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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 1

Department of the Treasury Internal Revenue Service

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

A	For the 2010 calendar year, or tax year beginning , 2010, and ending			·
	Check if applicable.		Employer Identi	fication Number
	Address change ARKANSAS REALTORS ASSOCIATION		23-7000	743
	Name change 11224 EXECUTIVE CENTER DRIVE	Ε	Telephone numb	)CT
	Initial return LITTLE ROCK, AR 72211		501-225	-2020
	Terminated	<u> </u>	001 220	2020
	Amended return	ا م	Gross receipts \$	1,572,079.
		(a) Is this a grou		
	□ · · · · · · · · · · · · · · · · · · ·	(b) Are all affilia		Yes No
-	SAME AS C ADOVE		n a list (see inst	
÷	Tax-exempt status 501(c)(3) X 501(c) (6 ) ◀ (insert no.) 4947(a)(1) or 527		_	
<u>-1</u>		(c) Group exem		
K	Form of organization	n 1925	M State of le	egat domicile AR
[Pa	rt I 🔆 Summary			
	1 Briefly describe the organization's mission or most significant activities: <u>TRADE_ASS</u>			
8	REALTORS OPERATING IN THE STATE OF ARKANSAS. THE ASSOC			
an	PROMOTE THE REAL ESTATE INDUSTRY IN GENERAL AND TO PROV	ZIDE_EDU	CATIONAL	_ENRICHMENT
/err	AND RISK REDUCTION FOR ITS MEMBERSHIP.			
Activities & Governance	2 Check this box ► ☐ if the organization discontinued its operations or disposed of more			sets
ಹ	<ul> <li>Number of voting members of the governing body (Part VI, line 1a)</li> <li>Number of independent voting members of the governing body (Part VI, line 1b)</li> </ul>		3 4	49
ies	<ul> <li>Number of independent voting members of the governing body (Part VI, line 1b)</li> <li>Total number of individuals employed in calendar year 2010 (Part V, line 2a)</li> </ul>		5	4
ivit	Total number of individuals employed in calendar year 2010 (Fart V, line 2a)		6	
Act	7a Total unrelated business revenue from Part VIII, column (0) In 2 1 2 1		7a	13,737
	b Net unrelated business taxable income from Form 990. Fine 34		7b	0.
_		Prior		Current Year
	8 Contributions and grants (Part VIII, line 1h) AUG. 1 G. 2011.	11101	104	Odificial Teal
e l	9 Program service revenue (Part VIII, line 2g)	1.0	86,323.	1,163,359
Revenue	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		7,964.	4,939
Be	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).	2	20,131.	237,743
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		14,418.	1,406,041
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>		<u> </u>
	14 Benefits paid to or for members (Part IX, column (A), line 4)			
, ə <u>,</u>	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5	17,865.	452,531
າ Ses	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<u>_</u>	2.,,000.	1027002
		ALCOHOLD AND A		A TOTAL PROPERTY.
Expen	b Total fundraising expenses (Part IX, column (D), line 25) ▶	<b>公理</b> 政政中		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		<u>42,360.</u>	738,739
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,3	60,225.	1,191,270
	19 Revenue less expenses. Subtract line 18 from line 12	<u> </u>	45,807.	214,771
ъ <b>8</b>		Beginning of	Current Year	End of Year
alan	<b>20</b> Total assets (Part X, line 16)	3,4	62,680.	3,214,607
A B	<b>21</b> Total liabilities (Part X, line 26)	8	49,022.	389,116
\$2	22 Net assets or fund balances. Subtract line 21 from line 20	2,6	13,658.	2,825,491
Pa	rt II 휒 Signature Block			= / /
	A	he hest of my kn	owledge and he	lief it is true correct and
com	er penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	no bost or my na	omicago ana so	nor, it is due, correct, and
	m 6 h l		8-12-11	<u> </u>
Sig	n Signature of officer	Date	<del> </del>	
He	e MARK MARCHAND	CEO		
	Type or print name and title	<u> </u>		· · · · · · · · · · · · · · · · · · ·
_	Print/Type preparer's name Preparer's signature Date	7	ا ، ا	PTIN
D-1		Che		
Pa	~~ · · · · · · · · · · · · · · · · · ·	self	employed	P00014666
	parer Firm's name NNAPP, CRAIG & COMPANY, P.A.  Only Firm's address > 1501 N UNIVERSITY SUITE 245		m 4	0.65455.6
US	Timis addiess Tool It ONLYBROTTI, BOTTE 210	Firm		-0654756
	LITTLE ROCK, AR 72207	Pho	ne no (50.	1) 664-5434
May	the IRS discuss this return with the preparer shown above? (see instructions)			X Yes No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2010)

TEEA0113L 12/21/10

C COC (COLO) ADVANCAC DEALTODE ACCOCTATION	22 7000742	Dama 3
Form 990 (2010) ARKANSAS REALTORS ASSOCIATION  Raitilla Statement of Program Service Accomplishments	23-7000743	Page 2
Check if Schedule O contains a response to any question in this Part III		$\mathbf{x}$
1 Briefly describe the organization's mission: TRADE ASSOCIATION ORGANIZED FOR REALTORS OPERATING IN THE ASSOCIATION WAS ESTABLISHED TO PROMOTE THE REAL ESTATE IN PROVIDE EDUCATIONAL ENRICHMENT AND RISK REDUCTION FOR ITS	DUSTRY IN GENERAL AND TO	<u> </u>
2 Did the organization undertake any significant program services during the year which were Form 990 or 990-EZ?	not listed on the prior	No
If 'Yes,' describe these new services on Schedule O  Did the organization cease conducting, or make significant changes in how it conducts, any	program services? .  Yes X	No
<ul> <li>If 'Yes,' describe these changes on Schedule O.</li> <li>Describe the exempt purpose achievements for each of the organization's three largest propand 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount expenses, and revenue, if any, for each program service reported</li> </ul>	gram services by expenses. Section 50 of grants and allocations to others, th	01(c)(3) e total
4a (Code ) (Expenses \$ 166,038. including grants of \$ THE ASSOCIATION HAS PRODUCED STANDARDIZED INDUSTRY FORMS MEMBERSHIP. THE PRIMARY PURPOSE IS RISK (LIABILITY) REDU SOFTWARE ARE AVAILABLE FOR SALE ONLY TO LICENSED REAL EST ELECTRONIC FORMS ARE AVAILABLE ONLY TO REALTORS WHO ARE M PAPER FORMS ARE AVAILABLE TO MEMBERS AND NON-MEMBERS.	AND SOFTWARE FOR ITS CTION. THE FORMS AND ATE BROKERS AND AGENTS.	999.)
4b (Code. (Expenses \$ 122,360. Including grants of \$ THE ASSOCIATION SPONSORS AN ANNUAL CONVENTION FOR ITS MEMINAL INCLUDES SPEAKERS, EDUCATION SEMINARS, TABLE-TOP EXHIBITS	BERS. THE CONVENTION	993.)
IDEAS. APPROXIMATELY 350 PERSONS ATTENDED THE 2010 CONVI		
Ac (Code   ) (Expenses \$ 78,689. Including grants of \$ MEMBER PROJECTS PRIMARILY REPRESENTS THE ANNUAL "AWARDS I RECOGNIZES REALTOR MEMBERS MEETING CERTAIN SALES STANDAR APPROXIMATELY 1,200 MEMBER REALTORS WERE RECOGNIZED WITH MEMBER PROJECTS ALSO INCLUDES THE ASSOCIATION'S ANNUAL SI CAMPAIGN BENEFITTING THE ARKANSAS SPECIAL OLYMPICS. \$37 OTHER MEMBER PROJECTS INCLUDE PROMOTION AND ADVANCEMENT CONTINUING PUBLIC RELATIONS CAMPAIGNS.	FOR EXCELLENCE" PROGRAM DS IN THE PRIOR YEAR. AWARDS FOR EXCELLENCE. PONSORSHIP OF A FUND-RAI 335 WAS RAISED IN 2010.	SING
4d Other program services. (Describe in Schedule O)  (Expenses \$ 28,791. including grants of \$ ) €  4e Total program service expenses ► 395,878.	Revenue \$ 31,435.)	
To Total program Service expenses > 373,070.	Earm (	990 (2010)

, (a)	triv   Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		<u>X</u>
3	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 !	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	Х	
6	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, Part I	6		Х
7	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
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	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 Schedule D, Part IV	9		х
10	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_		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.		, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	
á	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	_X	
ı	b 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.	11 b		Х
(	c 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	11 c		Х
	t in the second of the second	11 d	Х	
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part $X$ .	11 e		X
1	f 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 (ASC 740)? If 'Yes,' complete Schedule D, Part X.	11 f		Х
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	_x	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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, Parts I and IV	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, Parts II and IV	15	 	Х
16	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, Parts III and IV.	16		Х
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19	<u> </u>	X
	a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
l	b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20ъ		

1 41	Checkist of Required Schedules (Continued)			
			Yes	No
21	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
22	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 27 If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	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 J	23		х
24 a	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		x
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	25 a		
t	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	:	
26	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
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	7	م سند د د د	
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	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 (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part Il	32		Х
33	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	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Х	<u> </u>
•	a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 X Yes No			
36	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		
37	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	37		x
38	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	38	х	
RΔΔ		Forn	990	(2010

TEEA0104L 12/21/10

Form 990 (2010) ARKANSAS REALTORS ASSOCIATION	23-700074	3	P	age 5
Rankva Statements Regarding Other IRS Filings and Tax Compliance				
Check if Schedule O contains a response to any question in this Part V		<u></u>		
			Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 26			
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		1	
c Did the organization comply with backup withholding rules for reportable payments to vendor (gambling) winnings to prize winners?.	rs and reportable gaming	1 c	X	,
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.	<b>2a</b> 9			
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employmen	nt tax returns?	2b	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see if				
3a Did the organization have unrelated business gross income of \$1,000 or more during the year		3 a	Х	
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3 b	Х	
4a At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other f		4a		х
<b>b</b> If 'Yes,' enter the name of the foreign country: ►		10.7		
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and F	inancial Accounts.			1.5
5a Was the organization a party to a prohibited tax shelter transaction at any time during the ta		5a		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shell		5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	••	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible?	and did the organization	6a		Х
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such c not tax deductible?		6b		
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 payor?	partly for goods and	7a		
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for w		<b>'</b>		
Form 8282?		7c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7d			.,,
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal	benefit contract?	7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber		7f		
g If the organization received a contribution of qualified intellectual property, did the organizat as required?		7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	e organization file a	7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, boldings at any time during the year?	ng organizations. Did the nave excess business	8		
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?		9a		
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?	,	9b		
10 Section 501(c)(7) organizations. Enter:				~;
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 Section 501(c)(12) organizations. Enter:				
a Gross income from members or shareholders	11a			
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources				1 7
against amounts due or received from them.)	11b	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.	126			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	~1	1		
a is the organization licensed to issue qualified health plans in more than one state?		13a	<del></del>	
Note. See the instructions for additional information the organization must report on Schedu	ıle O.		1	
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in	1 1		37	
which the organization is licensed to issue qualified health plans.	13b		3.76	
c Enter the amount of reserves on hand	13c	3	32 7	1

14a Did the organization receive any payments for indoor tanning services during the tax year?

**b** If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.

14a

14b

Pai	Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b be a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chan Schedule O. See instructions.	low, i ges i	and f n	or
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
	Enter the number of voting members of the governing body at the end of the tax year . 1a 49 benter the number of voting members included in line 1a, above, who are independent 49			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents	4	Х	
_	since the prior Form 990 was filed? SEE SCH O	5	Ì	v
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6	Х	<u>X</u>
6	Does the organization have members or stockholders? SEE SCHEDULE 0	-	<del>^</del>	
	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?  SEE SCHEDULE 0	7a	Х	
ŧ	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? SEE SCH 0	7 b	X	Sucabord.
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		建	
á	The governing body?	8a	Х	
ŀ	b Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O.	9		<u>X</u>
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10 a	a Does the organization have local chapters, branches, or affiliates?	10 a		<u>X</u>
ı	b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11 a	a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
ì	b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O	4		
12 a	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	<u>X</u>	
ı	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
(	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done SEE SCHEDULE O	12c	х	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
•	a The organization's CEO, Executive Director, or top management official	15 a		X
1	<b>b</b> Other officers 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 organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a	1157	X
i	b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?.	16b		
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	1000 ( 100	vailab	le for	public
	Own website Another's website X Upon request			
19	statements available to the public. SEE SCHEDULE O			ancıal
	State the name, physical address, and telephone number of the person who possesses the books and records of the org MARK MARCHAND 11224 EXECUTIVE CENTER DRIVE LITTLE ROCK AR 72211 501-225-20		tion 	

Form 990 (2010)	APKANCAC	DEVILUOR	ASSOCIATION
FORM <b>330</b> (2010)	AKNAMAA	KUNTINKO.	ASSULTATION

23-7000743

age 7

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

Check if Schedule O contains a response to any question in this Part VII

#### 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 organization's tax year.
- 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, if any. 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 neither the organizat	ion nor any	relate	d o	gan	ızat	ion co	mpe	ensated any current of	fficer, director, or trust	ee.
(A)	(B)			((	<b>C)</b>			(D)	(E)	(F)
Name and title	Average hours per week (describe hours for related	Individual trustee or director	institutional trust		Key employee	that app Highest of	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related
	organiza- tions in Schedule O)	l trustee or	nal trustee		loyee	Highest compensated employee				organizations
_(1) DANA POWELL		,,		,						
SEC-TREAS	2	X		X			_	0.	0.	0.
(2) JUDY GERBER DIRECTOR	2	x						0.	0.	0.
(3) LAURIE RUSHING										
DIRECTOR	2	x						0.	0.	0.
(4) KAREN CROWSON									·	
DIRECTOR	2	Х						0.	0.	0.
(5) MELANIE SILVEY										
DIRECTOR	2	Х					<u> </u>	0.	0.	0.
(6) DARLA DOUGLAS										
DIRECTOR	2	X						0.	0.	0.
(7) ROBERT DOWNUM	. 🔟	ł			ļ			1		
DIRECTOR	2	X			_			0.	0.	0.
(8) SANDY EBEL	. 🚽							_		_
DIRECTOR	2	X	<u> </u>	<u> </u>	_	ļ	<b>Ļ</b> _	0.	0.	<u> </u>
(9) MICHAEL FORD	·-	.,	ł			1			_	•
DIRECTOR CLARKE	2	X	⊢	<del> </del>	_	├	┢	0.	0.	0.
(10) DEBBIE CLARKE DIRECTOR	.⊢ ,	<sub>v</sub>								0
(11) WES FREEMAN	2	X	$\vdash$	$\vdash$	├	<del> </del>		0.	0.	0.
DIRECTOR	·-  <sub>2</sub>	x	l			İ		0.	0.	0.
(12) SHERRY BOTTOMS		^					$\vdash$	<del> </del>	0.1	<u></u>
DIRECTOR	· -   2	Х	1			Ì		0.	0.	0.
(13) NANETTE WEMHANER		1				<del>                                     </del>	-		<u> </u>	<u> </u>
DIRECTOR	-   2	X						0.	0.	0.
(14) CHRISTOPHER GRAHAM	<del></del>	† - <del></del>			$\vdash$	<del> </del>	<del>                                     </del>			
DIRECTOR	2	Х						0.	0.	0.
(15) GRANT HENRY		1			T					
PRESIDENT	2	Х		Х				0.	0.	0.
(16) VICTOR HIRYAK										
DIRECTOR	2	Х						0.	0.	0.
(17) TOMMY JONES										
DIRECTOR	2	X	<u> </u>	L_				0.	0.	0.
BAA		•	TEEA	0107	L 12	2/21/10				Form <b>990</b> (2010)

Part VII   Section A. Officers, Directors, Trust (A)	(B)	ley	LII		c)	<del>es,</del>	anı	(D)	(E)	(F)
Name and title	Average			•	•	hat a <sub>l</sub>	oply)	` '	Reportable	Estimated
	hours per week (describe hours for related organi- zations in Sch O)	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
(18) MONA BUNGARD SPAANEM DIRECTOR	2	x						0.	0.	0.
(19) WILLIAM LADD DIRECTOR	2	x						0.	0.	0.
(20) JERRY DANEHOWER DIRECTOR										
(21) BURTON HENDERSON	2	X						0.	0.	0.
DIRECTOR (22) VELDA LUEDERS	2	X						0.	0.	0.
DIRECTOR (23) BILL LYONS	2	X			-			0.	0.	0.
DIRECTOR (24) MITCHELL HART	2	X						0.	0.	0.
DIRECTOR (25) SHARLA LAU	2	X	 					0.	0.	0.
DIRECTOR (26) ANDY MEYERS	2	Х	<u> </u>	-	-			0.	0.	0.
PRES ELECT (27) REBECCA MILLER	2	X		X				0.	0.	0.
DIRECTOR (28) JONATHAN MOORE	2	Х	_					0.	0.	0.
DIRECTOR (29) WILLIAM OLSON	2	X	-		-	-		0.	0.	0.
DIRECTOR  1 b Sub-total	2	<u> </u>	<u> </u>	<u> </u>		<u> </u>	<b></b>	0.	0.	0. 0.
c Total from continuation sheets to Part VII, Section  d Total (add lines 1b and 1c)	Α						<b>&gt;</b>	191,840. 191,840.	0. 0.	23,735. 23,735.
2 Total number of individuals (including but not limite from the organization ► 0	d to the	se l	ste	d ab	ove	) wh	o re	ceived more than	\$100,000 in reporta	able compensation
<ul> <li>Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such if the organization and related organizations greater to the organization.</li> </ul>	<i>ndıvıdua</i> portable	a <i>l</i> e co	mpe	ensa	ition	and	I oth	 ner compensation		Yes No
such individual	compens	 satio	n fr	om.	anv	unre	 elate			4 X
for services rendered to the organization? If 'Yes,' Section B. Independent Contractors	complet	e So	hec	lule	J fo	r su	ch p	person .		5 X
Complete this table for your five highest compensa compensation from the organization.	ted inde	pen	den	t co	ntra	ctors	s tha	at received more t	han \$100,000 of	
Name and business addres	s						_	Description	of services	(C) Compensation
O Table and a finding to the second s				1. *						, <del>, , ,</del>
2 Total number of independent contractors (including \$100,000 in compensation from the organization >		ıım	ited	to t	NUS	E 1151	iea a	anove) who receiv	red more than	e Miss Barrio

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<u> Par</u>	T VIII   Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
TS, GIRANTS AMOUNTS	1 a Federated campaigns 1 a   b Membership dues 1 b   c Fundraising events 1 c			, k	
CONTRIBUTIONS, GIFTS, GI?ANTS AND OTHER SIMILAR AMOUNTS	d Related organizations 1d  e Government grants (contributions) . 1e  f All other contributions, gifts, grants, and similar amounts not included above 1f  g Noncash contributions included in lns 1a-1f: \$				
8₹	h Total. Add lines 1a-1f				<u> </u>
ä	Business Code	<u> </u>			
KE	2a MEMBERSHIP DUES & ASSESSMENTS	941,995.	941,995.		
PROGRAM SERVICE REVENUE	b CONVENTION INCOME	124,993.	124,993.		
22	c MEMBER PROJECTS	54,846.	54,846.		
Ë	d EDUCATION PROGRAMS	31,435.	31,435.		
₩.	e LEADERSHIP TRAINING	10,090.	10,090.		
SR.	f All other program service revenue .				
윤	g Total. Add lines 2a-2f	1,163,359.	ę ,	,	
	3 Investment income (including dividends, interest and other similar amounts)	4,939.			4,939.
	4 Income from investment of tax-exempt bond proceeds		· -		
	5 Royalties				
	(i) Real (ii) Personal				
	<b>6a</b> Gross Rents		_ ' ' ,	` <u>-</u>	
	<b>b</b> Less <sup>,</sup> rental expenses		, ,	, , , , , , , , , , , , , , , , , , ,	
	c Rental income or (loss) 2,505.	,		1 .	
	d Net rental income or (loss)	2,505.			2,505.
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other				, ,
	b Less: cost or other basis and sales expenses	, , , , , , , , , , , , , , , , , , ,			
İ	c Gain or (loss)			<u> </u>	<u> </u>
	d Net gain or (loss)				
ENDE	8a Gross income from fundraising events (not including. \$				
Ě	of contributions reported on line 1c)	== -			
OTHER REVENU	See Part IV, line 18	·	· ·		'''
T.	<b>b</b> Less: direct expenses <b>b</b>		`,	<del></del>	
_	c Net income or (loss) from fundraising events		1		<del> </del>
	9a Gross income from gaming activities. See Part IV, line 19	,	- 1.		
	<b>b</b> Less: direct expenses <b>b</b>		<u> </u>		
	c Net income or (loss) from gaming activities	<u> </u>	-	-	ļ
	10 a Gross sales of inventory, less returns and allowances a 386,999.  b Less cost of goods sold b 166,038.				
		<del></del>	220,961.	<del>``</del>	<u> </u>
	c Net income or (loss) from sales of inventory	220,961.	220,961.	4 3 3 3 2	Contraction of the second
1		12 727	\ <del></del>	13 737	<del></del>
	11a ADVERTISING 511120	13,737.		13,737.	F40
	b MEMBER SERVICE ROYALTY	540.		<del>                                     </del>	540.
	C	ļ	<del> </del>	ļ	
	d All other revenue	<u> </u>		- C- II	1 154
	e Total. Add lines 11a-11d	14,277.	3. 19		<u> </u>
	19 Total revenue See instructions	1 106 011	1 384 320	1 12 727	7 001

### RantiX 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)

Do 1 6b, 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	191,840.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	181,085.			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	7,047.			
9	Other employee benefits	44,077.			
10	Payroll taxes	28,482.			
11	Fees for services (non-employees)				
	Management				
b	Legal	4,537.			
c	: Accounting .	10,160.			
d	Lobbying			-	
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees .				
g	Other				
12	Advertising and promotion .				
13	Office expenses	11,659.			
14	Information technology				
15	Royalties .				
16	Occupancy .	35,957.			
17	Travel	127,830.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	Interest	10,725.		ļ <u>-</u>	
21	Payments to affiliates	55 000			
	Depreciation, depletion, and amortization	75,203.			
23 24	Insurance	10,054.			
24	covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	CONVENTION	122,360.			
b	MEMBER PROJECTS	78,689.			
	: LEGISLATION	65,267.			
	MEMBER COMMUNICATION	50,250.			
	EDUCATION PROGRAMS	28,791.			
	All other expenses	107,257.			
	Total functional expenses. Add lines 1 through 24f	1,191,270.			
26	Joint costs. Check here ► if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2010)

BAA

Form 990 (2010)

		(A) Beginning of year		<b>(B)</b> End of year
1	Cash — non-interest-bearing		1	11,788.
2	Savings and temporary cash investments	493,430.	2	262,844.
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	21,164.	4	8,765.
5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	10 10 10 10 10 10 10 10 10 10 10 10 10 1
6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
7	Notes and loans receivable, net	·	7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	85,780.	9	136,381.
10 8	Land, buildings, and equipment: cost or other basis.  Complete Part VI of Schedule D			
	Less accumulated depreciation . 10b 194,806.	2,227,306.	10 c	2,159,829.
11	Investments – publicly traded securities		11	
12	Investments – other securities. See Part IV, line 11		12	
13	Investments – program-related. See Part IV, line 11.		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	635,000.	15	635,000
16	Total assets. Add lines 1 through 15 (must equal line 34)	3,462,680.	16	3,214,607
17	Accounts payable and accrued expenses	34,318.	17_	12,879.
18	Grants payable		18	
19	Deferred revenue	398,753.	19	376,237
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21_	
22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
	of Schedule L		22	
23		415,951.	23	<u> </u>
24	, , , , , , , , , , , , , , , , , , , ,		24	
25	Other liabilities Complete Part X of Schedule D	0.4.0.000	25	200 116
26	Total liabilities. Add lines 17 through 25	849,022.	26	389,116
	Organizations that follow SFAS 117, check here $ ightharpoonup$ and complete lines 27 through 29 and lines 33 and 34.			
27	Unrestricted net assets	2,613,658.	27	2,825,491
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances.	2,613,658.	33	2,825,491
34	Total liabilities and net assets/fund balances	3,462,680.	34	3,214,607

Form 990 (2010) ARKANSAS REALTORS ASSOCIATION	23-7000743	Pa	ge <b>12</b>
Part XI Reconciliation of Net Assets			_
Check if Schedule O contains a response to any question in this Part XI	·		X
1 Total revenue (must equal Part VIII, column (A), line 12)	. 1	1,406,0	
2 Total expenses (must equal Part IX, column (A), line 25)	2	1,191,2	
3 Revenue less expenses. Subtract line 2 from line 1	3	214,7	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	2,613,6	
5 Other changes in net assets or fund balances (explain in Schedule O). SEE SCHEDULE Q	5	-2,9	<u> 38.</u>
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	. 6	2,825,4	91.
Part XII Financial Statements and Reporting			
Check if Schedule O contains a response to any question in this Part XII			<u>. X</u>
1 Accounting method used to prepare the Form 990 Cash Accrual X Other SEE SC	Н. О	Yes	No State
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?.		2a	<u>X</u>
<b>b</b> Were the organization's financial statements audited by an independent accountant?		2b X	<u> </u>
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversi review, or compilation of its financial statements and selection of an independent accountant?	ght of the audit,	2c X	<u></u> .
If the organization changed either its oversight process or selection process during the tax year, expla in Schedule O.	ın		
d if 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year we separate basis, consolidated basis, or both:	ere issued on a		
X Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?	ın the Sıngle	3a	x
<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	the required audit	3 b	
BAA		Form <b>990</b>	(2010)

TEEA0112L 12/21/10

#### **SCHEDULE C** (Form 990 or 990-EZ)

**Political Campaign and Lobbying Activities** 

Schedule C (Form 990 or 990-EZ) 2010

OMB No 1545 0047 2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C

Section 527 organizations: Complete Part I-A only.

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

• 5	Section 501(c)(3) organizations	s that have filed Form 5768 (election unde	r section 501(h)): Cor	nplete Part II-A Do not	complete Part II-B
• S	Section 501(c)(3) organizations Part II-A.	s that have NOT filed Form 5768 (election	under section 501(h))	: Complete Part II-B. D	o not complete
If the	organization answered 'Yes,	,' to Form 990, Part IV, line 5 (Proxy Tax) o	or Form 990-EZ, Part	V, line 35a (Proxy Tax),	then
		rganizations: Complete Part III.			
Name	of organization			Employer identifica	ition number
ARE	KANSAS REALTORS ASS	OCIATION		23~700074	3
		rganization is exempt under section	on 501(c) or is a s	section 527 organiz	zation.
		organization's direct and indirect political of			
	Political expenditures			. ►\$	
	Volunteer hours		•	· · · ·	
		rganization is exempt under section	on 501(c)(3)		
		ise tax incurred by the organization under		<u> </u>	
		ise tax incurred by organization managers			
		section 4955 tax, did it file Form 4720 for		·· • •	Yes No
				• ••	
			• • • • •	••••	Yes No
_	If 'Yes,' describe in Part IV		F01(-)		· <del></del>
		rganization is exempt under section			
1	Enter the amount directly ex	pended by the filing organization for section	on 52/ exempt function	n activities > \$	
2	Enter the amount of the filing function activities	g organization's funds contributed to other	organizations for sec	tion 527 exempt ► \$	
3		ditures. Add lines 1 and 2. Enter here and		▶\$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes X No
5	Enter the names, addresses organization made payments amount of political contributivegregated fund or a political	and employer identification number (EIN) s. For each organization listed, enter the a ons received that were promptly and directly action committee (PAC). If additional spirits is a spirit and in the committee (PAC).	of all section 527 pol mount paid from the i tly delivered to a sepa ace is needed, provide	itical organizations to w filing organization's fund arate political organizat e information in Part IV	which the filing ds. Also enter the ion, such as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

section 501(	h)).				
A Check ► If the filin	ig organization beloi	ngs to an affiliated group.			
B Check ► If the filing	ig organization chec	ked box A and 'limited cor	ntrol' provisions apply		
(The term	Limits on Lobbyi 'expenditures' mear	ng Expenditures ns amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ires to influence pub	olic opinion (grass roots lo	bbying)		
<b>b</b> Total lobbying expenditu	ires to influence a le	egislative body (direct lobb	ying)		
c Total lobbying expenditu	ires (add lines 1a ar	nd 1b)			·
d Other exempt purpose e	expenditures .				
e Total exempt purpose e	xpenditures (add lin	es 1c and 1d)			<u> </u>
f Lobbying nontaxable am both columns.	nount. Enter the amo	ount from the following tab	ole in		
If the amount on line 1e, colu	ımn (a) or (b) ıs <sup>.</sup> T	he lobbying nontaxable a	mount is.		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,	000,000	\$100,000 plus 15% of the excess	over \$500,000.		
Over \$1,000,000 but not over \$	1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000.		
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess o	ver \$1,500,000		
Over \$17,000,000		\$1,000,000.			
<b>g</b> Grassroots nontaxable a					· · · · · · · · · · · · · · · · · · ·
h Subtract line 1g from lin					
i Subtract line 1f from line	e 1c. If zero or less,	enter -0			
j If there is an amount oth section 4911 tax for this	her than zero on eitl year?	her line 1h or line 1i, did tl	ne organization file For	m 4720 reporting	. Yes No
(Some	2 e organizations that column	4-Year Averaging Period U t made a section 501(h) el s below. See the instruction	Inder Section 501(h) ection do not have to c ons for lines 2a throug	complete all of the five h 2f.)	
· · ·	Lobb	ying Expenditures During	4-Year Averaging Per	iod	
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	<b>(d)</b> 2010	(e) Total
2a Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures .					
<b>d</b> Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures .				Schedule C (For	m 990 or 990-EZ) 2010

Partill B. Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		a)	(b)	
	Yes	No	Amount	
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
<b>a</b> Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?	. [			
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities? If 'Yes,' describe in Part IV				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	.   ` ` `			
b If 'Yes,' enter the amount of any tax incurred under section 4912				
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Partill A Complete if the organization is exempt under section 501(c)(4), section 50 section 501(c)(6).	1(c)(5)	, or		
Section sortextos.			Vac No	
4. We are held 1. II. II. (000)			Yes No	
1 Were substantially all (90% or more) dues received nondeductible by members?			<del></del>	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		•	. 2 X	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?  Randille Ba Complete if the organization is exempt under section 501(c)(4), section 50	1/-\/E\		3 X	
section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if F is answered 'Yes.'	art III-	A, lin	e 3	
1 Dues, assessments and similar amounts from members		1	941,995.	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
<b>a</b> Current year		2a	127,927.	
<b>b</b> Carryover from last year	•	2b		
c Total		2c	127,927.	
a a contract of the contract o		3	217,588.	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues			211,300.	
<ul> <li>3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poor to the reasonable estimate.</li> </ul>	ess olitical		-	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and present the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and present the exceeds the exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and present the exceeds the	ess olitical	4	0.	
<ul> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and prescribed expenditure next year?</li></ul>	ess olitical	4 5	-	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and present the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and present the exceeds the exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and present the exceeds the	ess olitical	<del>- `</del>	0.	

Schedule C (I	form 990 or 990-EZ) 2010 ARKANSAS REALTORS ASSOCIATION	23-7000743	Page 4
Part IV	Supplemental Information (continued)		
			<b></b> -
			<b></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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	KANSAS REALTORS ASSOCIATION			23-7000743
Pai	Organizations Maintaining Dono the organization answered 'Yes' t	r <mark>Advised Funds or Oth</mark> s o Form 990, Part IV, line	er Similar Funds 6.	or Accounts. Complete If
1 2 3 4	Total number at end of year	(a) Donor advised		(b) Funds and other accounts
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the to the organization's exclusive	assets held in donor legal control?	advised Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private benefits	the benefit of the donor or dor	nor advisor, or for any	/ other Yes No
Pai	াৰী Conservation Easements. Compl	ete if the organization ai	nswered 'Yes' to	Form 990, Part IV, line 7.
	Purpose(s) of conservation easements held by Preservation of land for public use (e.g., reservation of natural habitat Preservation of open space Complete lines 2a through 2d if the organization	ecreation or education)	Preservation of ar Preservation of a	historically important land area certified historic structure
	last day of the tax year			
t	Total number of conservation easements.  Total acreage restricted by conservation ease.  Number of conservation easements on a certi		F	Held at the End of the Tax Year  2a  2b  2c
	Number of conservation easements included i		```	
•	structure listed in the National Register			2d
3	Number of conservation easements modified, tax year ►			by the organization during the
4	Number of states where property subject to co			
5	Does the organization have a written policy re and enforcement of the conservation easement			<del></del>
6	Staff and volunteer hours devoted to monitori	ng, inspecting, and enforcing o	conservation easeme	nts during the year
7	Amount of expenses incurred in monitoring, ii	nspecting, and enforcing cons	ervation easements d	during the year
8	Does each conservation easement reported o $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(ii)$ ?			Yes 📙 No
9	In Part XIV, describe how the organization report include, if applicable, the text of the footnote conservation easements.	to the organization's financial	statements that desc	ribes the organization's accounting for
Pai	Complete if the organization ans	ections of Art, Historical wered 'Yes' to Form 990	<b>Treasures, or Ot</b> , Part IV, line 8.	her Similar Assets.
1 a	If the organization elected, as permitted unde art, historical treasures, or other similar asset in Part XIV, the text of the footnote to its fina	s held for public exhibition, ed	lucation, or research	statement and balance sheet works of in furtherance of public service, provide,
t	olf the organization elected, as permitted unde historical treasures, or other similar assets he following amounts relating to these items:	eld for public exhibition, educa	ort in its revenue station, or research in fu	tement and balance sheet works of art, irtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII	, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X			. ▶\$
	If the organization received or held works of a amounts required to be reported under SFAS	116 (ASC 958) relating to the	er similar assets for f se items:	nancial gain, provide the following
	Revenues included in Form 990, Part VIII, line	e 1		►S

Schedule D (Form 990) 2010 ARKAN				23-700		
Partill Organizations Mainta	ining Collection	s of Art, Histori	<u>cal Treasures, or</u>	Other Similar Ass	ets (continued)	
Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)  a Public exhibition  b Scholarly research  c Preservation for future generations  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in						
Part XIV.						
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or receive ather than to be ma	e donations of art, intained as part of	nistorical treasures, of the organization's coll	r other similar lection?	Yes No	
Escrow and Custodia 9, or reported an amo	Arrangements.	Complete if or	ganization answer			
1 a Is the organization an agent, trus included on Form 990, Part X?. b If 'Yes,' explain the arrangement			• • • • • • • • • • • • • • • • • • • •	er assets not	Yes No	
					Amount	
c Beginning balance				1c		
d Additions during the year .				1d		
e Distributions during the year				1 e		
f Ending balance				1f		
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 the or	ganization answ		<del></del>	<del>                                     </del>	
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back	
1 a Beginning of year balance.						
<b>b</b> Contributions						
c Net investment earnings, gains, and losses.						
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses		<u> </u>				
<b>g</b> End of year balance .		<u> </u>				
2 Provide the estimated percentag		alance held as:				
a Board designated or quasi-endov	vment >	8				
<b>b</b> Permanent endowment ►						
c Term endowment	8					
3a Are there endowment funds not organization by	in the possession of	the organization th	nat are held and admi	nistered for the	Yes No	
<ul><li>(i) unrelated organizations.</li></ul>					3a(i)	
(ii) related organizations					3a(ii)	
<b>b</b> If 'Yes' to 3a(II), are the related of	-				3b	
4 Describe in Part XIV the intende					<del></del>	
Partivil Land, Buildings, and					<del></del>	
Description of investment	(a) Co	st or other basis investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value	
<b>1a</b> Land	· · · · · ·		266,875.	70.275	266,875.	
<b>b</b> Buildings			1,784,500.	78,375.	1,706,125.	
c Leasehold improvements	· · · · · · · <u>·                      </u>				<u> </u>	
<b>d</b> Equipment	···· ··· <del> </del>		202 200	11 ( 421	106.000	
e Other		000 Dart V aa	303,260.	116,431.	186,829.	
Total. Add lines 1a through 1e (Colum	iii (a) must equal Fo	nni 990, Part Λ, CO	iui iii (b), iine iu(c) )	<u> </u>	2,159,829.	

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(9) (10)Total. (Column (b) must equal Form 990, Part X, column(B), line 15) 635,000.

Part X Other Liabilities. (See Form 990, Part X, line 25)

(a) Description of liability	(b) Amount	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	<b>&gt;</b>	

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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Sche	edule D (Form 990) 2010 ARKANSAS REALTORS ASSOCIATION	23-7000743	Page 4
	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII,column (A), line 12)		,406,041.
2	Total expenses (Form 990, Part IX, column (A), line 25)		,191,270.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		214,771.
4	Net unrealized gains (losses) on investments		· · · · · · · · · · · · · · · · · · ·
5	Donated services and use of facilities		
Ĝ	Investinent expenses		
7	Prior period adjustments		
,	Other (Describe in Part XIV) . SEE . PART XIV		-2,938.
9	Total adjustments (net). Add lines 4 through 8	`.` <del>                             </del>	-2,938.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	·	211,833.
_	t XII. Reconciliation of Revenue per Audited Financial Statements With Revenue per		
_	Total revenue, gains, and other support per audited financial statements		,573,965.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12	i ca	170107500.
	I • I		
		24	
			167,924.
•	e Add lines 2a through 2d	<u> </u>	
3	Subtract line 2e from line 1	3	1,406,041.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
	Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV.)		
	Add lines 4a and 4b	<del></del>	1 406 041
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		1,406,041.
	TXIII Reconciliation of Expenses per Audited Financial Statements With Expenses		1,362,132.
			1,302,132.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	a Donated services and use of facilities		
	Prior year adjustments		
	Cother losses	962	
	d Other (Describe in Part XIV.) SEE PART XIV		170,862.
	e Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,191,270.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	a Investments expenses not included on Form 990, Part VIII, line 7b 4a  b Other (Describe in Part XIV.)		
	b Other (Describe in Part XIV.)	4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		1,191,270.
	TXIV Supplemental Information	<u>l</u>	
Part	pplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, F V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also co additional information	Part IV, lines 1b and implete this part to	I 2b; provide

ochedule D (Form 990) 2010 ARKANSAS REALTORS ASSOCIATION	23-7000743	Page 5
RatixIV Supplemental Information (continued)		
		<b>-</b>

## SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 2010

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number 122-7000742

ARRANSAS REALTORS ASSOCIATION [23-7000743
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION
THE ASSOCIATION SPONSORS EDUCATION COURSES FOR THE BENEFIT OF ITS MEMBERSHIP IN
ORDER THAT CONTINUING PROFESSIONAL EDUCATION REQUIREMENTS CAN BE MET AND SO THAT
ADVANCED DESIGNATIONS CAN BE ACHIEVED. NINE EDUCATION COURSES WERE HELD IN 2010.
FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS
ON SEPTEMBER 30, 2009, THE MEMBERSHIP APPROVED THE FOLLOWING CHANGES TO THE BY-LAWS
TO BECOME EFFECTIVE JANUARY 1, 2010.
ARTICLE II, SECTION 4 OF THE BY-LAWS WAS AMENDED TO REFLECT REVISED PROCEDURES TO
IMPLEMENT A SEARCH PLAN AND TO CARRY OUT THE TRANSITION FOR A NEW CHIEF EXECUTIVE
OFFICER.
ARTICLE V, SECTION 5 OF THE BY-LAWS WAS AMENDED TO REFLECT REVISED PROCEDURES TO
FILL VACANCIES IN THE BOARD OF DIRECTORS.
ARTICLE V, SECTION 7 OF THE BY-LAWS WAS AMENDED TO ALLOW FOR AUDIO OR VISUAL
CONFERENCE FOR SPECIAL CALLED MEETINGS OF THE BOARD OF DIRECTORS.
ARTICLE VI WAS AMENDED TO ALLOW FOR PARTICIPATION BY AUDIO OR VISUAL CONFERENCE IN
LIEU OF PHYSICAL ATTENDANCE AT MEETINGS OF THE EXECUTIVE COMMITTEE.
OTHER CHANGES NOT CONSIDERED TO BE SIGNIFICANT WERE ALSO MADE TO THE BY-LAWS.
FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER
CLASSES OF MEMBERSHIP ARE: MEMBER BOARDS, BOARD MEMBERS, REALTOR MEMBERS, AFFILIATE
MEMBERS, INSTITUTE AFFILIATE MEMBERS, AND LIFE MEMBERS.
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY
THE NOMINATING COMMITTEE OF THE BOARD OF DIRECTORS ANNUALLY DETERMINES ITS
RECOMMENDATION OF OFFICERS AND DIRECTORS TO GOVERN THE ASSOCIATION. THE REPORT OF
THE NOMINATING COMMITTEE IS SUBMITTED TO THE MEMBERSHIP FOR APPROVAL. THE ELECTION
OF OFFICERS AND DIRECTORS IS HELD AT THE ANNUAL MEMBERSHIP MEETING. ALL MEMBERS OF

Name of the organization ARKANSAS REALTORS ASSOCIATION	Employer identification number 23-7000743
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVE	RNING BODY (CONTINUED)
OF OFFICERS AND DIRECTORS IS HELD AT THE ANNUAL MEMBERSHIP MEET	ING. ALL MEMBERS OF
THE ASSOCIATION WHO ATTEND THE ANNUAL MEETING ENJOY VOTING RIGH	ITS.
FORM 990, PART VI, LINE 7B - DECISIONS OF GOVERNING BODY APPROVAL BY	MEMBERS OR SHAREHOLDERS
OTHER THAN AMENDMENTS MANDATED BY POLICY OF THE NATIONAL ASSOCI	ATION OF REALTORS,
AMENDMENT TO THE CONSTITUTION AND BY-LAWS REQUIRES A TWO-THIRDS	VOTE OF THE
MEMBERSHIP PRESENT AT ANY MEETING OF THE MEMBERSHIP, PROVIDED I	HAT WRITTEN NOTICE OF
THE PROPOSED AMENDMENT HAS BEEN SENT TO EACH MEMBER AT LEAST TH	HIRTY DAYS PRIOR TO
SUCH MEETING.	
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
A DRAFT COPY OF THE ANNUAL FORM 990 IS REVIEWED BY THE CHIEF EX	ECUTIVE OFFICER AND
CHIEF FINANCIAL OFFICER PRIOR TO FILING WITH THE INTERNAL REVEN	UE SERVICE. A COPY
OF THE ANNUAL FORM 990 AS FILED IS MADE AVAILABLE TO THE MEMBER	RS OF THE EXECUTIVE
COMMITTEE.	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEM	ENT OF CONFLICTS
A CONFLICT OF INTEREST STATEMENT IS SIGNED ANNUALLY BY EACH MEN	MBER OF THE BOARD OF
DIRECTORS AND BY EACH EMPLOYEE OF THE ASSOCIATION.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	/AILABLE
THE ASSOCIATION'S FINANCIAL STATEMENTS, ANNUAL FORM 990, AND O	THER DOCUMENTS MEETING
THE CRITERIA FOR DISCLOSURE ARE MADE AVAILABLE TO THE PUBLIC OF	R OTHER INTERESTED
PARTIES UPON REQUEST.	
FORM 990, PART XII, LINE 1 - OTHER ACCOUNTING METHOD	
MODIFIED CASH	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

ARKANSAS REALTORS ASSOCIATION

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 Attach to Form 990.

OMB No 1545-0047

Open to Public

Employer identification number

23-7000743

(g) Sec 512(b)(13) controlled entity? (f) Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because of had one or more related tax-exempt organizations during the tax year.) (f) Direct controlling entity (e) End-of-year assets Public charity status (if section 501(c)(3)) Part্ডিয়া Identification of Disregarded Entities (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.) 9 (d) Total income (d) Exempt Code section (c)
Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) (b) Primary activity Primary activity (a) Name, address, and EIN of disregarded entity (a)
Name, address, and EIN of related organization i Part II ଫ୍ର € (5) 8 ଞ୍ଚ

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Schedule R (Form 990) 2010

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Yes

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ASSOCIATION

501 (C) (3)

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CHARITABLE

HEARTS & HOMES OF ARKANSAS, INC. 11224 EXECUTIVE CENTER DRIVE

(2) LITTLE ROCK, AR 72211, AR 72211 26-0784079

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ARKANSAS REALTORS Page 2

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	<b>(k)</b> Percentage	ownership												
	(i) General or	aging ner?		ν										
	Gene	man	.	Yes						 	_			
	(i) Code V-UBI	amount in box 20 of Schedule	K-1	(Form 1065)										
ŀ	por-	te ons?	1	٩ ٧										1
	(h) Dispropor-	tiona allocatio	ŀ	Yes	_		_				_		 	1
	(g) Share of													
liealeu as a pailtieisinp uning the tax year.	(f) Share of total	псоте												
eu as a partire	(e) Predominant	income (related, unrelated, excluded	from tax under	sections 512-514)										
ariizationis treat	(c) (d) Legal Direct	controlling entity												
ated org	(c)	domicile (state or	foreign	country)										
one or more re-	(b) Primary activity									 				
Decause it had one or more related organizations		related organization			6	1			6			(3)		

<b>Partive</b> Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answer.)	Faxable as a Coled organizations	<b>a Corporation or Trust</b> (Complete if the organization answered 'Yes' to Form 990, Part IV, itions treated as a corporation or trust during the tax year.)	olete if the organization	zation answered 'Ye tax year.)	es' to Form 990, Pa	rt IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) (d) (d) Type of entity (Share of total income (Share of end-of-year (state or foreign controlling entity (C corp, S corp, country)	(e) Type of entity (C corp, S corp, or trust)	Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(η)						
	<del></del>					•
(2)						•
	<del></del>					
	·					
(3)				_		
	- <del></del> -					
		000000000000000000000000000000000000000	-		Schedule <b>R</b> (Form 990) 2010	990) 2010
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Page 3

23-7030743

Schedule R (Form 990) 2010 ARKANSAS REALTORS ASSOCIATION

23-70 30743

Part V Transactions With Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, 35a, cr 36.)

Mate Complete line 1 if any pathy is listed in Darte II III or IV of this cohodula				Yes
Note: Complete fine 1 if any entity is instead in a fig. 11, 11, 12, 13, 13, 25, 25, 25, 25, 25, 25, 27, 27, 27, 27, 27, 27, 27, 27, 27, 27	tions listed in Parts II	-1/\?		3.14
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity.	: :			×
			1 P	×
c Giff grant or capital contribution from other organization(s).			1c	×
d I pans or loan quarantees to or for other organization(s)	:		PL	×
• Loans or loan quarantees by other organization(s)	:	•	1e	×
f Sale of assets to other organization(s).	:		1f	×
(8)			1g	×
יייייייייייייייייייייייייייייייייייייי			14	×
n Exchange of assets.			;	: >
i Lease of facilities, equipment, or other assets to other organization(s)	· :			
i Lance of facilities command or other secate from other organization(s)	•		-	×
Lease of idefinites, equipment, of other assets from other organizations ()	•	. :	<u></u>	×
K PERIORMATICE OF SERVICES OF THEIRDERSHIP OF fundrations collected to other organization(s)	•		=	×
2	•	•	E	×
Snaring of facilities, equipment, main			5	×
n Sharing of paid employees	•	· · :	記事機の	
positional as the state of the			10	×
• Reimbursement paid to other organization for expenses	•		-	×
<b>p</b> Keimbursement paid by otner organization for expenses				
a Other transfer of cash or property to other organization(s)			19	×
r Other transfer of cash or property from other organization(s)			11	×
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	g covered relationshi	ps and transaction thre	sholds.	
	(b) Transaction	(c) Amount involved	(d) Method of determining	stermining
	type (a-r)		amount ii	nanioai
(2)				
(3)	1			
(4)				
(5)				
(9)				
<b>BAA</b> TEEA5003L 12/23/10		Sche	Schedule R (Form 990) 2010	990) 2010

Schedule R (Form 990) 2010 ARKANSAS REALTORS ASSOCIATION

Parity) Unrelated Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by lotal assets or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships

	ξ		(p)			€	(6)	=	2
Name, address, and EIN of entity	Primary activity	Legal domicile	Are all part section	iners Share of end-of-year	f-year Disp	Dispropor-	Code V-ÙBl amount in box 20 of	General or	rat or
			501(c)(3) organizations?	s) ons?	alloc	ations?	Schedule K-1 Form (1065)	partr	Jer,
			Yes	No	Yes	Ŷ	,	Yes	Ŷ
τω									
					_				
22									
				<u>.</u>					
				_					
1			_		•			•	
(5)									
(6)									_
Ω									
	-								
(8)				·	_				
	•								
								S of the state of	Schedule <b>R</b> (Form 990) 2010

Schedule R	(Form 990) 2010	Page 5
PartiVII	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	
		. <b></b>
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2010 SCHEDULE O - SUPPLEMENTAL INFORMATION PAGE 1 **ARKANSAS REALTORS ASSOCIATION** 23-7000743 FORM 990, PART XI, LINE 5 OTHER CHANGES IN NET ASSETS OR FUND BALANCES TOTAL \$

SCHEDULE D, PART XIV - SUPPLE	MENTAL	NFORMATION	ONPAGE (
ARKANSAS REALTORS ASSO	CIATION		23-700074
SCHEDULE D, PART XI, LINE 8 OTHER CHANGES IN NET ASSETS OR FUND BALANCES			
ACCRUAL TO CASH CONVERSION	·	TOTAL \$	-2,938. -2,938.
SCHEDULE D, PART XII, LINE 2D OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FO	PRM 990		
ACCRUAL TO CASH CONVERSION			1,886. 166,038. 167,924.
SCHEDULE D, PART XIII, LINE 2D OTHER EXPENSES AND LOSSES PER AUDITED F/S			
ACCRUAL TO CASH CONVERSION		\$ TOTAL \$	4,824. 166,038. 170,862.

#### Form 990

### **Continuation Sheet for Form 990**

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

23-7000743

ARKANSAS REALTORS ASSOCIATION Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Employees									· <del> </del>		
(A)		}		((	-			(D)	(E)	(F) Estimated	
Name and Title	Average hours				all	that appl	_	Reportable compensation from	Reportable compensation from	amount of other	
	per week	or di	ηsur	Officer	Key	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the	
		Individual trustee or director	mto	ė	Key employee	est c	ner	( 2 / 00 2 0 /	(2	organization and related	
	}	5	nal t		oloye	duno				organizations	
		stee	Institutional trustee		e	ensa					
			ř			ted					
CHRIS POLYCHRON								,			
DIRECTOR	2	X						0.	0.	0.	
JEFF PRATT	4							_	_		
DIRECTOR	2	X				ļ		0.	0.	0.	
DEBBIE RAWLS	-							_		•	
DIRECTOR	2	X			_			0.	0.	0,	
JAMES RHODES	4	١.,						_		0	
DIRECTOR TOPE MATERIAL	2	X	H	<u> </u>			<u> </u>	0.	0.	0.	
TODD MATLOCK	-	,		ļ		ļ.,		0.	0.	0.	
DIRECTOR MAURICE TAYLOR	2	X						0.	U.		
DIRECTOR	- 2	X						0.	٥.	0.	
ROBERT WALKER		<del>  ^</del>	1	-	├─			<u> </u>			
PAST PRESIDENT	2	X	l	Х		ł	1	0.	0.	0.	
DAVID ALPHIN		<del>  ^</del>	-	<del>  ^</del> `	-			<u> </u>	- 0.	<u> </u>	
DIRECTOR	1 2	x					}	0.	0.	0.	
DOYLE YATES	<del>                                     </del>	<del></del> -		_	<del>                                     </del>	1	$\vdash$		·	<u></u>	
DIRECTOR	<b>1</b> 2	x	1			ì		) o.	0.	0.	
GREGORY MORRIS		<del>                                     </del>									
DIRECTOR	2	Х						0.	0.	0.	
GWENDALYN CUNNINGHAM											
DIRECTOR	2	X	L			<u> </u>		0.	0.	0.	
RICHARD WHITE	_			Ì		Į			İ		
DIRECTOR	2	X	<u> </u>		L	<u> </u>		0.	0.	0.	
RONALD_STINCHCOMB	<b>↓</b>				)		}			•	
DIRECTOR	2	X	<del> </del>		⊢	<b> </b>		0.	0.	0.	
WILLIAM MCCORD	٦,				1	ļ		0.	o.	0	
DIRECTOR KENNETH DOVER	2	X	╁	├	┢	┼	<del>                                     </del>	J	U.	0.	
DIRECTOR	2	X	1	l	ł	1	l	0.	0.	0.	
LINDA HEARN	<del></del>	┼^	$\vdash$	├	┢	<del> </del>		<del>.</del>	<u></u>	<u></u>	
DIRECTOR	2	X	1	ļ	ŀ		Į	0.	0.	0.	
ANGELLA JOHNSON	<del> </del> -	<u>^</u>	╁┈╴	<del>                                     </del>	H	<del> </del>	一				
DIRECTOR	2	Х	1	ľ	1		ĺ	0.	0.	0.	
BRENDA KIRKLEY	<del> </del> -	†	╁	<u> </u>	T	1					
DIRECTOR	7 2	X	ļ					0.	0.	0.	
SANDRA KELLEY											
DIRECTOR	7 2	X		١		ĺ	ĺ	0.	0.	0.	
DOUGLAS SMITH			Γ								
DIRECTOR	2_	Х	<u> </u>	L				0.	0.	0.	
ANDREW M. SCHAUS			Ī								
FORMER CEO	50			X				61,851.	0.	6,407.	

Form 990 2010

#### Form 990

#### **Continuation Sheet for Form 990**

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

23-7000743

ARKANSAS REALTORS ASSOCIATION Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated

<u>Employees</u>						_				
(A)	(B)				2)			( <b>D</b> )	(E)	(F)
Name and Title	Average hours per week		tion (			hat appl		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
	per week	Individual trustee or director	Inst	Officer	Κey	Highest compensated employee	Former	the organization	related organizations	compensation from the
		vidu	institutional trustee	cer	Key employee	nest	mer	(W-21099-MISC)	(VV-2/1099-IVIISC)	organization
		tor	onal		ploy	com				organizations
		uste	trus		ee :	pen				
		] "	tee		١.,	sate				
KIM ASHCRAFT		$\vdash$				<b>├</b>				
KIM ASHCRAFT C F O	50			X				70,989.	0.	8,868.
MIKI BASS				^				10, 303.		0,000.
INTERIM CEO	50			Х	ļ			59,000.	0.	8,460.
INTERIM CEO				_	├─			39,000.	0.1	0,400.
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# Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No 1545-1709

internal Revenue			cation for each return.	<u></u>							
	e filing for an Automatic 3-Month Extension, con				► X						
	e filing for an <b>Additional (Not Automatic) 3-Mont</b> l <i>plete Part II unless</i> you have already been grante										
-											
corporation r request an ex Associated V	ing (e-file). You can electronically file Form 8868 equired to file Form 990-T), or an additional (not xtension of time to file any of the forms listed in Vith Certain Personal Benefit Contracts, which ming of this form, visit www.irs.gov/efile and click of	automatic) Part I or Pa ust be sent	3-month extension of time You can ele irt II with the exception of Form 8870, In to the IRS in paper format (see instruct	ectronically file Form Iformation Return fo	i 8868 to r Trañsfers						
Partil A	utomatic 3-Month Extension of Time. C	nlv subm	it original (no copies needed).	=1							
	required to file Form 990-T and requesting an a			complete Part I only	- ▶						
All other corp	porations (including 1120-C filers), partnerships, eturns.	REMICS, ar	nd trusts must use Form 7004 to reques								
<b>T</b>	Name of exempt organization			Employer identification	number						
Type or print			Wr								
•	ARKANSAS REALTORS ASSOCIATION	-11		23-7000743							
File by the due date for filing your	Number, street, and room or suite number. If a P.O. box, see in	structions	118 19 5 p.								
return See	Ining your sturn See I 11224 EXECUTIVE CENTER DRIVE Instructions City, town or post office, state, and ZIP code For a foreign address, see instructions										
LITTLE ROCK, AR 72211											
Enter the Return code for the return that this application is for (file a separate application) cach return (01)											
Application Is For	Application Is For Return Code Return Code Return Code										
Form 990		01	Form 990-T (corporation)		07						
Form 990-BL		02	Form 1041-A		08						
Form 990-EZ		03	Form 4720		09						
Form 990-PF		04	Form 5227		10						
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069		11						
Form 990-T	(trust other than above)	06	Form 8870		12						
Telephone If the org If this is check this the exter  I reque until The ex  X  If the to	s are in the care of ► MARK MARCHAND  e No. ► 501-225-2020  ganization does not have an office or place of bus for a Group Return, enter the organization's four is box ► If it is for part of the group, chech is an automatic 3-month (6 months for a corpora 8/15, 20 11 , to file the exempt organization is for the organization's return for:    calendar year 20 10   or   tax year beginning 20   ax year entered in line 1 is for less than 12 montaining in accounting period	digit Group k this box ation require ganization re	e United States, check this box.  Exemption Number (GEN) . If  I and attach a list with the names and attach a list with the names and to file Form 990-T) extension of time eturn for the organization named above.	and EINs of all mem							
3a If this a	application is for Form 990-BL, 990-PF, 990-T, 47		enter the tentative tax, less any	3a\$	0.						
<b>b</b> If this a payme	application is for Form 990-PF, 990-T, 4720, or 6 nts made Include any prior year overpayment al	069, enter a lowed as a	any refundable credits and estimated tax credit	3b \$	0.						
c Balanc EFTPS	te due. Subtract line 3b from line 3a. Include you (Electronic Federal Tax Payment System). See	r payment v	with this form, if required, by using	3c \$	0.						
Caution. If y payment ins	ou are going to make an electronic fund withdraw tructions.	wal with this	s Form 8868, see Form 8453-EO and Fo	rm 8879-EO for							

BAA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)