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Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047

Open to Public Inspection

Form **990** (2010)

	\ FO	r the 2	D10 calendar year, or tax year beginning	and	ending	_	
В	Che	eck if blicable	C Name of organization HAMPTON ROADS ASSOCIATION FOR	COMMERC	Τ Δ Τ.	D Employer identifi	cation number
١	—	Address change	REAL ESTATE	COMMERC.	TVD		
Ì		Name change	Doing Business As			54-1	648222
į		Initial return	Number and street (or P.O. box if mail is not delivered to street	address)	Room/suite	E Telephone numbe	
Ī		Termin- ated	4665 SOUTH BOULEVARD		В)481-2494
[Amended return	City or town, state or country, and ZIP + 4	•		G Gross receipts \$	334,066.
		Applica- tion	VIRGINIA BEACH, VA 23452			H(a) Is this a group re	eturn
		pending	F Name and address of principal officer:			for affiliates?	Yes X No
_						H(b) Are all affiliates inc	cluded? Yes No
1			pt status: 501(c)(3) _X 501(c)(6) ◀ (insert no.)	4947(a)(1) o	or 527	If "No," attach a	list. (see instructions)
			▶ N/A			H(c) Group exemptio	
			ganization: X Corporation Trust Association	Other ►	L Year	of formation: 1993 N	State of legal domicile; VA
L	Par		ummary		DIIO 3 ME	AND THEODIC	- MILIN
	8	1 Bri	efly describe the organization's mission or most significant ac DMMERCIAL REAL ESTATE INDUSTRY		DUCATE		IES OF
T. D	Governance	_	<u> </u>				
, ,	Į ve		eck this box I if the organization discontinued its op		sed of more	1	ssets 39
`, (် ဗ		mber of voting members of the governing body (Part VI, line 1			3	39
~; •	⊲ಶ		mber of independent voting members of the governing body	•		4	0
_ :	Activities		tal number of individuals employed in calendar year 2010 (Par	rt v, line 2a)		5	0
~ :	<u> </u>		tal number of volunteers (estimate if necessary)	10		6	0.
<i>:</i> .	₹		tal unrelated business revenue from Part VIII, column (C), line t unrelated business taxable income from Form 990-T, line 34			7 <u>a</u> 7b	0.
` <u> </u>	+	D IVE	t differenced business taxable income from Form 990-1, lifte 34				
		8 Co	ntributions and grants (Part VIII, line 1h)		-	Prior Year 127,351.	Current Year 126,649.
·	evenue		ogram service revenue (Part VIII, line 2g)		<u></u>	224,548.	157,064.
	<u>§</u>		restment income (Part VIII, column (A), lines 3, 4, and 7d)			0.	0.
ا. ج	<u>~</u>		her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and	1110)	-	73,965.	25,552.
(,)	۱		tal revenue - add lines 8 through 11 (must equal Part VIII, colu	•	-	425,864.	309,265.
-	-		ants and similar amounts paid (Part IX, column (A), lines 1/3)	(v.y,e 12)		0.	10,000.
			nefits paid to or for members (Part IX, column (A), line 4)			0.	0.
			laries, other compensation employee Benefits Part IX, colum	n (A), lines 5-10)		2,180.	2,397.
	w I	16a Pro	ofessional fundraising fees (Part IX, column (A), line 11e)	(* 4),		0.	0.
	<u>ē</u>		tal fundraising expenses (Part IX, column (D), line 25)		0.		-
1	<u> </u>	17 Otl	her expenses (Part IX, column-(A), lines-11a-11d, 11f-24f)			439,084.	394,280.
			tal expenses. Add lines 13-17 (must equal Part IX, column (A),	, line 25)		441,264.	406,677.
			venue less expenses. Subtract line 18 from line 12	,		<15,400.	
2	d Balances				Be	ginning of Current Year	End of Year
cete	aga	20 To	tal assets (Part X, line 16)			189,230.	144,031.
A	9	21 To	tal liabilities (Part X, line 26)			1,819.	54,032.
Š	Fund		t assets or fund balances Subtract line 21 from line 20			187,411.	89,999.
	Par	t II S	Signature Block	-			
			s of perjury, I declare that I have examined this return, including accor				y knowledge and belief, it is
tr	ue, c	orrect, a	nd complete. Declaration of preparer other than officer) is based on a	all information of wh	nch preparer	has any knowledge. 📌	
						3 25 11	
S	ign		Signature of officer			Date	
Н	lere		LAWRENCE J. COLORITO TR		<u>.</u>		
_			Type of print name and title			N -1	
_		i i	'int/Type preparer's name Preparer's sign	eture 0		Date Check Check	PTIN
	aid		JOEL T. FLAX	<u> </u>	<u> </u>	R 19 201 self-employe	ed
	repa		rm's name GOODMAN & COMPANY, L.L.		•	Firm's EIN	
U	lse O	nly Fi	rm's address 440 MONTICELLO AVE, SUI	TE 1400		_	FF 604 5400
_			NORFOLK, VA 23510			Phone no. 7	57.624.5100
M	/lav t	he IRS	discuss this return with the preparer shown above? (see instr	ructions)			X Yes No

		1648222	Page 2
Pai	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission:		
	TO EDUCATE AND INFORM THE COMMERCIAL REAL ESTATE INDUSTRY A	ND OTHER	
	INTERESTED PARTIES OF IMPORTANT TIMELY REAL ESTATE ISSUES.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior 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 services?	L 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 expenses	3	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants	and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ including grants of \$) (Revenue		
	REGULAR LUNCHEON MEETINGS HAVE BEEN HELD TO KEEP MEMBERS CU	JRRENT ON	
	COMMERCIAL REAL ESTATE ISSUES		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	· \$	
	MIX N MINGLE, OYSTER ROAST AND OTHER ACTIVITIES HAVE BEEN H		
	PROVIDE NETWORKING OPPORTUNITIES FOR THE MEMBERS		
		-	
	 		
4c	(Code) (Expenses \$ Including grants of \$ (Revenue AWARDS PROGRAMS WERE CONDUCTED TO RECOGNIZE OUTSTANDING ACK		OR
		11EAEMEN1	UK
	CONTRIBUTION TO THE COMMERCIAL REAL ESTATE INDUSTRY		
			
			
			_
4d	Other program services. (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶		
		Fa 0	90 (2010

Form 990 (2010) REAL ESTATE

Part IV Checklist of Required Schedules

1 is the organization decembed in section 501(c)(c) or 4947(a)(1) (other than a private foundation)? 1 "Yes," complete Schedule C, Part I 2 is the organization engage in direct or indirect polineal campaign activities, or have a section 501(f)) election in effect public office? If "Yes," complete Schedule C, Part II 3 section 501(c)(c) organizations. Did the organization engage in kobbying activities, or have a section 501(f)) election in effect during the tax year? If "Yes, "complete Schedule C, Part II 5 is the organization as action 601(c)(d), 501(c)(s), or 501(c)(s) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 9819 If "Yes," complete Schedule C, Part III 6 Did the organization and an an advised funds or any smilar funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization amounts in a set funds or accounts? If "Yes," complete Schedule D, Part II 8 Did the organization mantain any donor advised funds or any smilar funds or accounts? If "Yes," complete Schedule D, Part II 9 Did the organization mantain collections of works of art, historical treasures, or other smilar assets? If "Yes," complete Schedule D, Part II 10 Did the organization, directly or through a related organization, location, or organization, directly or through a related organization, location, organization, organizati				Yes	No
2 is the organization required to complete Schedule 8, Schedule of Contributions? Dot the organization engage in direct or index of particular campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part II Settlem 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II 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 Procedule State II (*) or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedule 98.191 If 'Yes, complete Schedule C, Part III bit the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structurer? If 'Yes,' complete Schedule D, Part II' Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part III' Did the organization directly or through a related organization, offectly in Expert of the second counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV' Did the organization services or through a related organization, offectly and part III' II's 'Yes,' complete Schedule D, Part IV' If 'Yes,' complete Schedule D, Part IV' Did the organization report an amount for linvestments: orbit a securities in Part X, line 10? If 'Yes,' complete Schedule D, Part IV' 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 X, III' Did the organization shallow in the part X, line 15 that is 5% or mor	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3		If "Yes," complete Schedule A	1		Х
public office? #*Yes,** complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f)) election in effect during the tax year? #*Yes,** complete Schedule C, Part II is the organization is 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 81-91 if "Yes,** complete Schedule C, Part II bit the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? #*Yes,** complete Schedule D, Part II bit the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advised in the organization receive or hold a conservation easiement, including easiements to preserve open space, the environment, historic land areas, or historic structures? #*Yes,** complete Schedule D, Part IV bid the organization maintain collections of works of art, historical treasures, or other similar assests? #*Yes,** complete Schedule D, Part IV bid the organization directly of through a related organization, hold assests in term, permanent, or quasi-endowments? #*Yes,** complete Schedule D, Part IV if the organization saver to any of the following questions is "Yes,** then complete Schedule D, Part IV, III, IVI, IVI, IVI, IVI, IVI, IVI,	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
4 Section 501(c)(3) organizations. Dut the organization engage in lobbying activities, or have a section 501(c)(4) election in effect during the tax year? If "Yes," complete Schedule C, Part II 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 flevenue Procedure 98-197 If "Yes," complete Schedule C, Part II is Did the organization intervenue Procedure 98-197 If "Yes," complete Schedule C, Part II is Did the organization reserver or hold a conservation easement, including easements to preserve open a pace, the environment, histonic land areas, or historic structures? If "Yes," complete Schedule D, Part II is Did the organization reserver hold a conservation easement, including easements to preserve open apace, the environment, histonic land areas, or historic structures? If "Yes," complete Schedule D, Part II is Did the organization amount on works of art, histonical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV is Did the organization, derectly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV is the organization report an amount for land, buildings, and equipment in Part X, line 10º If "Yes," complete Schedule D, Part IV is Did the organization report an amount for land, buildings, and equipment in Part X, line 10º If "Yes," complete Schedule D, Part X, Is Did the organization report an amount for land, buildings, and equipment in Part X, line 10º If "Yes," complete Schedule D, Part X, Is Did the organization report an amount for land, buildings, and equipment in Part X, line 10º If "Yes," complete Schedule D, Part X, Is Did the organization report an amount for land seasests in Part X, line 10º If "Yes," complete Schedule D, Part X, Is Did the organization report an amount for land seasests in Part X, line 10º If "Yes," complete Schedule D, Part X, Is Did the organization organization amount for land s	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), o		public office? If "Yes," complete Schedule C, Part I	3		Х
5 Is the organization a section \$01(c)(4), 501(c)(6), or \$01(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 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 where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts in the comparation received or hold a conservation easement, including easements to preserve open space, the environment, historical draesa, or historic structures? If "Yes," complete Schedule D, Part III 7 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 negotietion services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," In "Yes," or provide credit counseling, debt management, credit repair, or debt negotietion services? If "Yes," complete Schedule D, Part IV 10 Did the organization answert to any of the following questions is "Yes," then complete Schedule D, Part V 11 If the organization report an amount for line such that the provide assets reported in Part X, line 167 If "Yes," complete Schedule D, Part V II 12 Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X 12 Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X 12 Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Par	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
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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 I Did the organization research or hold a conservation easement, including easements to preserve open space, the environment, histonic land areas, or historic structures? If "Yes," complete Schedule D, Part II I 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 I Did the organization, directly or through a related organization, hold assets in term, permanent, or quasiendowments? If "Yes," to emplete Schedule D, Part IV I I I the organization in eport an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V I Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI I 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 VI I Did the organization report an amount for investments organization assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI I Did the organization report an amount for other liabilities 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 X I Did the organization report an amount for other liabilities in Part X, line 15 that is 5 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X I Did the organization report an amount for other liabilities in Part X, line 15 that is 5 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedul	5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	ĺ	İ	
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7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, ishstonic land areas, or historic structures? If "Yes," complete Schedule D, Part III 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IVI 9 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IVI 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IVI 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part IVI 12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IVI 13 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part IVI 14 Did the organization report an amount for investments - program related in Part X, line 15? If "Yes," complete Schedule D, Part IVI 15 Did the organization report an amount for other lassified by Part IVI 16 Did the organization report an amount for other lassified in Part X, line 15? If "Yes," complete Schedule D, Part X 17 Did the organization is separate or consolidated financial statements for the tax year relude a footnote that addresses the organization is behalved for uncertain tax positions under IVes, "omplete Schedule D, Part X 18 Did the organization notham separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 19 Did the organization notham separate or consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 19 Did the organization nemantain an office, employees, or agents outside of the United States? 10 Did the organization report o	6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
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8 Did the organization maintain collections of works of art, instoncal treasures, or other similar assets? // "Yes," complete Schedule D, Part // 9 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 negotation services? // "Yes," complete Schedule D, Part // 9 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-indowments? // "Yes," complete Schedule D, Part V // 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V // 12 If the organization report an amount for land, buildings, and equipment in Part X, line 10? // "Yes," complete Schedule D, Part V // 12 If the organization report an amount for investments - other securities in Part X, line 10? // "Yes," complete Schedule D, Part V // 12 If the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part V // 12 If the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part V // 12 If the organization report an amount for other lashidies in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part X // 11 If X 11 If X 12 Did the organization report an amount for other lashidies in Part X, line 25? // "Yes," complete Schedule D, Part X // 11 If X 12 Did the organization obtain separate, independent audited financial statements for the tax year? // "Yes," complete Schedule D, Part X // 11 If X 13 If X 14 Did the organization maintain an office, employees, or agents outside of the United States? // "Yes," complete Schedule D, Parts X // 11 If X 15 Did the organization maintain an office, employees, o	7				
Schedule D, Part III 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 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 11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Part VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes, 'complete Schedule D, Part VI 12 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 13 Did the organization report an amount for other assets 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 VII 14 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 X III 15 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 X III 16 X 11			7		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 10 Did the organization, developed provided and programs a	8				,,
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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, 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," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	47		16	<u> </u>	<u> </u>
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20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) 20a X 20a OR			10		l x
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20a	··		\vdash	
operate one or more hospitals must attach audited financial statements (see instructions)		·			 -
	_		20b		
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Part IV | Checklist 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	X	
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 2? If "Yes," complete Schedule I, Parts I and III	22		X
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			х
240	Schedule J . Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
24 a	last day of the year, 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		
	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		
25a	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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			Х
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
21	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		Х
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
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 (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
31	contributions? If "Yes," complete Schedule M	30		X
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	31		
-	Schedule N, Part II	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		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
00	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	ٿ		
	Note. All Form 990 filers are required to complete Schedule O	38	х	
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Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	L	
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 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			Ī
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
	See instructions for 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?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		L
6a	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?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		L
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		
	to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	7-		
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
f	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	/11		
Ŭ	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	Ť		
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	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			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from 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)			
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			L_
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	l		
C	Enter the amount of reserves on hand	<u> </u>		<u> </u>
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	L	<u>X</u> _
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
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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

	Check if Schedule O contains a response to any question in this Part VI			\mathbf{X}			
Sec	tion A. Governing Body and Management	•					
	<u> </u>		Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	39					
		39					
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		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X			
6	Does the organization have members or stockholders?	6		X			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the						
	governing body?	7a		X			
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year						
	by the following:						
а	The governing body?	8a	X				
b	Each committee with authority to act on behalf of the governing body?	8b	X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			ا			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)						
			Yes	No			
	Does the organization have local chapters, branches, or affiliates?	10a	-	X			
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,						
44.	and branches to ensure their operations are consistent with those of the organization?	10b 11a	 	X			
	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?						
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
	La Does the organization have a written conflict of interest policy? If "No," go to line 13						
U	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?						
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12b	 	 			
Ū	in Schedule O how this is done	12c					
13	Does the organization have a written whistleblower policy?	13		X			
14	Does the organization have a written document retention and destruction policy?	14		Х			
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?						
а	The organization's CEO, Executive Director, or top management official	15a		X			
b	Other officers or key employees of the organization	15b		X			
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	i					
	taxable entity during the year?	16a		Х			
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation						
	ın joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's		1				
	exempt status with respect to such arrangements?	16b	ł				
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ► NONE						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available.	able for					
	public inspection. Indicate how you make these available. Check all that apply.						
	Own website						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest police	y, and fin	ancıal				
	statements available to the public.						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the orga EXECUTIVE ADMINISTRATOR - (757) 481-2494	nization	-				
	1818 SHERINGHAM WEST, VIRGINIA BEACH, VA 23454-3131						
	1010 DILLAMGHAM HEDI, VINGINIA BEACH, VA 23434-3131						

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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 employee."
- 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 organization (A)	(B)			(((D)	(E)	(F)
Name and Title	Average			Pos		1		Reportable	Reportable	Estimated
	hours per	(cl				арр	ly)	compensation	compensation	amount of
	week (describe hours for related organizations	Indiwdual trustee or director	Institutional trustee		loyee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related
	in Schedule O)	Individua	Institutio	Officer	Key employee	Highest c employee	Former			organizations
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Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) (B)					(C)				(D)	(E)	(F)			
	Name and title	Average	l		Pos				Reportable	Reportable		Estimated		
		hours per	(cl	neck	all	that	арр	ly)	compensation	compensatio			ount o	f
		week (describe	ē						from	from related		_	ther	
		hours for					2		the organization	organizations			ensati	on
		related	o aa	Ste S			nsate		(W-2/1099-MISC)	(W-2/1099-MIS	(J		m the nizatio	
		organizations	Fres	튵		e e	ed e		(***271033*****100)			_	relate	
		in Schedule	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former					izatioi	
		O)	밀	ısıı	₩	Key	윤통	FO						
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	Sub-total								0.		0.			<u>0.</u>
	Total from continuation sheets to Part V	II, Section A							0.		0.			0.
	Total (add lines 1b and 1c)						<u> </u>		ļ.,					<u>u.</u>
2	Total number of individuals (including but r	of limited to th	iose	liste	ed a	bove	e) wh	no re	eceived more than \$100	,000 in reportabl	е			0
	compensation from the organization		_		-							1,	/es	No.
3	Did the organization list any former officer,	director or tru	etaa	ko	v an	nolo	VAA	or h	nigheet companeated er	mplovee on			-	
3	line 1a? If "Yes," complete Schedule J for s		3100	,	y C II	ipio,	yee,	01 1	ngriest compensated er	iipioyee on		3		X
4	For any individual listed on line 1a, is the si		le co	nmn	ensa	ation	ano	d at	her compensation from	the organization				 -
•	and related organizations greater than \$15								•	are organization		4		X
5	Did any person listed on line 1a receive or	accrue compe	nsat	ion f	from	any	unr	elat	ed organization or ındıv	dual for services				
	rendered to the organization? If "Yes," com	plete Schedul	e J f	or s	uch	pers	son					5		X
Sect	ion B. Independent Contractors													
1	Complete this table for your five highest co the organization. NONE	mpensated inc	depe	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of com	pens	ation fro	om	
	(A)								(B)	Ι	•	(C)		
	Name and business	address							Description of s	ervices	С	ompen		
														
								_						
								\dashv						
								寸						
								_						
	Total number of independent contractors (including but a	ot li	mite	d to	the	ال می	ster	f ahove) who received a	ore than				
-	\$100,000 in compensation from the organi	_	iot ili		iO		0	J. C C	above, who leceived if	iore urair				
	,	r										Form 9	90 (20	010)

Page 9

					(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 si	1 a	Federated campaigns	1a	_				<u> </u>
E S	b	Membership dues	1b	126,649.				
am (s	С	Fundraising events	1c					
ar Jai	d	Related organizations	1d					
S.E	е	Government grants (contribution	ons) 1e					
e ti	f	All other contributions, gifts, grant						
흡制		similar amounts not included abov	/e 1f					
Contributions, gifts, grants and other similar amounts	_	Noncash contributions included in lines	1a-1f \$		106 640			
0 8	h	Total. Add lines 1a-1f		<u> </u>	126,649.			
	_	NETWORKING FUNC	ПТОМС	Business Code	59,265.	59,265.		
) je	2 a	TIBIOUDON DROOPS			43,812.	43,812.		
le je	b	DECTON DROODAN	<u> </u>		33,815.	33,815.		
E S	C	BUS TOUR			16,965.	16,965.		
Pa Re	a	AWARDS PROGRAMS			3,207.	3,207.		
Program Service Revenue	e	All other program service reve			3,2071	3,2071		
	g		ilde		157,064.			
\dashv	3	Investment income (including	dıvıdends, inte					
	•	other similar amounts)		>				
	4	Income from investment of tax	c-exempt bond	proceeds >				
	5	Royalties	•	•				
		•	(i) Real	(ii) Personal				
	6 a	Gross Rents						
ł	b	Less: rental expenses]		
	c	: Rental income or (loss)						
	d	Net rental income or (loss)		.				
	7 a	Gross amount from sales of	(i) Securities	(ıí) Other				
		assets other than inventory						
l	b	Less cost or other basis						
1		and sales expenses						
	C	` '		1		ł		-
	d	• , ,			-			
enne	8 a	Gross income from fundraising including \$	g events (not of					
Other Reven		contributions reported on line	1c). See	40 005				
ē		Part IV, line 18		42,925.				
8		Less direct expenses		24,801.	10 104		-	10 124
		Net income or (loss) from fund	-	•	18,124.			18,124.
	9 a	Gross income from gaming ac						1
		Part IV, line 19		a				
		Less: direct expenses		b				•
		 Net income or (loss) from gam Gross sales of inventory, less 	_		-			
- 1	10 a	and allowances		.				
		Less: cost of goods sold		a				
		Net income or (loss) from sale		"		1		
t		Miscellaneous Revenu		Business Code				
	11 a	MEGODE E AMBORIO	_	223,1033 0006	7,428.	7,428.		1
	t				, = = • •	,		
- 1								
		All other revenue					 -	1
		Total. Add lines 11a-11d			7,428.			
	12	Total revenue. See instructions.			309,265.	164,492.	0.	18,124.
03200 12-21)9 - 10	· · · · ·				•		Form 990 (2010)

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) (A) Do not include amounts reported on lines 6b, Program service expenses Management and general expenses Total expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to governments and 10,000. organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the US See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 2,397. 10 Payroll taxes Fees for services (non-employees): a Management 2,650. **b** Legal 5,534. c Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees f g 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 13,218. 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Other expenses. Itemize expenses not 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.) ADMINISTRATIVE SUPPORT 114,788. CATERING EXPENSE 66,191. PRINTING 41,731. 34,385 VECTRE DUES 13,984 AWARDS PROGRAMS SEE SCH O 101,799. All other expenses 406,677. Total functional expenses. Add lines 1 through 24f 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

032010 12-21-10

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	10,115.	1	12,577.
	2	Savings and temporary cash investments	142,179.	2	103,878.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	27,030.	4	17,420.
	5	Receivables from current and former officers, directors, trustees, key			**
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	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			
'n		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other			
		basis. Complete Part VI of Schedule D 10a			
	ь	Less: accumulated depreciation 10b		10c	
	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	9,906.	15	10,156.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	189,230.	16	144,031.
	17	Accounts payable and accrued expenses		17	16,746.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ies	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Ħ	22	Payables to current and former officers, directors, trustees, key employees,			
Liabilities		highest compensated employees, and disqualified persons Complete Part	11		
_		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	<u>. </u>
	24	Unsecured notes and loans payable to unrelated third parties	1 010	24	27 206
	25	Other liabilities. Complete Part X of Schedule D	1,819.	25	37,286.
	26	Total liabilities. Add lines 17 through 25	1,819.	26	54,032.
		Organizations that follow SFAS 117, check here and complete	te		
Ces		lines 27 through 29, and lines 33 and 34.			
<u>a</u>	27	Unrestricted net assets		27	
Ba	28	Temporarily restricted net assets		28	
בַ	29	Permanently restricted net assets Organizations that do not follow SFAS 117, check here		29	
Ē	١.	•			
Net Assets or Fund Balances	ِ ا مم ا	complete lines 30 through 34.	0.		^
set	30	Capital stock or trust principal, or current funds	0.	30	0.
t As	31	Paid-in or capital surplus, or land, building, or equipment fund	187,411.	31	89,999.
Š	32	Retained earnings, endowment, accumulated income, or other funds	187,411.	32	89,999.
	33	Total net assets or fund balances	189,230.	33	144,031.
	34	Total liabilities and net assets/fund balances	109,430.	34	T##,031.

Form **990** (2010)

	990 (2010) REAL ESTATE	54-164	3222	Paç	ge 12		
Pa	rt XI Reconciliation of Net Assets		-				
	Check if Schedule O contains a response to any question in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		9,2			
2	Total expenses (must equal Part IX, column (A), line 25)	2	40	6,6	77.		
3	3 Revenue less expenses. Subtract line 2 from line 1						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	18	7,4	11.		
5	Other changes in net assets or fund balances (explain in Schedule O)	5					
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	8	9,9	99.		
Pa	rt XIII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII						
	<u></u>			Yes	No		
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		1				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.	1 1		,		
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
b	Were the organization's financial statements audited by an independent accountant?		2b		X		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c				
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O.			Į		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis]		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit					
	Act and OMB Circular A-133?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			_		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b				
			Form	990 (2	2010)		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2010

Department of the Treasury
Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

See separate instructions.

Open to Public Inspection

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)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

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 that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

	Section 501(c)(4), (5), or (6) organiza					
Nar	ne of organization HAMPTON	ROADS ASSOCIAT	ION FOR COMM	ERCIAL	Emplo	oyer identification number
	REAL ES					54-1648222
P	art I-A Complete if the or	ganization is exempt un	der section 501(c)	or is a section	า 527 อเ	rganization.
2	Provide a description of the organic Political expenditures Volunteer hours	zation's direct and indirect polit	ical campaign activities	in Part IV.	▶ \$	
D.	art I-B Complete if the ore	achization is exampt un	der ceetien FO1/e	1/21		
_	Enter the amount of any excise tax	ganization is exempt un		<u>)(3).</u>	▶ \$	
	Enter the amount of any excise tax			5	▶ \$	
	If the organization incurred a section	• =	•			Yes No
	a Was a correction made?	,	, .			Yes No
t	b if "Yes," describe in Part IV.					— · · · — · · ·
Pa	art I-C Complete if the or	ganization is exempt un	der section 501(c)	, except section	n 501(d	c)(3).
1	Enter the amount directly expende	d by the filing organization for s	ection 527 exempt fund	ction activities	▶\$	
2	Enter the amount of the filing organ	nization's funds contributed to d	other organizations for s	section 527		
	exempt function activities				▶ \$	
3	Total exempt function expenditure:	s. Add lines 1 and 2 Enter here	and on Form 1120-POL	-,		
	line 17b				▶ \$	
4	Did the filing organization file Form	1120-POL for this year?				└ Yes
5	Enter the names, addresses and en made payments. For each organization contributions received that were propolitical action committee (PAC). If	ation listed, enter the amount paromptly and directly delivered to	aid from the filing organ o a separate political org	ization's funds. Also ganization, such as	enter th	e amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount pa filing organiza funds If none, o	ition's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
_						
	=				 	
	<u> </u>					
	•		-			

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

Schedule C (Form 990 or 990-EZ) 2010

LHA

Schedule C (Form 990 or 990-EZ) 2010	REAL ESTAT	E		54-1	.648222 Page 2
Part II-A Complete if the orga		npt under sectio	n 501(c)(3) and fil	ed Form 5768	
(election under sect					
. —	ion belongs to an affi				
B Check I if the filing organizat	ion checked box A ar	nd "limited control" pro	ovisions apply.		
	s on Lobbying Exper itures" means amou	nditures ints paid or incurred.])	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public opinion (grass roots lobbying)	•		
b Total lobbying expenditures to influ	ence a legislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add lir	nes 1a and 1b)				
d Other exempt purpose expenditure	s				
 Total exempt purpose expenditures 	s (add lines 1c and 1c	1)			
f Lobbying nontaxable amount. Ente	r the amount from the	e following table in bot	h columns		
If the amount on line 1e, column (a) or	r(b) is: The lob	bying nontaxable am	ount is:		,
Not over \$500,000	20% of	the amount on line 1e.			
Over \$500,000 but not over \$1,000	,000 \$100,00	0 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,50	00,000 \$175,00	0 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0	000,000 \$225,00	0 plus 5% of the exce	ss over \$1,500,000.		,
Over \$17,000,000	\$1,000,0	000.			İ
g Grassroots nontaxable amount (ent	•				
h Subtract line 1g from line 1a If zero					
i Subtract line 1f from line 1c. If zero	,				<u> </u>
j If there is an amount other than zer		line 1i, did the organiz	ation file Form 4720	r	
reporting section 4911 tax for this y					Yes No
	ations that made a s		Section 501(h) n do not have to comp es 2a through 2f on pa		
	Lobbying Exper	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 REAL ESTATE 54-164822

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

	·	(6	a)	(k))
		Yes	No	Amo	ount
1	During the year, did the filling 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				
а	Volunteers?				ŀ
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	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?				
	Other activities? If "Yes," describe in Part IV				
	Total. Add lines 1c through 1i				
-	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	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?				
	t III-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)	(5), or se	ction	
	501(c)(6).		(-),		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X
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?		3		X
Par	t III-B Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)	(5), or se	ction	
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa				
	"Yes."				
1	Dues, assessments and similar amounts from members		1	126	649.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a	34	1,385.
b	Carryover from last year		2b		
С	Total		2c	34	,385.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	34	,385.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?	,	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information		<u>'</u>		
Com	olete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; a	nd Part II-B.	line 1i. Also	o, complete	this part
	ny additional information.			•	•
	·				
					
			-		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions. HAMPTON ROADS ASSOCIATION FOR COMMERCIAL **Open to Public** Inspection

OMB No 1545-0047

REAL ESTATE

Employer identification number 54-1648222

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 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 advisors in	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, I	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	-
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an his	storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe	- · · · · · · · · · · · · · · · · · · ·	
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	•	
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	· · · · · · · · · · · · · · · · · · ·
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	-	
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization's accounting for
Da	conservation easements. rt III Organizations Maintaining Collections o	f Art Historical Transuras or C	Other Similar Assets
Fa	Complete if the organization answered "Yes" to Form	•	other Similar Assets.
та	If the organization elected, as permitted under SFAS 116 (AS	· ·	·
	historical treasures, or other similar assets held for public ex		ance of public service, provide, in Part XIV,
L	the text of the footnote to its financial statements that descr		A and balance about water of a A. b. skell and
D	If the organization elected, as permitted under SFAS 116 (AS	•	-
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	iblic service, provide the following amounts
	relating to these items:		. .
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X	· ·	\$
2	If the organization received or held works of art, historical tre	•	ai gain, provide
_	the following amounts required to be reported under SFAS 1	10 (MOC 308) relating to these items.	. .
a	·		\$
D	Assets included in Form 990, Part X		▶ \$

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

Schedule D (Form 990) 2010

	dule D (Form 990) 2010 REAL EST									Page 2
Par										
3	Using the organization's acquisition, accession	on, and other record	ds, check	any of the	following tha	at are a s	ignificant	use of its	collection	ıtems
	(check all that apply):									
а	Public exhibition	c	י וַ וּ	oan or exc	hange progra	ams				
b	Scholarly research	e	, [](Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explai	ın how th	ey further t	he organizati	ion's exe	mpt purp	ose in Par	t XIV.	
5	During the year, did the organization solicit or	receive donations	of art, his	storical trea	sures, or oth	er sımıla	r assets			
	to be sold to raise funds rather than to be ma					_			Yes	□ No
Par	t IV Escrow and Custodial Arrang	gements. Compl	ete if the	organizatio	n answered	"Yes" to	Form 990), Part IV,	line 9, or	
	reported an amount on Form 990, Par	t X, line 21.								
1a	Is the organization an agent, trustee, custodia	an or other intermed	diary for d	contribution	ns or other as	sets not	included		_	
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV a	and complete the fo	ollowing t	able:						
									Amount	
С	Beginning balance						_1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Yes	L No
<u>b</u>	If "Yes," explain the arrangement in Part XIV									
Par	t V Endowment Funds. Complete if	the organization ar	nswered '	"Yes" to Fo	rm 990, Part	IV, line	10.			
		(a) Current year	(b) Pi	rior year	(c) Two yea	rs back	(d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance		<u> </u>							<u> </u>
b	Contributions				ļ					
С	Net investment earnings, gains, and losses		<u> </u>							<u>'</u>
d	Grants or scholarships									
e	Other expenditures for facilities									l t
	and programs									
f	Administrative expenses				<u> </u>					
g	End of year balance				<u> </u>					
2	Provide the estimated percentage of the year	end balance held a	as:							
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Term endowment ▶	6								
За	Are there endowment funds not in the posses	ssion of the organiz	ation tha	t are held a	ind administe	ered for t	he organı	zation	_	
	by:								\	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations								3b	
4	Describe in Part XIV the intended uses of the						_			
Pai	rt VI Land, Buildings, and Equipm	ent. See Form 990	0, Part X,	line 10.						
	Description of investment	(a) Cost or o			or other		ccumulat	1	(d) Book	value
		basis (investi	ment)	basis	(other)	de	preciation			
	Land	ļ								
	Buildings									
	Leasehold improvements									
	Equipment									
e	Other	ruel Form 000 Davi								

Schedule D (Form 990) 2010

Part X Other Liabilitie	See Form 990, Part X, line 25.	
1. (a) Do	escription of liability	(b) Amount
(1) Federal income taxes	•	
(2) PAYABLE TO P	AC	1,475.
(3) MISCELLANEOU	S EXPENSES	4,661.
(4) SPONSORSHIPS	PAYABLES	31,150.
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Fo	orm 990, Part X, col (B) line 25)	▶ 37,286.

-councie in Part XIV, provide the text of the roomote to the organization's financial statements that reports the groundation's flability for uncertain tax positions under FIN 48 (ASC 740)

032053 12-20-10

Sche	dule D (Form 990) 2010 REAL ESTATE		54-1648222 Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Financial	l Statements
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	·· ·
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	<u> </u>	
	t XII Reconciliation of Revenue per Audited Financial Stateme		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
-	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
е	Add lines 2a through 2d	<u> </u>	
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5
Pa	t XIII Reconciliation of Expenses per Audited Financial Statem	ents With Expense	es per Return
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
þ	Other (Describe in Part XIV.)	4b	
С	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5
Pa	t XIV Supplemental Information		
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	I, lines 1a and 4; Part IV	/, lines 1b and 2b, Part V, line 4; Part
X, lın	e 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp	lete this part to provide	e any additional information.
		<u>. </u>	
	· · · · · · · · · · · · · · · · · · ·		
			
	~ ~ ~ · · · · · · · · · · · · · · · · ·		
			
	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; 		
			

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

2010

pen To Public

Name of the organization

HAMPTON ROADS ASSOCIATION FOR COMMERCIAL

Employer identification number

Inspection

REAL ES	TATE				54-1648	222
Part I Fundraising Activities. required to complete this part	Complete if the organization answe	ered "\	es" to	Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
Indicate whether the organization rais	e Solicitat f Solicitat g X Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) purs	ion of ion of fundra (includerofess	non-g gover using o ding o ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees orYes	
(i) Name and address of individual or entity (fundraiser)	(ii) Actıvıty	(iii) fundi have c or con contrib	trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
	<u> </u>	Yes	No			
	·					
Total			•			
3 List all states in which the organizatio or licensing.	n is registered or licensed to solicit	contrit	outions	s or has been notified	d it is exempt from re	egistration
				· · ·		
	-,					
	· · · · · · · · · · · · · · · · · · ·					· ·
						
				<u>.</u>		
						

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

Schedule G (Form 990 or 990-EZ) 2010

HAMPTON ROADS ASSOCIATION FOR COMMERCIAL Schedule G (Form 990 or 990-EZ) 2010 REAL ESTATE 54-1648222 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col (a) through GOLF OUTING col. (c)) (event type) (total number) (event type) Revenue 42,925 42,925. Gross receipts Less: Charitable contributions 42,925 42,925. Gross income (line 1 minus line 2) Cash prizes 10,700. 10,700. Noncash prizes Direct Expenses Rent/facility costs 7,909. 7,909. 5,832. 5,832. Food and beverages 8 Entertainment 360. 360. Other direct expenses 24,801, 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Combine line 3, column (d), and line 10 Part III | Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities Yes a is the organization licensed to operate gaming activities in each of these states? b If "No," explain. 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? J Yes

Schedule G (Form 990 or 990-EZ) 2010

b If "Yes," explain:

032082 01-13-11

Schedule G (Form 990 or 990-EZ) 2010 REAL ESTATE	54-1648222 Pa	ge 3
11 Does the organization operate gaming activities with nonmembers?	Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other		
to administer charitable gaming?	Yes .] No
13 Indicate the percentage of gaming activity operated in:	1 1 1	
a The organization's facility	13a	%
b An outside facility	136	%
14 Enter the name and address of the person who prepares the organization's gaming/special events		
For the second s		
Name		
Address >		
15a Does the organization have a contract with a third party from whom the organization receives gami	ng revenue? Yes] No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$	and the amount	
of gaming revenue retained by the third party ▶\$	_	
c If "Yes," enter name and address of the third party:		
Name ►		
Address >		
16 Gaming manager information:		
Name ▶		
Gaming manager compensation > \$		
Description of services provided		
Director/officer Employee Independent contractor		
17 Mandatory distributions		
a is the organization required under state law to make charitable distributions from the gaming proce	eds to	
retain the state gaming license?	Yes	No
b Enter the amount of distributions required under state law to be distributed to other exempt organi	zations or spent in the	
organization's own exempt activities during the tax year ▶ \$	·	
Part IV Supplemental Information. Complete this part to provide the explanations required by P	art I, line 2b, columns (III) and (V), and Part	: III,
lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also complete this part to provide a	ny additional information (see instructions	s)
		
032083 01-13-11	Schedule G (Form 990 or 990-FZ)	2010

SCHEDULE (Form 990)

Grants and Other Assistance to Organizations,

Open to Public OMB No 1545-0047

Schedule I (Form 990) (2010) % × Employer identification number 54-1648222 VELFARE OF THE HAMPTON TO PROVMOTE THE SOCIAL Inspection (h) Purpose of grant or assistance Yes ROADS COMMUNITY Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States 。 (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. HAMPTON ROADS ASSOCIATION FOR COMMERCIAL (d) Amount of 10,000 cash grant (c) IRC section For Paperwork Reduction Act Notice, see the Instructions for Form 990. if applicable 501(C)(4) Enter total number of section 501(c)(3) and government organizations General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? REAL ESTATE Enter total number of other organizations 1 (a) Name and address of organization VIRGINIA BEACH, VA 23462 or government 222 CENTRAL PARK AVE. Name of the organization LIGHT RAIL NOW, INC Department of the Treasury Internal Revenue Service Part Part II

REAL ESTATE

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule | (Form 990) (2010) Part III | Grants and Other

Page 2

54-1648222

Schedule I (Form 990) (2010)			7.7		032102 01-13-11
	Information required in Part I, line 2, and any other additional information.	line 2, and any other	n required in Part I, I	l de the information	Part IV Supplemental Information. Complete this part to provide the
(f) Description of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(d) Amount of non- cash assistance	(c) Amount of cash grant	(b) Number of recipients	(a) Type of grant or assistance

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.

OMB No 1545-0047 Open-to Public Inspection

Name of the organization

HAMPTON ROADS ASSOCIATION FOR COMMERCIAL REAL ESTATE

Employer identification number 54-1648222

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
IMPORTANT TIMELY REAL ESTATE ISSUES
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
BUS TOUR IS CONDUCTED TO SHOWCASE COMMERCIAL PROERTY IN THE GEORGRAPHIC
AREA OF THE ORGANIZATION
JOINT FALL EVENT, A NETWORKING OPPORTUNITY, NEW MEMBER OREIENTATION,
NEWS LETTER, AND MEMBERSHIP DIRECTORY
FORM 990, PART VI, SECTION B, LINE 11: NOT PROVIDED TO THE GOVERNING BODY
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST
FORM 990, PART IX, LINE 24F, ALL OTHER FUNCTIONAL EXPENSES:
CVENT:
TOTAL EXPENSES 11,589.
BEVERAGE EXPENSE:
TOTAL EXPENSES 8,887.
MISCELLANEOUS - ADMINISTRATIVE:
TOTAL EXPENSES 6,928.
WEBSITE EXPENSE:
TOTAL EXPENSES 6,746.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2010)

032211 01-24-11

Schedule O (Form 990 or 990-EZ) (2010) Name of the organization HAMPTON ROADS ASSOCIATION FOR COMMERCIAL REAL ESTATE	Page 2 Employer identification number 54-1648222
MAILHOUSE:	
TOTAL EXPENSES	6,238.
EQUIPMENT RENTALS:	
TOTAL EXPENSES	6,233.
SOFTWARE EXPENSE:	
TOTAL EXPENSES	4,891.
CREDIT CARD FEES:	
TOTAL EXPENSES	4,424.
INSURANCE:	
TOTAL EXPENSES	4,374.
PERFORMERS' EXPENSE:	
TOTAL EXPENSES	4,250.
MEALS:	
TOTAL EXPENSES	3,990.
PRESIDENT'S COUNCIL:	
TOTAL EXPENSES	3,343.
AUDIOVISUAL EXPENSE:	
TOTAL EXPENSES	3,223.

Schedule O (Form 990 or 9 Name of the organization	90-EZ) (2010) HAMPTON ROADS ASSOCIATION FOR COMMERCIAL REAL ESTATE	Employer identification number 54-1648222
SPACE RENTAL:		
TOTAL EXPENSES	3	3,167.
TELEPHONE:		
TOTAL EXPENSE:	3	2,963.
FALL EVENT - 1	REVENUE SHARING CO-SPONSOR:	
TOTAL EXPENSE:	5	2,740.
SCHOLARSHIPS:		
TOTAL EXPENSE	S	2,600.
GRAPHIC ARTIS	г:	
TOTAL EXPENSE	S	2,160.
SPEAKERS EXPE	NSE:	
TOTAL EXPENSE	S	1,865.
JUDGES EXPENS	ES:	
TOTAL EXPENSE	S	1,631.
COPYING:		
TOTAL EXPENSE	s	1,597.
POSTAGE:		
TOTAL EXPENSE	S	1,404.
SIGNAGE:		
032212 01-24-11		hedule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 990 or 990-EZ) (2010) Name of the organization	Employer identification number 54-1648222
TOTAL EXPENSES	1,201.
FLOWERS AND GIFTS:	
TOTAL EXPENSES	1,126.
CHAMBER DUES:	
TOTAL EXPENSES	958.
UTILITIES:	
TOTAL EXPENSES	889.
BAD DEBTS:	
TOTAL EXPENSES	760.
DECORATIONS:	
TOTAL EXPENSES	532.
LICENSES:	
TOTAL EXPENSES	440.
SECURITY:	
TOTAL EXPENSES	330.
PRIZES:	
TOTAL EXPENSES	250.
BANK CHARGES:	
TOTAL EXPENSES 032212 01-24-11 Sch 28	45. edule O (Form 990 or 990-EZ) (2010)