

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



RETURN EXTENDED THROUGH NOVEMBER 15, 2011

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

2063827777

X Yes

No

Form 990 (2010)

Phone no.

Form	J	J	U	
Departs	nent (of the	e Treas	surv

OOO

Internal Revenue Service Inspection and ending For the 2010 calendar year, or tax year beginning D Employer identification number Check if C Name of organization SEATTLE-KING COUNTY ASSOCIATION Address change OF REALTORS Name change 91-0403475 Doing Business As Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number 425-974-1011 Termin-12410 SE 32ND ST, STE 100 Amender return 1,959,319. G Gross receipts \$ City or town, state or country, and ZIP + 4 Applica-BELLEVUE, WA 98008 H(a) Is this a group return pendina F Name and address of principal officer: RUSSELL HOKANSON Yes X No for affiliates? SAME AS C ABOVE Н(b) Are all affiliates included? 🗌 501(c)(3) X 501(c)(6) (insert no.) Tax-exempt status: 4947(a)(1) or If "No." attach a list, (see instructions) J Website: WWW.NWREALTOR.COM H(c) Group exemption number ▶ Trust L Year of formation: 1908 M State of legal domicile: WA Form of organization: X Corporation Association Other > Part I Summary Bnefly describe the organization's mission or most significant activities: TO UNITE THE REAL ESTATE Governance INDUSTRY THROUGH EDUCATION AND RESEARCH, TO UNITE THOSE ENGAGED $oldsymbol{ol{ol}oldsymbol{ol}}}}}}}}}}}}}}}}}}$ Check this box Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 <u>11</u> Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) -7,669. 7a 7 a Total unrelated business revenue from Part VIII, column (C), line 12 -7,669. 7b b Net unrelated business taxable income from Form 990-T, line 34 **Current Year Prior Year** 1,095,828. 1,021,668. Contributions and grants (Part VIII, line 1h) 609,597 685,805. Program service revenue (Part VIII, line 2g) 42,822 39,364. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 2,342. -10,369. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 750,589 1,736,468. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 Grants and similar amounts paid (Part IX, column (A), lines-1-3)
Benefits paid to or for members (Part IX, column (A), line 4) 0. 0 13 0 Ō. 14 821,969. 839,905. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, colվարդ (D), կրբ 25) 2 $1,006,\overline{247}$ 983,902 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 828,216. 823,807 Total expenses. Add lines 13-17 (must equal Rart IX, column (A), line 25) -91,748. -73,218 Revenue less expenses. Subtract line 18 from line 123 **Beginning of Current Year End of Year** 5,361,358 5,028,088. 20 Total assets (Part X, line 16) 2,680,752. 2,927,452 21 Total liabilities (Part X, line 26) 2,433,906. 2,347,336. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other Man officer) is based on all information of which preparer has any knowledge Signature of officer Sign CHIEF EXECUTIVE OFFICER RUSSELL HOKANSON Here Type or print name and title Date Print/Type preparer's name Preparer's signature 🕏 Paid 09/15/11 MATTHEW R. MATSON PETERSON SULLIVAN LLP, CPA'S Firm's EIN Preparer Firm's name 601 UNION ST, STE 2300 **Use Only**

SEATTLE, WA 98101-2345

May the IRS discuss this return with the preparer shown above? (see instructions)

	SEATTLE-KING COUNTY ASSOCIATION		
	<u>m</u> 990 (2010) OF REALTORS	<u>91-0403475</u>	Page 2
<u>P</u> a	artillis 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 UNITE THE REAL ESTATE INDUSTRY THROUGH EDUCATION AND	RESEARCH, T	0
	UNITE THOSE ENGAGED IN THE REAL ESTATE BUSINESS AND TO	PROMOTE AND	
	PROTECT THE INTEREST OF ITS MEMBERS AND OF OTHERS ENGAG	ED IN REAL	
	ESTATE TRANSACTIONS AND MANAGEMENT. TO PROVIDE EDUCATION	N FACILITIES	IN
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? If "Yes," describe these changes on Schedule O.	? L_Yes	X No
4	Describe the exempt purpose achievements for each of the organization's three largest program services by ex	xpenses.	
-	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of	•	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ including grants of \$) (F	Revenue \$	3 3 2 3
	THE ASSOCIATION PROVIDED EDUCATION, NEWSLETTERS, LIBRAR		
	SPONSORED MEETINGS TO FURTHER PROFESSIONAL STANDARDS AN		עט
	FAITH AND FAIR DEALING IN REAL ESTATE AMONG ITS OVER 5,	400 MEMBERS.	
			
			
4b	O (Code:) (Expenses \$ including grants of \$) (F	Revenue \$	
			
			
			
			
4c	C (Code:) (Expenses \$including grants of \$)(F	Revenue \$	
		·	····
			
			
	d. Other gragram convece (Deceribe in Schedule O.)		

032002 12-21-10

Form **990** (2010)

including grants of \$

4e Total program service expenses ▶

(Expenses \$

) (Revenue \$

Partily Checklist of Required Schedules

OF REALTORS

			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		<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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 I	3		X
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	X	
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			7.7
	Schedule D, Part III	8		X
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		X
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	Source Service	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			, č,
	as applicable.	E-196	1.5	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		٠.	ļ
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44.		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d	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	11d	,	X
_	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	x	
_	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
f	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
120	Schedule D, Parts XI, XII, and XIII	12a		x
h	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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_		X
15	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_		X
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		ĺ	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		1	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	L	X
19	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
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	<u> </u>	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)	20b		
		Form	990	(2010

Rai	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		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 2? 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	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, 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 penod 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		
2 5a	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			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	<u> </u>	X
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	~~		x
00	Schedule L, Part III	27	20%	
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): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	W.57.	X
	A CONTRACTOR OF THE CONTRACTOR	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
·	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	<u> </u>	Х
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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			_
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	ļ] ,	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			٠,,
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		
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		[ĺ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	26		
97	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	37		x
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	- 3/ -	 	
50	Note. All Form 990 filers are required to complete Schedule O	38	х	
	TOTAL TOTAL COSTITION BIO TOQUILOS TO COMPICTO OSTICULIE O		990 (2010\

Form 9	990 (2010) OF REALTORS 91-0403	475	P	age 5
Parl	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]		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	l .	l	i
	(gambling) winnings to prize winners?	1c	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 2a 11			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Х	
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, secunties account, or other financial account)?	4a		X
	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.		_	
	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		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			1
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		ľ	
	were not tax deductible?	6b		<u> </u>
	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		ļ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		İ	
	to file Form 8282?	7c		ļ
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	<u> </u>	<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	ļ	├ —
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	ļ	├
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	-		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	ļ	ļ
9	Sponsoring organizations maintaining donor advised funds.	-		
	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	-	\vdash
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12	4		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-	ł	
11	Section 501(c)(12) organizations. Enter:		l	
	Gross income from members or shareholders	1		ł
b	Gross income from other sources (Do not net amounts due or paid to other sources against		l	
	amounts due or received from them.)	٠,,	-	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	\vdash	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	100	╁	
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.			
þ	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 13b	┨	1	1
	Enter the amount of reserves on hand	44=	┼	X
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		

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

14b

Form 990 (2010)

OF REALTORS 91-0403475 Form 990 (2010) 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 Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a 17 1b b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the X 7a governing body? X 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year 8 by the following: X 8a a The governing body? X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a 10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with those of the organization? X 11a 11a 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. X 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give use X 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X 12c in Schedule O how this is done X Does the organization have a written whistleblower policy? 13 13 X 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a a The organization's CEO, Executive Director, or top management official

exemp	status with respect to such arrangements?	
	Disclosure	

taxable entity during the year?

17	List the states with which a copy of this Form 990 is required to be filed	► NON

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

Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

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

Own website Another's website Upon request

Other officers or key employees of the organization

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: SCOTT PARSONS - 425-974-1012

12410 SE 32ND ST STE 100, BELLEVUE, WA 98005

Form 990 (2010)

X 15b

16a

E	200	(2010)	
FUITH	990	(2010)	

OF REALTORS

91-0403475

Page 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 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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.

(A)	(B)			(()			(D)	(E)	(F)
Name and Title	Average			Pos	rtion	ı		Reportable	Reportable	Estimated
	hours per	(cl	neck	all	that	арр	ly)	compensation	compensation	amount of
	week	Ę			1	l	İ	from the	from related	other
	(describe hours for	를				ted		organization	organizations (W-2/1099-MISC)	compensation from the
	related	stee (ruster	ŀ		bensa	1	(W-2/1099-MISC)	(11 2) (000 111100)	organization
	organizations	la tr	onalı		ploye	E 2				and related
	in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
RUSSELL HOKANSON	0)				H		-			
EXEC. OFFICER	37.50	x		x				147,250.	0.	13,655.
DENNIS BROWN	1									
CHAIRMAN	1.00	X		Х				12,000.	0.	0.
KEITH NELSON										
PAST PRESIDENT	1.00	Х						6,000.	0.	0.
KRISTEN GREENLAW										
PRESIDENT ELECT	1.00	X		ŀ			_	6,000.	0.	0.
EVANGELINE ANDERSON		Г								
BOARD MEMBER	1.00	X						0.	0.	0.
MARGE BEARMAN										
BOARD MEMBER	1.00	X						0.	0.	0.
MICHAEL CORNELL									_	
BOARD MEMBER	1.00	X	L			_		0.	0.	0.
BRENDA COURTADE								_		_
BOARD MEMBER	1.00	X					L	0.	0.	0.
JIM DIERST										
BOARD MEMBER	1.00	X				<u> </u>	_	0.	0.	0.
LAWRENCE FREET		[•	1		[
BOARD MEMBER	1.00	Х		L	_		_	0.	0.	0.
ROBB GRAY	1	١								
BOARD MEMBER	1.00	X	L			Ш	L	0.	0.	0.
CHRISTI IRWIN	1 00			ļ	ļ	l	l		_	
BOARD MEMBER	1.00	X	_	_	_	-	┡	0.	0.	0.
JOHN JOHNSTON	1 00	1,7			l	ļ			_	
BOARD MEMBER	1.00	X	<u> </u>			<u> </u>	<u> </u>	0.	0.	0.
TYLER MCKENZIE	1 00	 						٥.	0.	_
BOARD MEMBER	1.00	X	H	_	<u> </u>	⊢	\vdash	U .	0.	0.
JASON MOORE	1.00	x			1			0.	0.	0.
BOARD MEMBER JOAN PROBALA	1.00	┞┻	\vdash	\vdash	-	-	\vdash	 	<u> </u>	
BOARD MEMBER	1.00	x				1	1	0.	0.	0.
WOLFGANG PULS	1.00	┢≏	-	 		\vdash	\vdash			· · ·
BOARD MEMBER	1.00	x						0.	0.	0.
	1.00	-22	L	Ц.						5 000 (0040)

032007 12-21-10

Form 990 (2010)

Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	mple	oyee	s, a	nd I	High	est	Compensated Employ	ees (continued)			
(A)	(B)	Γ			C)			(D)	(E)			(F)
Name and title	Average			Pos	ition	1		Reportable	Reportable	•	l Est	ımated
	hours per	(c	hecl	c all	that	арр	ly)	compensation	compensation		am	ount of
•	week	Ţ	Γ				Г	from	from related	d	(ther
	(describe	or director						the	organization			ensation
	hours for	5	<u>ag</u>			sated		organization	(W-2/1099-MI	SC)	ł	m the
	related organizations	ıste	Ē		9	ubeu	1	(W-2/1099-MISC)			_	nization
	in Schedule	量	E e	l _	g Š	2 8 S	_		!		l	related
	O)	Individual	Institutional frustee	Je Je Je Je Je Je Je Je Je Je Je Je Je J	Key employee	Highest compensated employee	Former	'			orgai	nizations
RONI STRUPAT		H	 			I						
BOARD MEMBER	1.00	x						0.		0.		0.
JANE TOBIN							Г					
BOARD MEMBER	1.00	X					_	0.		0.		0.
DAVID CROWELL										_		-44
DIRECTOR OF GOVERNMENT AFFAIRS	20.00		<u> </u>	<u> </u>	<u> </u>	X	L	101,232.		0.	11	.,591.
				İ		ĺ						
	 	┝	├	-	┝	 	\vdash					
		t		\vdash	Г	†		-				
		<u> </u>			l							
		ㄴ	<u> </u>	_	<u> </u>	<u> </u>						
		l	l	1	l	l					}	
		├-	-	\vdash	├	\vdash	_	<u> </u>			-	
		ļ										
1b Sub-total	l			1		┕		272,482.		0.	25	,246.
c Total from continuation sheets to Part V	II Section A							0.		0.		0.
d Total (add lines 1b and 1c)	., ocotion A							272,482.	· · · · · · · · · · · · · · · · · · ·	0.	25	,246.
Total number of individuals (including but r	ot limited to th	nose	liste	ed a	bov	e) w	ho r		0,000 in reportab	le		
compensation from the organization												2
												Yes No
3 Did the organization list any former officer,			e, ke	y en	nplo	yee,	or	highest compensated er	mployee on			X
line 1a? If "Yes," complete Schedule J for s							.1 . 4		Al		3	
4 For any individual listed on line 1a, is the stand related organizations greater than \$15	•							-	the organization		4	x
5 Did any person listed on line 1a receive or									idual for convec		 	 +
rendered to the organization? If "Yes," corr							Olu	ted organization of mail	10001 101 301 11000	•	5	X
Section B. Independent Contractors												
1 Complete this table for your five highest co	mpensated in	dep	ende	ent c	onti	racto	ors	that received more than	\$100,000 of cor	npens	ation fr	om
the organization.								· · · · · · · · · · · · · · · · · · ·				
(A) Name and business	addraga							(B) Description of s	05/1000	_	(C) compen	
BANNECKER & ASSOCIATES	address		_				_	Description or s	ervices		ompen	Sation
820 FOURTH AVE, SEATTLE,	WA 981	n 4						HOUSING SPEC	тат.тет		140	,044.
SAM PACE	W11 301	<u> </u>						NOODING BIEC				70111
29839 154TH AVE SE, KENT	, WA 98	04	2					HOUSING SPEC	IALIST		116	5,902.
								-				
	<u> </u>						_					
2 Total number of independent contractors (including but r	not li	mite	d to	tho	se li	sted	d above) who received n	nore than			
\$100,000 in compensation from the organi						2						
- 												90 (2010)

91-0403475

Ра	rt V	<u> </u>	Statement of Reven	ue		(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
						Total revenue	exempt function revenue	business revenue	excluded from tax under sections 512, 513, or 514
nts tts	1 :	а	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	1	b	Membership dues	<u>ы</u> 1,	021,668.				
a, c	•	С	Fundraising events	1c					
g'g.	,	d	Related organizations	1d	····				
Si E	(Government grants (contributi						
e Ei	1		All other contributions, gifts, grant						
흕뒝			similar amounts not included above	/e 1f					
S E	!	_	Noncash contributions included in lines	1a-1f \$		1,021,668.			
5 %		<u>h</u>	Total. Add lines 1a-1f		, 	1,021,000.			
_	_		GOVT AFFAIRS SU	יים מים	Business Code 900099	296,979.	296,979.		
Program Service Revenue	2 :		EDUCATION CLASS		900099	274,636.	274,636.		
E S			MEETING AND BAN		900099	114,190.	114,190.		
E S			MEETING AND DAN	QUEI II	700077	114,150.	114,1500		
P.S		d •							
윤		e	All other program service reve	nuo.					
			Total. Add lines 2a-2f	nue		685,805.			
$\overline{}$	3		Investment income (including	dividends, inter					
1	Ŭ		other similar amounts)	arriadilad, ilitar	>	39,364.	ı		39,364
	4		Income from investment of tax	exempt bond i	oroceeds >	<u> </u>			†
ŀ	5		Royalties		•		_		
i			,	(i) Real	(ii) Personal	<u> </u>			
	6	а	Gross Rents	212,482.					
		b	Less: rental expenses	222,851.					
			Rental income or (loss)	-10,369.	,]			
		d	Net rental income or (loss)		> _	-10,369.		-7,669.	-2,700
1	7	а	Gross amount from sales of	(i) Securities	(ıi) Other				
1			assets other than inventory		<u> </u>				l
		b	Less: cost or other basis						İ
			and sales expenses						
			Gain or (loss)	·	<u></u>				
			Net gain or (loss)						
e	8	а	Gross income from fundraising	_					ļ.
			including \$	of					ļ
Other Reven			contributions reported on line	1c). See					
Je.			Part IV, line 18	а		1			
ŏ			Less: direct expenses	b baious sucests					
			Net income or (loss) from fund	•		<u> </u>			
	3	đ	Gross income from gaming ac Part IV, line 19						1
		h	Less: direct expenses	a b		1			
			Net income or (loss) from gam	_					
			Gross sales of inventory, less	=		 			
		_	and allowances	а					
l		ь	Less: cost of goods sold	- b		1			
			Net income or (loss) from sale	s of inventory					
- 1			Miscellaneous Revenu		Business Code				
	11	а							
ŀ		b							
		C							
		d	All other revenue	_					
		е	Total. Add lines 11a-11d		•	4 706 465			
กรรก	12		Total revenue. See instructions.			1,736,468.	685,805.	-7,669.	
03200 12-21	-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). **7B**1 (A) Total expenses Do not include amounts reported on lines 6b, Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 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 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 184,905 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) 495,760 Other salaries and wages Pension plan contributions (include section 401(k) 26,182 and section 403(b) employer contributions) 56,356. Other employee benefits 58,766. 10 Payroll taxes Fees for services (non-employees): Management 1,066. b Legal 11,672. Accounting C d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees f 25,104. g 9,706. 12 Advertising and promotion 98,685. 13 Office expenses 5,440. 14 Information technology Royalties 15 77,678. 16 Occupancy 84,041. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 108,473. 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 33,751. 22 Depreciation, depletion, and amortization 23 Insurance 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.) 467,771. 29,145. CLASS INSTRUCTOR FEES CREDIT CARD DISCOUNTS 25,072. EQUIPMENT RENTAL AND MA MISCELLANEOUS 20,036. ч AWARDS 8,607. All other expenses 1,828,216. Total functional expenses. Add lines 1 through 24f 25 Joint costs. Check here I 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

art X		Balance Sheet			· · · · · · · · · · · · · · · · · · ·
		•	(A) Beginning of year		(B) End of year
1	Ι,	Cash - non-interest-bearing	641,315.	1	534,990.
2	2	Savings and temporary cash investments	1,133,421.	2	1,109,594.
3	3	Pledges and grants receivable, net		3	
4	ŀ	Accounts receivable, net	3,003.	4	2,010.
5	5	Receivables from current and former officers, directors, trustees, key			
İ		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
6	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	
8 7	7	Notes and loans receivable, net		7	
7 8	3	Inventories for sale or use		8	
` 9	•	Prepaid expenses and deferred charges	15,711.	9	3,909
10)a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 3,761,984.			
	b	Less: accumulated depreciation 10b 384,399.	3,451,449.	10c	3,377,585
11	i	Investments - publicly traded securities	116,459.	11_	
12	2	Investments - other secunties. See Part IV, line 11		12	
13	3	Investments - program-related. See Part IV, line 11		13	
14	1	Intangible assets		14	
15	5	Other assets. See Part IV, line 11		15	
16	3	Total assets. Add lines 1 through 15 (must equal line 34)	5,361,358.	16	5,028,088
17	7	Accounts payable and accrued expenses	39,547.	17	54,170
18	3	Grants payable		18_	220 244
19	9	Deferred revenue	398,642.	19	339,344
20	0	Tax-exempt bond liabilities		20	
ខ្លួ 21	1	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22	2	Payables to current and former officers, directors, trustees, key employees,			
<u> </u>		highest compensated employees, and disqualified persons. Complete Part II			
'		of Schedule L	0 140 000	22	2 005 300
23	3	Secured mortgages and notes payable to unrelated third parties	2,149,989.	23	2,065,368.
24	4	Unsecured notes and loans payable to unrelated third parties	220 274	24	221 070
25		Other liabilities. Complete Part X of Schedule D	339,274. 2,927,452.	25	221,870. 2,680,752.
26	6	Total liabilities. Add lines 17 through 25	2,921,452.	26	2,000,752
		Organizations that follow SFAS 117, check here			
Sec		lines 27 through 29, and lines 33 and 34.	2,433,906.		2,347,336
E 27		Unrestricted net assets	4,433,900.	27	2,341,330
ē 28		Temporanly restricted net assets		28	
물 29	9	Permanently restricted net assets		29	
2		Organizations that do not follow SFAS 117, check here			
ō		complete lines 30 through 34.			
30		Capital stock or trust principal, or current funds	<u> </u>	30	
ğ 31		Paid-in or capital surplus, or land, building, or equipment fund		31	
22 29 30 31 32 32 33 33 33 33 33 33 33 33 33 33 33		Retained earnings, endowment, accumulated income, or other funds	2,433,906.	32	2,347,336.
30		Total net assets or fund balances	5,361,358.	33	5,028,088
34	4	Total liabilities and net assets/fund balances	1 2,20T,230.	34	Form 990 (2010)

Form **990** (2010)

Pai	t 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	1,73		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,82		
3	Revenue less expenses. Subtract line 2 from line 1	3			48.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,43		
5	Other changes in net assets or fund balances (explain in Schedule O)	5			78.
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	2,34	<u>7,3</u>	<u> 36.</u>
Pai	t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
b	b Were the organization's financial statements audited by an independent accountant?				Х
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	1		
	review, or compilation of its financial statements and selection of an independent accountant?			X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
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: X 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 Si	ngle Audi	t		
	Act and OMB Circular A:133?		3a	ļ	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired audi	t		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		<u> </u>
			Form	990	(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

➤ See separate instructions.

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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	• • • •	(y Tax), of 1 of 11 330-2	.e., Fart V, line coa (Froxy	iak, dien
		-KING COUNTY ASS	SOCIATION	Empl	oyer identification number
	OF REAL				91-0403475
Pa	art I-A Complete if the org	janization is exempt und	der section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organize Political expenditures Volunteer hours	ation's direct and indirect politi	cal campaign activities	ın Part IV. ▶\$	
Pa	art I-B Complete if the org	janization is exempt und	der section 501(c)	(3).	
_	Enter the amount of any excise tax			▶ \$	
	Enter the amount of any excise tax	, •		► .	
	If the organization incurred a section	· ·			Yes No
	Was a correction made?	,	•		Yes No
b	o If "Yes," describe in Part IV.				
Pâ	art I-C Complete if the org	janization is exempt un	der section 501(c)	, except section 501(c)(3).
1	Enter the amount directly expended	by the filing organization for se	ection 527 exempt func	tion activities > \$	
	Enter the amount of the filing organ				
	exempt function activities			▶ \$	
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-POL	•1	
	line 17b			▶ \$	0.
4	Did the filing organization file Form	1120-POL for this year?			Yes X No
5	Enter the names, addresses and er made payments. For each organiza				
	contributions received that were pr				
	political action committee (PAC). If				
	(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
_					

032041 02-02-11

LHA

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

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010	OF REALTOR	S	- F04(0)(0) ond 4:1a	91-	0403475 Page 2
Part II-A Complete if the orga (election under secti		npt under sectio	n 501(c)(3) and file	ea Form 5/66	
			 		
A Check if the filing organization					
B Check Lift the filing organization	on checked box A ar	nd "limited control" pro	visions apply.	(a) Films	(h) Affiliated aroun
	on Lobbying Exper ures" means amou	nditures ints paid or incurred.		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)			
b Total lobbying expenditures to influe	nce a legislative boo	ly (direct lobbying)			
c Total lobbying expenditures (add line	es 1a and 1b)				
d Other exempt purpose expenditures			. [
e Total exempt purpose expenditures	(add lines 1c and 1c	i)			
f Lobbying nontaxable amount. Enter	the amount from the	following table in bot	h columns.		
If the amount on line 1e, column (a) or	(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 \$1,500	0,000 \$175,00	0 plus 10% of the exc	ess over \$1,000,000		
Over \$1,500,000 but not over \$17,0	00,000 \$225,00	0 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,0	000.			
g Grassroots nontaxable amount (ente	er 25% of line 1f)				<u></u>
h Subtract line 1g from line 1a. If zero	or less, enter -0-				
i Subtract line 1f from line 1c. If zero	•		L		
j If there is an amount other than zero	on either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this ye					Yes No
	tions that made a s		Section 501(h) n do not have to comp es 2a through 2f on pa		
	Lobbying Exper	nditures During 4-Ye	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		i			
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
A Outside table was assessed in the control of the			i l		I

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990 EZ) 2010 OF REALTORS 91-040347

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 91-0403475 Page 3 (election under section 501(h)).

		(;	a)	(t))
		Yes	No	Amo	ount
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:				
а	Volunteers?				i
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?	<u> </u>			
е	Publications, or published or broadcast statements?	ļ		_	
f	Grants to other organizations for lobbying purposes?				
g					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<u> </u>			
i	Other activities? If "Yes," describe in Part IV				
j	Total. Add lines 1c through 1i		-		
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	ļ			
	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				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	- FO4(a)	\(\(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	- At	
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), sect	ion sur(c)	j(5), or se	ction	
	501(c)(6).		_	Yes	No
_				res	X
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?		3	X	
3 Dai	Did the organization agree to carryover lobbying and political expenditures from the prior year? † III-B Complete if the organization is exempt under section 501(c)(4), sect	on 501(c)			
<u> </u>	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines III-A, lines III-A, lines III-A, lines III-A, lines II-A, line	ert III-A. li	ine 3 is a	nswered	
	"Yes."				
1	Dues, assessments and similar amounts from members		1	905	7,833.
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	10	835.
	Carryover from last year		2b		642.
	Total		2c	11	477.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	17	7,634.
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		1		
	expenditure next year?	•	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5	-6	5,157.
Pai	t IV Supplemental Information				
Com	plete 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 1ı. Also	, complete	this part
for a	ny additional information.				
					
				_	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. OMB No. 1545-0047

2010
Open to Public to Inspection

Name of the organization

► Attach to Form 990. ► See separate instructions.

SEATTLE-KING COUNTY ASSOCIATION

Employer identification number 91-0403475

OF REALTORS Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Partill Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure $oldsymbol{ol}}}}}}}}}}$ 2 Complete lines 2a through 2d if the organization held a qualified 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 a Total number of conservation easements 2a 2b b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Partillia Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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

032051 12-20-10

	dule D (Form 990) 2010 OF REAL								03475	
Par	t III Organizations Maintaining C	collections of A	rt, Hist	torical Tr	easures, c	or Othe	er Sim	ilar Asse	ets (contin	ued)
3	Using the organization's acquisition, access	on, and other record	ds, check	any of the	following tha	t are a s	ignıfıcar	nt use of its	collection	items
	(check all that apply):									
а	Public exhibition	c	י וַן י	Loan or exc	hange progra	ıms				
b	Scholarly research	e	, [(Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	in how th	ey further tl	he organizatio	on's exe	mpt pur	pose in Pa	rt XIV.	
5	Dunng the year, did the organization solicit of	or receive donations	of art, his	storical trea	sures, or othe	er simıla	r assets		_	
	to be sold to raise funds rather than to be m	aıntai <u>ned as part of</u>	the orgar	nization's co	lection?		_		Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Compl	ete if the	organizatio	n answered '	'Yes" to	Form 9	90, Part IV,	line 9, or	_
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for d	contribution	s or other as	sets not	include	d		
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing t	able:						
	,	•	_						Amount	
С	Beginning balance						1c	Ti Total		
	Additions during the year						1d	1	· ·	
	Distributions during the year						1e	1		
f	Ending balance						1f		-	
	Did the organization include an amount on F	orm 990 Part X line	217						Yes	No
	If "Yes," explain the arrangement in Part XIV		,							
	t V Endowment Funds. Complete		swered	"Yes" to Fo	rm 990. Part	(V. line 1	10.			
	1 1 Little to the complete	(a) Current year		nor year	(c) Two year			e years back	(e) Four v	ears back
10	Beginning of year balance	(a) Ourient year	(5)	noi year	(6) 1110 3001	o ouom	(4)	700.000.	1 (0) . 00.)	- June Buom
	Contributions				 				 	
b										
	Net investment earnings, gains, and losses		-			i			 	
	Grants or scholarships		-						 	
е	Other expenditures for facilities									
	and programs								 -	
T	Administrative expenses								 	
g	End of year balance	L			L				<u> </u>	
2	Provide the estimated percentage of the year	ir end balance held a								
a	Board designated or quasi-endowment		_%							
þ	Permanent endowment	%								
С		%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	nd administe	red for t	the orga	nization	г.	- -
	by:									res No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	 -
b	If "Yes" to 3a(ii), are the related organization								_3b	
4	Describe in Part XIV the intended uses of the							 		
Pai	t VI Land, Buildings, and Equipn									
	Description of investment	(a) Cost or o			or other		ccumula		(d) Book	value
		basis (ınvestı	ment)		(other)	de	preciation	on	1	011
1a	Land .				2,211.		000			,211.
b	Buildings			1,48	6,846.		238,	565.	1,248	,281.
C	Leasehold improvements									
d	Equipment			70	2,927.		145,	834.	557	,093.
	Other								~ ~==	
Total	I. Add lines 1a through 1e. (Column (d) must e	egual Form 990. Part	X. colun	nn (B), line 1	O(c).)				3,377	,585.

Schedule D (Form 990) 2010

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

$\Delta \mathbf{E}$	DI	AL	\mathbf{m}	YD (
UL	Κ£	$\cdot \cap \bot$	$I \perp I$	//(:

Part VII Investments - Other Securities.	See Form 990, Part X, line	12		
(a) Description of security or category	(b) Book value	000	(c) Method of valua	
(including name of security)			st or end-of-year mar	ket value
Financial derivatives Closely-held equity interests				·
(3) Other				
(A)			· · · · · ·	
(B)				
(C)				
(D)				
(E)				
(G)	<u> </u>			
(H)				
(I) Tatal (Cal (h) must squal Form 900, Bort V cal (B) line 12.)			 	
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ► Part VIII Investments - Program Related.				
		1 .	(c) Method of valua	tion:
(a) Description of investment type	(b) Book value	Cos	st or end-of-year mar	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)		<u></u>		
				
(8)				
(9) (10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)				"
Part IX Other Assets. See Form 990, Part X, Irr		!	 	
	a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
<u>(9)</u> (10)				
Total. (Column (b) must equal Form 990, Part X, col (B) II	ine 15.)			
Part X Other Liabilities. See Form 990, Part 1	X, line 25,			
1. (a) Description of liability		(b) Amount		
(1) Federal income taxes				
(2) DUES COLLECTED FOR AFFIL	IATED			
(3) ORGANIZATIONS		221,870.		
(4)				
(5)				
(6)				
				
<u>(8)</u> (9)				
(10)				
(11)				
Total, (Column (b) must equal Form 990, Part X, col (B) li Fin 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote 2. FIN 48 (ASC 740).	ine 25.)	221,870.		
2. FIN 48 (ASC 740) Foomote in Part XIV, provide the text of the toothood.	e to the organization's financial st	atements that reports the organi	zation's liability for uncertain	n tax positions under
032053 12-20-10				edule D (Form 990) 2010

	dule D (Form 990) 2010 OF REALTORS		91-0403475 Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Financial Sta	tements
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 an		
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue per	Return
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:		1 1
а	Net unrealized gains on investments	2a	_
b	Donated services and use of facilities	2b	
C	Recoveries of prior year grants	2c	_}
þ	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 VIII, line 12, but not on line 1:	1 1	1 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)	anto With Evnances no	5
	t XIII Reconciliation of Expenses per Audited Financial Statem	ents with Expenses pe	
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:	ا ما	
a	Donated services and use of facilities	2a	-
D	Prior year adjustments	2c	
C	Other losses	2d	-
d	Other (Describe in Part XIV.)	20	- _{2e}
e	Add lines 2a through 2d		3
3	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
4	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1 1
a b	Other (Describe in Part XIV.)	4b	-1 1
	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
	t XIV Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II e 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp		
			<u> </u>
_			
		. <u></u>	
			

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

➤ Attach to Form 990. See separate instructions. SEATTLE-KING COUNTY ASSOCIATION

OF REALTORS

91-0403475 Part I **Questions Regarding Compensation**

Yes_ No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation pnor to reimbursing or allowing expenses incurred by all officers, directors, 2 trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. X Written employment contract Compensation committee X Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment from the organization or a related organization? 4a 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4c c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a a The organization? 5b b Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a a The organization? **b** Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments 7 not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the 8 initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53,4958-6(c)?

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

Schedule J (Form 990) 2010

91-0403475

OF REALTORS

Schedule J (Form 990) 2010

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(<u>a</u>)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported in prior Form 990 or
						1		
	ε	139,750.	0	7,500.	7,555.	6,100.	160,905.	0
1 RUSSELL HOKANSON	(ii)	0	0.	0	0	0	0	0
	≘							
8	€							
	₽							
m	<u> </u>							
	Ξ							
4								
	ε							
9	Ξ							
	Ξ							
9	\equiv							
	ε							
7	(ii)							
	Θ							
∞	≘							
	€							
6	E							
	€							
10	(E)							
	Ξ							
11	≞							
	Ξ							
12	⊞							
	Θ							
13	(ii)							
	(1)							
14	(ii)							
	(3)							
15	(iii)							
	Θ							
16	≘							

Schedule J (Form 990) 2010

SCHEDULE O

(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.

2010
Open to Public Inspection

Name of the organization

SEATTLE-KING COUNTY ASSOCIATION
OF REALTORS

Employer identification number 91 – 0403475

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE REAL ESTATE BUSINESS AND TO PROMOTE AND PROTECT THE INTEREST OF ITS
MEMBERS AND OF OTHERS ENGAGED IN REAL ESTATE TRANSACTIONS AND
MANAGEMENT. TO PROVIDE EDUCATION FACILITIES IN REAL ESTATE FOR ITS
MEMBERS AND WHEN PRACTICABLE FOR OTHERS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
REAL ESTATE FOR ITS MEMBERS AND WHEN PRACTICABLE FOR OTHERS.
FORM 990, PART VI, SECTION A, LINE 6: THE ASSOCIATION HAS MEMBERS THAT
PAY DUES AS REALTORS LICENSEES AND HAVE EQUAL VOTING RIGHTS.
FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS (WITH EQUAL VOTING
RIGHTS) CAN VOTE ON ALL BOARD OF DIRECTOR CANDIDATES.
FORM 990, PART VI, SECTION A, LINE 7B: MEMBERS ARE REQUIRED TO RATIFY ANY
CHANGES TO THE ASSOCIATION'S BYLAWS THAT ARE ADOPTED BY THE BOARD OF
DIRECTORS.
FORM 990, PART VI, SECTION B, LINE 11: THE ELECTED OFFICERS OF THE
ASSOCIATION SHALL REVIEW THE ANNUAL 990 TAX FORMS WITH THE CEO AND THE
DIRECTOR OF FINANCE BEFORE THE FORMS ARE SIGNED AND FILED WITH THE IRS. THE
OFFICERS SHALL REPORT TO THE BOARD OF DIRECTORS AT ITS NEXT REGULAR MEETING
THAT THEY HAVE COMPLETED THE REVIEW.

FORM 990, PART VI, SECTION B, LINE 12C: ONCE A YEAR BOD MEMBERS MUST SIGN

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2010)

032211
032211