶	аг	nd complete lines			
		27 through 29 and lines 33 and 34.					
	27	Unrestricted net assets				27	
	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets		1	**************************************	29	
₹		Organizations that do not follow SFAS 117, check he	re 🟲	X and complete			
ָּבְּ : לְּבְּ		lines 30 through 34.					
5 :	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building, and equip		31			
: ;	32	Retained earnings, endowment, accumulated income,	or othe	er funds	368,538.	32	315,057
BALANCES	33	Total net assets or fund balances			368,538.	33	315,057
: ا غ	34	Total liabilities and net assets/fund balances.			480,076.	34	458,893

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

BAA

Form 990 (2009)

3 b

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions

2009

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

	TROSE ASSOCIATION OF REALTORS		23-7216117
Pai		Advised Funds or Other Similar Fun	ids or Accounts Complete if
	the organization answered 'Yes' to	o Form 990, Part IV, line 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year) .		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor funds are the organization's property, subject to		nor advised Yes No
6	Did the organization inform all grantees, donors used only for charitable purposes and not for the purpose conferring impermissible private benefits.	ne benefit of the donor or donor advisor or for a	
Pai	t II Conservation Easements Comple		
	Purpose(s) of conservation easements held by		to 1 of 111 330, 1 die 11, 1110 7.
	Preservation of land for public use (e g , re Protection of natural habitat Preservation of open space	creation or pleasure) Preservation	of an historically important land area of certified historic structure
2	Complete lines 2a through 2d if the organizatio last day of the tax year	n held a qualified conservation contribution in t	he form of a conservation easement on the
			Held at the End of the Year
a	Total number of conservation easements		2a
t	Total acreage restricted by conservation easem	nents	2b
	Number of conservation easements on a certific		2c
	Number of conservation easements included in	• •	2d
	Number of conservation easements modified, to		ed by the organization during the tax
_	year ►	galactor, c	
4	Number of states where property subject to cor	servation easement is located •	_
5	Does the organization have a written policy reg and enforcement of the conservation easement	it holds?	☐ Yes ☐ No
	Staff and volunteer hours devoted to monitoring during the year		
7	Amount of expenses incurred in monitoring, ins during the year ►	pecting, and enforcing conservation easements	\$
8	Does each conservation easement reported on $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	line 2(d) above satisfy the requirements of section	Yes No
9	In Part XIV, describe how the organization repo- include, if applicable, the text of the footnote to conservation easements	orts conservation easements in its revenue and the organization's financial statements that de	expense statement, and balance sheet, and scribes the organization's accounting for
Par	t III Organizations Maintaining Colle	ctions of Art, Historical Treasures, or	Other Similar Assets
	Complete if the organization answ	vered 'Yes' to Form 990, Part IV, line	8.
1 a	If the organization elected, as permitted under treasures, or other similar assets held for public the text of the footnote to its financial statemen	exhibition, education, or research in furtheran	nt and balance sheet works of art, historical ce of public service, provide, in Part XIV,
b	If the organization elected, as permitted under treasures, or other similar assets held for public amounts relating to these items	SFAS 116, to report in its revenue statement aid cexhibition, education, or research in furtheran	nd balance sheet works of art, historical ce of public service, provide the following
	(i) Revenues included in Form 990, Part VIII, I	ine 1	* \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art amounts required to be reported under SFAS 1		r financial gain, provide the following
а	Revenues included in Form 990, Part VIII, line	1	> \$
b	Assets included in Form 990, Part X		►\$ ►\$

	ROSE ASSOCIAT	ION OF REALTO	RS	23-7216	5117	Page 2			
Part III Organizations Mainta	ining Collection	s of Art, Historica	l Treasures, or O	ther Similar Asse	ets (contir	nued)			
.3 Using the organization's acquisiti items (check all that apply)	on accession and oth	er records, check any	of the following that a	are a significant use o	f its collection	n			
a Public exhibition		d \bigcap Loan or ex	change programs						
b Scholarly research		e Other							
c Preservation for future gener	ations								
4 Provide a description of the organ Part XIV	nization's collections	and explain how they	further the organization	n's exempt purpose i	n				
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or receive ather than to be mair	donations of art, historiations are donations of art are donated as part of the	orical treasures, or oth organization's collection	er sımılar on? [Yes	□No			
Part IV Escrow and Custodia									
9, or reported an amo	unt on Form 990	, Part X, line 21.			-,	,			
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, or oth	ner intermediary for co	ontributions or other as	sets not	Yes				
b If 'Yes,' explain the arrangement	in Part XIV and com	plete the following tab	ole	•	_				
		_			Amount				
c Beginning balance				1 c					
d Additions during the year 1d									
e Distributions during the year									
f Ending balance									
2a Did the organization include an a	mount on Form 990,	Part X, line 21?			Yes	No			
b If 'Yes,' explain the arrangement									
Part V Endowment Funds Co	mplete if organiz	ation answered "	Yes' to Form 990,	Part IV, line 10.					
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four ye	ars back			
1 a Beginning of year balance	 								
b Contributions					, , , , , , , , , , , , , , , , , , ,				
c Net Investment earnings, gains, and losses			x	,		* 4			
d Grants or scholarships			3× k3′	(, * .	452 12,4	` 4			
 Other expenditures for facilities and programs 				, ,					
f Administrative expenses				. <u>8</u> ; * * ' .	, <u> </u>				
g End of year balance			(x) ((v))	67.75	\	<u> </u>			
Provide the estimated percentage	of the year end bala	ince held as							
a Board designated or quasi-endow	ment 🟲	%							
b Permanent endowment ►	 %								
c Term endowment ►	%								
3a Are there endowment funds not in organization by	n the possession of th	ne organization that a	re held and administer	ed for the	Yes	No			
(i) unrelated organizations					3a(i)				
(ii) related organizations					3a(ii)				
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?									
4 Describe in Part XIV the intended									
Part VI Investments Land P	uildings and Ea	Linmont Coo Eo	rm 000 Dort V lu	20.10					

(a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated Depreciation Description of investment (d) Book Value 49,832. 1 a Land 49,832 **b** Buildings c Leasehold improvements **d** Equipment 229,347. e Other 303,554. 74,207. Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 279,179.

BAA

Schedule **D** (Form 990) 2009

Schedule D (Form 990) 2009 MONTROSE ASSOCIAT			216117 Page 3
Part VII Investments-Other Securities See F		· · · · · · · · · · · · · · · · · · ·	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year n	luation narket value
Financial derivatives			
Closely-held equity interests			
Other			
			
			 _
			
	-		<u> </u>
	_		
Total. (Column (b) must equal Form 990 Part X, col (B) line 12)	_		
Part VIII Investments—Program Related (See	Form 990 Part X	Ine 13)	<u></u>
(a) Description of investment type	(b) Book value	(c) Method of va	luation
(a) Bescription of investment type	(b) Book Value	Cost or end-of-year n	narket value
<u> </u>			
	<u> </u> .	 	<u> </u>
		<u> </u>	
		<u> </u>	
Total (Column (b) must equal Form 990, Part X, Col. (B) line 13)			
Part IX. Other Assets (See Form 990, Part X	. line 15)	<u> 133 - 4 25 </u>	· · · · · · · · · · · · · · · · · · ·
	Description		(b) Book value

4,			
Table (Oakses (b) south assal Form 000 Port V and (P)	1E)		-
Total. (Column (b) must equal Form 990, Part X, col (B), I Part X 1 Other Liabilities (See Form 990, Part			1
(a) Description of Liability	(b) Amount		, , ,
Federal Income Taxes	(b) Amount		* \$
r cacrar income raxes			
		* .	
			(
			`
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)			
2. FIN 48 Footnote In Part XIV, provide the text of the foot	note to the organization's	s financial statements that reports the	e organization's liability

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		Change in Not Assets from Form Of		23-7210117	Fage 4
2 Total expenses (Form 930, Part IX, column (A), Inne 25) 3 Excess of (deficity) for the year (cosses) on investments 5 Donated Services and use of facilities 6 Investment expenses 8 Other (Describe in Part XIV) 9 Total adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (e) Add Ines 4 through 8 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 [Part XII Reconcilitation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gairs, and other support per audited inancial statements. 2 Arrounts included on line 1 but not on form 930, Part VIII, Ine 12 a Net unrealized gains on investments. 5 Donated services and use of facilities 6 Donated services and use of facilities 7 Donated services and use of facilities 8 Other (Describe in Part XIV) 9 Add lines 2 athrough 24 9 Ce 9 Add lines 2 athrough 24 9 Ce 9 Amounts included on Form 990, Part VIII, Ine 12, but not on line 1. a investments expenses not included on Form 990, Part VIII, Ine 70 b Other (Describe in Part XIV) 1 Add lines 2 athrough 25 1 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part IX, Ine 12) 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part IX, Ine 25 a Donated services and use of facilities 8 Perro year adjustments 9 Dother (Describe in Part XIV) 1 Total expenses and losses per audited financial statements 9 Dother (Describe in Part XIV) 2 Add lines 2 athrough 24 3 Subtract line 26 from line 1 4 Amounts included on ine 1 but not on Form 990, Part IX, Ine 25 a Donated services and use of facilities 9 Definer (Describe in Part XIV) 2 Add lines 2 athrough 24 3 Subtract line 26 from line 1 4 Amounts included on Form 990, Part IX, Ine 25 b Dother (Describe in Part XIV) 5 Define (Describe in Part XIV) 6 Add lines 2 athrough 24 5 Total expenses and lines 1 but not on Form 990, Part IX, Ine 25 5 Defined this, Rich 2 Part XI, Ine 2 Part XI, Ine 2 Part XI, Ine 2 Part XI, Ine 2 Part XI, Ine 2 Part XI, Ine 2 Part XI, Ine 2 Part XI, Ine 2 Part			ou to Financial Stateme	nts	
3 Excess or (deficit) for file year Subtract line 2 from line 1 Net unrealized gains (ioses) on investments 5 Donated services and use of facilities 6 Other (Describe in Part XIV) 7 Froir period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (rei) Add lines 4 through 8 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 Part XIII (Reconcilitation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements 2 Amburits included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments 5 Donated services and use of facilities 6 Recoveries of prior year grants 4 Other (Describe in Part XIV) 6 Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amburits included on Form 990, Part VIII, line 7b 6 Other (Describe in Part XIV) 7 Add lines 4 and 4b 5 Total revenue. Add lines 3 and 4e. (This must equal Form 990, Part I, line 12) Part XIII (Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 1 Total expenses and losses per audited financial statements 1 Total expenses and losses per audited financial statements 1 Total expenses and losses per audited financial statements 1 Total expenses and losses per audited financial statements 2 Amburits included on line 1 but not on from 990, Part IV, line 25 3 Contract lines 2 through 2d 3 Subtract line 2 through 2d 4 Amburits included on Form 990, Part IV, line 25 9 Ad lines 2 through 2d 4 Amburits included on Form 990, Part IV, line 7b 4 Dolliner (Describe in Part XIV) 6 Add lines 4 and 4b 7 Total expenses Add lines 3 and 4c (This must equal Form 990, Part IVI, lines 1a and 4, Part IVI, lines 1b and 2b, Part VI, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete lins part to provide any additional information 7 Total expenses Add lines 8 and 4c (This must equal Form 990, P	•	• •			
4. Net unrealized gains (losses) on investments 5. Donaled services and use of facilities 6. Investment, expenses 7. Proor pend adjustments 8. Other (Describe in Part XIV) 9. Total adjustments (rei). Add lines 4 through 8 10. Excess of (defect) for the year per audited financial statements. Combine lines 3 and 9 10. Excess of (defect) for the year per audited financial statements. With Revenue per Return 1. Total revenue, gains, and where support per audited financial statements. 2. Amounts included on line 1 but not on Form 990, Part VIII, line 12 a. Net unrealized gains on investments b. Donaled services and use of facilities c. Recoveries of prior year grants d. Other (Describe in Part XIV) 2. d. d. d. lines 2. at through 24 3. Subtract line 26 from line 1 4. Amounts included on Form 990, Part VIII, line 12, but not on line 1. a. Investments expenses not included on Form 990, Part VIII, line 70 b. Other (Describe in Part XIV) 4. d. d. lines 2. at mough 24 5. Total expenses and losses per audited financial statements 5. Total expenses and losses per audited financial statements 2. Amounts included on line 1. 4. Amounts included on International statements 2. Amounts included on International statements 2. Amounts included on International statements 2. Amounts included on International statements 2. Amounts included on International statements 2. Amounts included on International statements 2. C. d. d. lines 2. Amounts included on Form 990, Part IX, line 25 a. Donated services and use of facilities 5. Part XIVI (Perconciliation of Expenses per Audited Financial Statements With Expenses per Return 1. Total expenses and losses per audited financial statements 2. 2. a. Donated services and use of facilities 5. Donated services and use of facilities 5. Donated services and use of facilities 6. Journal services and use of facilities 6. Journal services and use of facilities 6. Journal services and use of facilities 6. Journal services and use of facilities 6. Journal services and use of facilities 6. Journal servi	· ·	• •			
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Schedule D (Form 990) 2009 MONTROSE ASSOCIATION OF REALTORS Part XIV Supplemental Information (continued)	23-7216117	Page 5
Part XIV Supplemental Information (continued)		
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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number

23-7216117 MONTROSE ASSOCIATION OF REALTORS Pt_VI-A, Line 7a The members elect the governing body Pt_VI-B, Line 12c The board regularly meets to discuss all operations and monitors conflicts Pt_VI-C, Line 19 Yes, these documents are all available to anyone who asks Pt_VI-A, Line 6 Members only Pt_VI-B, Line 11A Prior to filing, the Executive Director and the BOD review the return