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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Open to Public ... Inspection

A	For the 2	010 calendar year, or tax year beginning $$ JUN $$ 1 , $$ $$ 2 $$ 0 $$ 1 and	ending 1	MAY 31, 2011					
В	Check if	C Name of organization		D Employer identific	cation number				
	Address change	TEXAS APARTMENT ASSOCIATION							
₃ ⊑	Narne change	change Doing Business As 74-1546205							
- - - -	Initial return Termin- ated	, , , , , , , , , , , , , , , , , , , ,	Room/suite)479-6252				
3 ⊑	Amended return	City or town, state or country, and ZIP + 4		G Gross receipts \$	3,970,051.				
L	Applica- tion pending	AUSTIN, TX 78701-1951		H(a) is this a group re					
1.7.7.1 1.0.1	pending	F Name and address of principal officer:GEORGE ALLEN SAME AS C ABOVE		for affiliates? H(b) Are all affiliates inc	Yes X No				
(3)	Tax-exem	npt status 501(c)(3) _X 501(c)(6) ◀ (insert no.) 4947(a)(1) o	or 527	If "No," attach a	list. (see instructions)				
V		▶ WWW.TAA.ORG		H(c) Group exemption					
		ganization: Corporation Trust X Association Other	L Year	of formation: 1963 N	State of legal domicile: $\mathbf{T}\mathbf{X}$				
P		Summary	DOM:	TOGETTO G	DOMGOD				
9	1 Br	refly describe the organization's mission or most significant activities: ${\hbox{{\tt TO}}\ {\tt P}}$	ROMOTI	S, FUSTER, S.	PUNSUR,				
Activities & Governance									
Ver	l .	neck this box if the organization discontinued its operations or dispose	sea ot mor	l I	isets.				
Ĝ	1	umber of voting members of the governing body (Part VI, line 1a)		. 3	15				
ණ ග	1	umber of independent voting members of the governing body (Part VI, line 1b) stal number of individuals employed in calendar year 2010 (Part V, line 2a)		5	15				
iţie		otal number of individuals employed in calendar year 2010 (Fart V, line 2a)		6	400				
냟		otal unrelated business revenue from Part VIII, column (C), line 12		7a	4,213.				
Ř		et unrelated business taxable income from Form 990-T, line 34		7b	0.				
				Prior Year	Current Year				
0	8 C	ontributions and grants (Part VIII, line 1h)		0.	0.				
Ž		ogram service revenue (Part VIII, line 2g)		3,964,966.	3,754,301.				
∯ हिं, Revenue	10 In	vestment income (Part VIII, column (A), lines 3, 4, and 7d)		40,673.	44,251.				
ZWE Be	11 0	ther revenue (Part VIII. column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		102,340.	171,499.				
<u></u> چو	12 To	otal revenue- add-lines-8-through 11 (must equal Part VIII, column (A), line 12)	·	4,107,979.	3,970,051.				
رت	13 (6	ants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
_		pefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	0.				
Expenses	15 Sa	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,386,836.	1,398,102.				
Expenses	16a Pr	ofessional fundraising féés (Part IX, column (A), line 11e)	0.	0. 동학생 기계 등학생	0.				
	P ∏ C	tal Jundraising expenses (Part IX; column (D), line 25)	<u> </u>	2,459,940.	2,346,493.				
	1	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<u> </u>	3,846,776.	3,744,595.				
₹, 25)	1	otal expenses. Add lines 13·17 (must equal Part IX, column (A), line 25) evenue less expenses. Subtract line 18 from line 12	⊢	261,203.	225,456.				
<u> </u>		evenue less expenses. Subtract line 16 from line 12		eginning of Current Year	End of Year				
S Assets or Halances	20 To	otal assets (Part X, line 16)	⊢	3,530,672.	3,775,469.				
ASS	21 To	otal liabilities (Part X, line 26)	· ·	398,012.	419,298.				
Net /	: 1	et assets or fund balances. Subtract line 21 from line 20		3,132,660.	3,356,171.				
P		Signature Block							
Unc	ler penaltie	es of perjuly, indeclare that I have exampled this return justinding accompanying schedule	s and staten	nents, and to the best of m	y knowledge and belief, it is				
true	, correct,	and complete Declaration of preparer other than officery is based on all information of wi	hich prepare	r has any knowledge.	16 11				
		Tog V. Wea		10-1	4-11				
Sig	ın 🏻	Signature of officer	_	Date					
He	re	GEORGE ALLEN, EXECUTIVE VICE PRESIDEN	<u>T</u>	···	<u> </u>				
		Type or print name and title	- /7	Date Check	DTIN-				
Pai		rint/Type preparer's name RONALD H. REYNOLDS Preparer's sympature Consult H. REYNOLDS	////	Date Check Check	PTIN PTIN P00964479				
		ronald H. REYNOLDS & FRANKE, P.C.	ar-	Firm's EIN	74-2516372				
		rm's address 6836 AUSTIN CENTER BLVD., STE 2	50	i iiii 3 Liit					
•	, ' ' '	AUSTIN, TX 78731	_	Phone no. (512) 206-3141				
Ma	y the IRS	discuss this return with the preparer shown above? (see instructions)			X Yes No				
0000	201 00 00 4	1 HA For Panarwork Paduation Act Notice see the separate instruction	one		. J Form 990 (2010)				

Part V Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			х
_	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
7	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		X
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 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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X		11/4/21	
	as applicable.	- 철론. 1875년	2 E 1	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	L
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			٠,,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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 Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	x	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	<u> </u>	X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?		.,	1
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	X	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
D	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	140		
10	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			1
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		T	
	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			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	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	ļ	X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	ļ	Х
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	l	1	1
	operate one or more hospitals must attach audited financial statements (see instructions)	20b	ggn .	<u></u>
		E0.	-uuii	いつつもへい

		46205	<u>P</u>	age 4
Pa	rt 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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
240	• •	-23	 	-
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		1	₩
_	Schedule K. If "No", go to line 25	24a	 	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			İ
	any tax-exempt bonds?	24c		L
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a		j .	
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	İ	
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	1	ł	Ì
	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	<u> </u>		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	[x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1-20		
_,	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete		}	
				х
	Schedule L, Part III	27	7,55	1 2.1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		L	-, 18
	instructions for applicable filing thresholds, conditions, and exceptions):		小护车	
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	├	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	1		
	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	<u> </u>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	1	i	i
	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			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	1	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	x	l
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	 -	X
		35	 	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	No.	[[
00				
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	J	J]
	If "Yes," complete Schedule R, Part V, line 2	36		├─-
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Note. All Form 990 filers are required to complete Schedule O

Form **990** (2010)

74-1546205 Form 990 (2010) Part 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 20 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 1b 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 1<u>c</u> (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, है ; <u>के</u> 15 filed for the calendar year ending with or within the year covered by this return X 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) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За X 3b b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **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. Z-lu 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 5с c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts X 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 7 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a 7b b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . 7c Ē, ţ d If "Yes," indicate the number of Forms 8282 filed during the year 7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f 7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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 9 Sponsoring organizations maintaining donor advised funds. 9a Did the organization make any taxable distributions under section 4966? 9b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: 10a a Initiation fees and capital contributions included on Part VIII, line 12 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 1 Section 501(c)(12) organizations. Enter: 11 11a a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against 11b 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 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 13a a Is the organization licensed to issue qualified health plans in more than one state? 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 13b organization is licensed to issue qualified health plans 13c c Enter the amount of reserves on hand 14a 14a Did the organization receive any payments for indoor tanning services during the tax year?

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

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			X
Sec	tion 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 15		. 1	7
b	Enter the number of voting members included in line 1a, above, who are independent 15		+	4.3
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	, i.	ž	
	officer, director, trustee, or key employee?	2		<u>X</u>
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_		X
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	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		1 F	
	by the following:		1. J. J.	4- A-
а	The governing body?	8a	X	
	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			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	•		
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Х	
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	10b	X	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1. 11.	:. · =	1 25 - 5 1 1 1 2 2
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	J
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	靐	· 0.5	V
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	題。	11, 3	la jaje Jajaje
а	The organization's CEO, Executive Director, or top management official	15a	X	" "
	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.)	洼	1 - 0 - 1 - 5 -	; 1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		,毫	金金
	taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation		10.5	1
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			- 照
	exempt status with respect to such arrangements?	16b	1	. ~-
Sec	tion C. Disclosure	•		<u>. </u>
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	e for		
-	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	ınd fina	ancial	
	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 organization.	ation:	>	
	GEORGE ALLEN - 512-479-6252			
	1011 SAN JACINTO BLVD, STE 600, AUSTIN, TX 78701			
				_

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 organiz	ation nor any related	orga	ınıza	ation	cor	nper	nsat	ted any current officer, o	firector, or trustee.	
(A)	(B)	(C)					(D)	(E)	(F)	
Name and Title	Average			Pos				Reportable	Reportable	Estimated
	hours per	(cl	heck	all	hat	арр	ly)	compensation	compensation	amount of
	week	ctor						from	from related	other
	(describe hours for	a a				per		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ste o	nstee		_	ensa	l	(W-2/1099-MISC)	(***27 1099-141100)	organization
	organizations	al tru:	nal tr	ŀ	otoyee	comp		(,		and related
	ın Schedule	Indiwdual trustee or director	Institutional trustee	Officer	Key emptoyee	Highest compensated employee	Former			organizations
	O)	Ĕ	Ë	ö	Ke	훈등	윤			
JEROLD WINOGRAD									_	
PRESIDENT	1.00	X	<u> </u>	Х				0.	0.	0.
JEFFERY LOWRY	1	l			ĺ	Ì.	ļ			•
PRESIDENT-ELECT	1.00	X	ļ	Х	L_		<u> </u>	0.	0.	0.
SCOTT WILDER	1 1 00	٦,		٠,,						0
TREASURER	1.00	X	_	X	<u> </u>		<u> </u>	0.	0.	0.
TAMI MARTIN	1 00	.	ļ	┰╵				0.	0.	0
SECRETARY IKE AKBARI	1.00	X		X	<u> </u>	<u> </u>	┝	<u> </u>	U •	0.
VP AT-LARGE	1.00	X						0.	0.	0.
MICHAEL CLARK	1.00	^		\vdash	├—	├	-	 	U •	0.
VP AT-LARGE	1.00	x			}]	0.	0.	0.
MELANIE BAILEY	1.00	 ^	-		┢┈	├		 		
VP AT-LARGE	1.00	\mathbf{x}						0.	0.	0.
TRACI HALL			 	\vdash	-		 			
VP AT-LARGE	1.00	x					l	0.	0.	0.
ALAN KING			\vdash				1			
VP AT-LARGE	1.00	X	1		ł	l	l	0.	0.	0.
DONNA SCHMIDT										
VP AT-LARGE	1.00	X						0.	0.	0.
SUSAN TINSLEY				П						
VP AT-LARGE	1.00	X						0.	0.	0.
BETH VAN WINKLE		1					1		_ !	_
VP AT-LARGE	1.00	X		L	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
RICK GRAF			1		1	1				
PAST PRESIDENT	1.00	X	<u> </u>			L_		0.	0.	0.
JOSH ALLEN	1	l		Ì	l	ĺ				
PAST PRESIDENT	1.00	X		<u> </u>	_	<u> </u>	_	0.	0.	0.
DAVID HARGROVE	1 00	,,								•
PAST PRESIDENT	1.00	Х		├—	\vdash	_	\vdash	0.	0.	0.
GEORGE B. ALLEN	40.00	1		.				222 020	0.	26 460
EXECUTIVE VICE PRESIDENT	40.00		<u> </u>	X	-	\vdash	\vdash	222,930.	U •	36,468.
WENDY WILSON	40.00					x		132,550.	0.	17,565.
GENERAL COUNSEL	40.00	Щ.	Ц_	<u></u>		ഥ		134,330.	<u> </u>	T1,505.

Part VII Section A. Officers, Directors		mple	oyee			High	est				
(A)	(B)	(B) (C) Average Position						(D) (E)			(F)
Name and title	hours per	(c				app	iy)	Reportable compensation	Reportable compensatio		Estimated amount of
	week	٦				T	<u> </u>	from	from related		other
	(describe hours for	drect		1	Ì	2		the organization	organizations (W-2/1099-MIS		compensation from the
	related	stee or	rustee		l _	ensat		(W-2/1099-MISC)	(** 25 1000 14.110	,	organization
	organizations	ual tru	i puoi	İ	ptoyee	t com	_			ĺ	and related
	in Schedule O)	Individual trustee or directo	institutional trustee	Officer	Кву етрtoyee	Highest compensated employee	Former				organizations
DAVID MINTZ		Ī			 	\vdash		 	-	\neg	
VP GOVERNMENT AFFAIRS	40.00	ĺ	<u> </u>		<u> </u>	X		113,266.		0.	28,983
LYNN FISHER											
VP/GENERAL MANAGER	40.00	<u> </u>	-	<u> </u>	<u> </u>	X	_	101,869.		0.	17,155
			ĺ	ľ	İ				ļ		
			-		1		-	 			
			<u> </u>		_	<u> </u>					
			 			╁	-	 			
			ļ						ļ		
			 _	_	<u> </u>		_				
						Ì					
		\vdash	┢╌	-	┢	+	┢╌		<u> </u>		
1b Sub-total			-			▶.		570,615.		0.	100,171
c Total from continuation sheets to Pa	rt VII, Section A							570,615.		0.	$\frac{0}{100,171}$
d Total (add lines 1b and 1c) Total number of individuals (including t					hau	<u>Φ</u>		_ 	000 in reportabl		100,171
2 Total number of individuals (including to compensation from the organization)		1056	, IISE	su a	DUV	e, w	10 1	received more than \$10	o,000 in reportable	6	
											Yes No
3 Did the organization list any former off			e, ke	y en	nplo	yee,	or	highest compensated e	mployee on		1221 1-1-1 1-1-1 1-1-1 1-1-1 1-1-1 1-1-1 1-1-1 1-1-1 1-1-1 1-1-1 1-1-1 1-1-1 1-1-1 1-1-1 1-1-1 1-1-1 1-1-1 1-1
line 1a? If "Yes," complete Schedule J					-4		م ا				3 X
4 For any individual listed on line 1a, is the and related organizations greater than									the organization		4 X
5 Did any person listed on line 1a receive									idual for services	i	
rendered to the organization? If "Yes,"									<u></u>		5 X
Section B. Independent Contractors											
Complete this table for your five higher	st compensated inc	dep	ende	ent c	cont	racto	ors	that received more than	\$100,000 of con	npens	ation from
the organization. (A)						-		(B)			(C)
Name and busin								Description of	services	C	Compensation
RANDY ERBEN		_				- A	4				100 000
807 BRAZOS ST., STE. 4	02, AUSTII	Ν,	<u>T2</u>	<u>X</u>	78	70.	<u>L</u>	LOBBYING SEF	VICES		102,000
								ļ			
								1			
2 Total number of independent contractor	ors (including but n	ot li	mıte	d to	the	se li	ste	d above) who received i	nore than	٠	
\$100,000 in compensation from the or	ganization >					1				į -	٠.

Statement of Revenue Part VIII (D) (B) (C) (A) Revenue Related or Unrelated Total revenue excluded from business exempt function tax under sections 512, 513, or 514 revenue revenue 1a Federated campaigns 1b b Membership dues Contributions, gifts, gr and other similar amor 1c c Fundraising events d Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above Q Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f Business Code 1715555 1715555 900099 2 a FORMS/PUBLS/MEMBER SER Program Service Revenue 1,067,179. 1067179. CONFERENCE/TRADE SHOW 900099 796,413. 796,413. 900099 c MEMBERSHIP DUES 168,441. 900099 168,441. **EDUCATION SEMINARS** 4,213. 4,213. 541800 MAGAZINE ADVERTISING 2,500.900099 2,500. f All other program service revenue 3754301. 为何 矮小,模型 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 44,251. 44,251 other similar amounts) Income from investment of tax-exempt bond proceeds 4 49,008 49,008. 5 Royalties (i) Real (ii) Personal 45,344 6 a Gross Rents b Less: rental expenses 45,344. c Rental income or (loss) 45,344 d Net rental income or (loss) (II) Other 7 a Gross amount from sales of (i) Securities assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) . 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 77,147 77,147 900099 ADMINISTRATIVE REIMBUR b d All other revenue 77,147. e Total. Add lines 11a-11d 3970051 2760056. 4,213. 1,205,782. Total revenue. See instructions. 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) (D) Fundraising Do not include amounts reported on lines 6b. Program service Total expenses Management and 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 Grants and other assistance to individuals in the U.S. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 261,933 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) 873,123. 7 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 187,162. 9 Other employee benefits 75,884. 10 Payroll taxes Fees for services (non-employees): 11 Management 5,826. b Legal 17,470. C Accounting 154,052. Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees 59,600. Other g 355. Advertising and promotion 12 149,093. 13 Office expenses 48,317 Information technology 14 Royalties 15 79,852. 16 Occupancy 154,184. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 900,565. 19 20 Interest 21 Payments to affiliates 113,254. Depreciation, depletion, and amortization 22 22,620. 23 Insurance Other expenses, Itemize expenses not covered <u>-</u>-24 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 0.) 524,924 FORMS PRODUCTION 60,797. ADMINISTRATIVE COSTS MEMBER RECOGNITION 38,670. STAFF TRAINING & DEVELO 5,453 d DUES & SUBSCRIPTIONS 4,821. 6,640. All other expenses 3,744,595. 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

solicitation

combined educational campaign and fundraising

	rt X	Balance Sheet		· -	1340203 Tage 11
L			(A)		(B)
			Beginning of year		End of year
	1	Cash · non-interest-bearing		1	
	2	Savings and temporary cash investments	1,509,880.	2	1,717,642.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	262,641.	4	309,702.
	5	Receivables from current and former officers, directors, trustees, key			1 - 4 - 4
		employees, and highest compensated employees. Complete Part II		١.	1 A. C. C. C. C. C. C. C. C. C. C. C. C. C.
		of Schedule L	,	5	
	6	Receivables from other disqualified persons (as defined under section	and the second second		anthough a company of federal
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing	· 'u.		
		employers and sponsoring organizations of section 501(c)(9) voluntary	•	-	49
		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
455	8	Inventories for sale or use	49,989.	8	49,963.
•	9	Prepaid expenses and deferred charges	12,856.	9	2,700.
		Land, buildings, and equipment: cost or other	\$5.4.5.1.5.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	, ,	建筑设计层间装置制度
		basis. Complete Part VI of Schedule D 10a 2,208,481		7 :	[원 [호텔 시 문학자
	b	Less: accumulated depreciation 10b 702,763	1,560,704.	10c	1,505,718.
	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	134,602.	15	189,744.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,530,672.	16	3,775,469.
	17	Accounts payable and accrued expenses	236,312.	17	207,398.
	18	Grants payable		18	
	19	Deferred revenue	36,700.	19	52,900.
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,	·电子数据描述。原始	41,0	
abi		highest compensated employees, and disqualified persons. Complete Part II			
=		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	125,000.	25	159,000.
	<u>2</u> 6	Total liabilities. Add lines 17 through 25	398,012.	26	419,298.
		Organizations that follow SFAS 117, check here X and complete		1 1	
S		lines 27 through 29, and lines 33 and 34.			
Š	27	Unrestricted net assets	3,132,660.	27	3,356,171.
sala	28	Temporarily restricted net assets		28	
d E	29	Permanently restricted net assets		29	
Fur		Organizations that do not follow SFAS 117, check here and		797 5	
ō		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	l
18S	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ž	33	Total net assets or fund balances	3,132,660.	33	3,356,171.
	34	Total liabilities and net assets/fund balances	3,530,672.	34	3,775,469.

Form 990 (2010)

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

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

➤ See separate instructions.

2010
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 	tions: Complete Part III.	_		
Name of organization			Empl	oyer identification number
	PARTMENT ASSOCIAT			74-1546205
Part I-A Complete if the org	ganization is exempt unde	r section 501(c)	or is a section 527 o	rganization.
				
1 Provide a description of the organiz	zation's direct and indirect politica	l campaign activities	ın Part IV.	
2 Political expenditures			▶\$	
3 Volunteer hours				
Part I-B Complete if the org	ganization is exempt unde	r section 501(c)	(3).	
1 Enter the amount of any excise tax	incurred by the organization unde	r section 4955	. ►\$	
2 Enter the amount of any excise tax	incurred by organization manager	s under section 4955	5 . ▶\$	
3 If the organization incurred a section	on 4955 tax, did it file Form 4720 fo	or this year?		Yes No
4a Was a correction made?				Yes No
b if "Yes," describe in Part IV.				
Part I-C Complete if the org	ganization is exempt unde	r section 501(c)	, except section 501(c)(3).
1 Enter the amount directly expende	d by the filing organization for sect	ion 527 exempt fund	ction activities > \$	
2 Enter the amount of the filing organ	nization's funds contributed to othe	er organizations for s	section 527	
exempt function activities			. ▶\$	
3 Total exempt function expenditures	s. Add lines 1 and 2. Enter here an	d 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 er	mployer identification number (EIN) of all section 527 p	olitical organizations to which	h the filing organization
made payments. For each organiza	ition listed, enter the amount paid	from the filing organ	ızatıon's funds. Also enter th	ne amount of political
contributions received that were pr	• •		•	ite segregated fund or a
political action committee (PAC). If	additional space is needed, provide	de information in Pari	t IV.	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
		ĺ	filing organization's	contributions received and promptly and directly
			funds. If none, enter -0	delivered to a separate
				political organization.
				If none, enter -0
				<u> </u>
		1		}
 	<u> </u>	<u> </u>	 	
		 	.	
		į.	1	

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

Schedule C (Form 990 or 990-EZ) 2010

Schedule O (Form 990 or 990-EZ) 2010	TEXAS APAR	TMENT ASSOC	IATION	74-1	546205 Page 2					
Part II-A Complete if the org	anization is exer	npt under section	n 501(c)(3) and fil	ed Form 5768						
(election under sec	tion 501(h)).									
A Check 🕨 🖳 ıf the fılıng organiza	tion belongs to an affil	ated group.								
B Check 🕨 📖 if the filing organiza	tion checked box A an	d "limited control" pro	visions apply.							
	ts on Lobbying Exper ditures" means amou	nditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals					
1a Total lobbying expenditures to influ	uence public opinion (g	grass roots lobbying)								
b Total lobbying expenditures to influ	b Total lobbying expenditures to influence a legislative body (direct lobbying)									
c Total lobbying expenditures (add li	nes 1a and 1b)									
d Other exempt purpose expenditure	es									
e Total exempt purpose expenditure										
f Lobbying nontaxable amount. Enter		following table in both	columns.	7	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					
If the amount on line 1e, column (a) o		bying nontaxable amo	ount is:							
Not over \$500,000		the amount on line 1e			ranger (f. 1945). Distriction					
Over \$500,000 but not over \$1,000		0 plus 15% of the exc								
Over \$1,000,000 but not over \$1,5		0 plus 10% of the exc								
Over \$1,500,000 but not over \$17,		0 plus 5% of the exce	ss over \$1,500,000.							
Over \$17,000,000	\$1,000,0	000.								
- Conservation and control for	tor 050/ of line 16			TE 3271	Fam. 1 On 1 - Manual as					
g Grassroots nontaxable amount (erh Subtract line 1g from line 1a. If zer										
i Subtract line 1f from line 1c. If zero			•	<u> </u>						
j If there is an amount other than ze	•	line 1i. did the organiza	ation file Form 4720	· · · · · · · · · · · · · · · · · · ·						
reporting section 4911 tax for this				[Yes No					
	4-Year Ave	eraging Period Under	Section 501(h)							
(Some organiz	ations that made a s	ection 501(h) electior e instructions for line	do not have to com	plete all of the five age 4.)						
	Lobbying Exper	nditures During 4-Yea	r Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total					
2a Lobbying nontaxable amount				225, 7, 7, 1, 1, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7,						
b Lobbying ceiling amount										
(150% of line 2a, column(e))	型的 古樹州 "黄泉"	- 11.5 1. July 1 - 1.17		ा हेर्ने सिंह जाती हैं। 						
	ı									
c Total lobbying expenditures										
d. Creamanta mantavable amount										
d Grassroots nontaxable amount e Grassroots ceiling amount				The sale of the sa						
(150% of line 2d, column (e))	ten en en en en en en en en en en en en e				1					
(1 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
f Grassroots lobbying expenditures				<u> </u>						

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 TEXAS APARTMENT ASSOCIATION 74-154620

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)).

		(;	a)	(t)
		Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or	ļ .	· -	*1 - F	- ~ ·
	local legislation, including any attempt to influence public opinion on a legislative matter	- (1 - 1 - 3 to	
	or referendum, through the use of.			, 1 2- 1	
а	Volunteers?	<u></u>			THE THE
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				** g ** ,
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?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<u> </u>	·		
	Other activities? If "Yes," describe in Part IV	3, 35 = 3, 6,	, page		
-	Total. Add lines 1c through 1i	, in the fight	The state of the s	- fam a	A
	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	3 th email	·	, 'ha, - r- -	
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	00 501/0	(5) or oc	edian	
- ai	till-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	OH 50 H(C)	(5), 01 56	CLION	
				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? I.II-B Complete if the organization is exempt under section 501(c)(4), sect	<u> </u>	3	X	
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes."		ne 3 is a	nswered	
1	Dues, assessments and similar amounts from members		1 1	191	5,413.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures).	icai	1,0°E	}	
_	expenses for which the section 527(f) tax was paid).			21/	5,195.
	Current year		2a	21	3,1936
	Carryover from last year	•	2b 2c	217	5,195.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	-	3		$\frac{3,155}{2,856}$
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex		· 3		-,050.
7	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		[<u>]</u>		
	expenditure next year?	political	4	·	3,339.
5	Taxable amount of lobbying and political expenditures (see instructions)		5	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Par		<u>-</u>			
	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 1. Als	complete	this part
	y 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.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

TEXAS APARTMENT ASSOCIATION

Employer identification number 74-1546205

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	ds or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	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 v	writing that the assets held in donor ad	vised funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	-	pe used only
	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?	,	Yes
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990	, Part IV, line 7
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e	· ——	historically important land area
	Protection of natural habitat	Preservation of a ce	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the for	m 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	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic stru	cture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by	the organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	_
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling o	of
	violations, and enforcement of the conservation easements it	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	s during the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements duri	ing the year > \$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 1	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and exper	nse statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describe	es the organization's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections of		Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh		erance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri		
þ	, ,		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of I	public service, provide the following amounts
	relating to these items:		•
	(i) Revenues included in Form 990, Part VIII, line 1	<u>.</u>	. • \$
	(ii) Assets included in Form 990, Part X	-	▶ \$
2	If the organization received or held works of art, historical treatment		cial gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		▶ \$

	t III Organizations Maintaining C	collections of A			easures. (or Other S	Similar Ass	sets (continu	ed)		
3	Using the organization's acquisition, accessi										
3		ori, and other record	s, criccit e	any or the	ionowing and	it are a orgini			•		
_	(check all that apply):			on or ovel	hange progra	me					
a	Public exhibition	ď			nange progra	11112					
þ	Scholarly research	е		ther							
C	Preservation for future generations			6		!	m	and VIV			
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets										
5	= -					er sımılar as	sets (□ No		
D	to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or										
Pai			ete if the c	organizatio	n answered	"Yes" to For	m 990, Part i	v, line 9, or			
	reported an amount on Form 990, Par				······································						
1a	Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included										
	on Form 990, Part X?						l	l Yes	L No		
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing ta	ble:		1					
							 	Amount			
С	Beginning balance		-				1c				
d	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, Ime	21?					Yes	U No		
<u>b</u>	If "Yes," explain the arrangement in Part XIV.										
Pai	t-V Endowment Funds. Complete	f the organization an	swered "	Yes" to Fo	rm 990, Part			. 1 -			
		(a) Current year	(b) Pri	or year	(c) Two yea	rs back (d)	Three years ba	ck (e) Four ye	ars back		
1a	Beginning of year balance								5		
b	Contributions .								- ' - '		
С	Net investment earnings, gains, and losses						_=== 11UV	E	1 / - 1		
d	Grants or scholarships	!		,		مر ع ب	ilitali i i i i i i i i i i i i i i i i i i	4. □ □ □ □	터 [
е	Other expenditures for facilities					_#		[] 날뿔빛:			
	and programs .						<u>ं भीती बच्च</u>	e herefalled			
f	Administrative expenses					100°	i grida Lizakata na Li	<u>. "Žubalo</u>	Hweet is		
g	End of year balance .					123	语 Http		E V o		
2	Provide the estimated percentage of the year	r end balance held a	as:								
а	Board designated or quasi-endowment		_%								
ь	Permanent endowment	%									
С	Term endowment	%									
За	Are there endowment funds not in the posse	ession of the organiz	ation that	are held a	and administe	ered for the	organization				
	by:								es No		
	(i) unrelated organizations							3a(i)			
	(ii) related organizations							3a(ii)			
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	on Schedu	ule R?				3b			
4	Describe in Part XIV the intended uses of the	•									
Pa	rt VI. Land, Buildings, and Equipm	nent. See Form 990), Part X, I	line 10.							
	Description of investment	(a) Cost or o			t or other	(c) Accu	ımulated	(d) Book v	value		
	•	basis (investi			(other)	depre	ciation				
1a	Land .			50	0,000.	75 E.	- 1 ⁻ 4 1		,000.		
	Buildings				6,253.		4,767.		,486.		
	Leasehold improvements				1,521.		5,207.		,314.		
d	Equipment				37,773.	35	6,805.		,968.		
	Other .				2,934.		5,984.	16	,950.		
	I. Add lines 1a through 1e. (Column (d) must e	egual Form 990. Part	X, colum	n (B), line	10(c))	-	•	1,505	,718.		

Part VII Investments - Other Securities. Se	e Form 990, Part X, line	12		
(a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of valuationst or end-of-year market	
(1) Financial derivatives				
(2) Closely-held equity interests			···· <u>·</u> ··	
(3) Other				
(A)	<u> </u>	<u> </u>		
(B)				
(C)				
(E)			-	
(F)	 	 		
(G)				
(H)				
(1)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶				
Part VIII Investments - Program Related. S	ee Form 990, Part X, line	13.		
(a) Description of investment type	(b) Book value	Cos	(c) Method of valuatio st or end-of-year market	
(1)				
(2)				
(3)	ļ			
(4)		 		
(5)	 	 		
(6) (7)		_		
(8)	 	-		
(9)				
(10)		 		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)	 	新沙田,中部城		
Part: X Other Assets. See Form 990, Part X, line	15.			
	Description			(b) Book value
(1) DEFERRED COMPENSATION				159,000.
(2) DEFERRED EXPENSES (3) ACCRUED INTEREST	·			19,545. 11,199.
		_ 		11,199.
(4)		 		
(5) (6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15.)			189,744.
Part X Other Liabilities. See Form 990, Part X,	line 25.		r	
1. (a) Description of liability		(b) Amount		
(1) Federal income taxes (2) DEFERRED COMPENSATION BEN	UDD TOO			
	EFITS	159,000.		
(3) PAYABLE (4)		133,000.		
(5)				
(6)				
(7)				1. 성원 원기를
(8)				
(9)				
(10)			getting and the grade of the getting of the getti	
(11)		4.50		
Total. (Column (b) must equal Form 990, Part X, col (B) line Fin 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to	≥ 25.)	159,000.		a <u>linatelli</u>

	dule D (Form 990) 2010 TEXAS APARTMENT ASSOCIATIO						546205	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	o Audi	ted Finan	icial 8	statem	ents		000
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1			3,970	
2	Total expenses (Form 990, Part IX, column (A), line 25)		•	2			3,744	
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3				456.
4	Net unrealized gains (losses) on investments			4				,953.
5	Donated services and use of facilities			5				
6	Investment expenses .			6				
7	Prior period adjustments .			7				8.
8	Other (Describe in Part XIV.)			8			.4	0.45
9	Total adjustments (net). Add lines 4 through 8			9				,945.
10 Pai	Excess or (deficit) for the year per audited financial statements. Combine lines 3 art XII Reconciliation of Revenue per Audited Financial Stateme	nd 9 ents W	/ith Reve	nue r	er Ret	urn		,511.
1	Total revenue, gains, and other support per audited financial statements					1	3,968	.098.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		•			+		
– a	Net unrealized gains on investments	2a		(1,9	53.5	4.		
b	Donated services and use of facilities	2b		, -		- }		
c	Recoveries of prior year grants	2c	 			ş, .		
d		2d				•		
	Add lines 2a through 2d				2	 	<1	.953.
3	Subtract line 2e from line 1			•		3	<1 3,970	.051.
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						
c	Add lines 4a and 4b		***			c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		•			5	3,970	,051.
Par	t XIII Reconciliation of Expenses per Audited Financial Statem	nents \	With Expo	enses	per Re	etur		
1	Total expenses and losses per audited financial statements					1	3,744	,595.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				1,	rest ^f -		
а	Donated services and use of facilities	2a	1		蘳			
b	Prior year adjustments	2b			£34	,1 		
¢	Other losses	2c	1			["]		
d	Other (Describe in Part XIV.)	2d						
е	Add lines 2a through 2d				. 2	e		0.
3	Subtract line 2e from line 1					3	3,744	<u>,595.</u>
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	<u> </u>			ė		
b	Other (Describe in Part XIV.)	_4b	<u> </u>			. (5 ⁻¹)		
	Add lines 4a and 4b				4	lc		<u> </u>
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		·		<u> </u>	5	3,744	<u>,595.</u>
	t XIV Supplemental Information							
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part	III, lines	1a and 4, P	art IV, I	ines 1b a	ınd 21	o; Part V, line	4, Part
K, lin	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also com	plete th	is part to pro	ovide a	ny additi	onal i	nformation.	
							· · · · · · · · · · · · · · · · · · ·	
							· · · · · ·	
								

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.

➤ Attach to Form 990. ➤ See separate instructions.

2010

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

Internal Revenue Service

TEXAS APARTMENT ASSOCIATION

Employer identification number

74-1546205

	_		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,		۳.	· ·
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	` `	2.5	-
	First-class or charter travel Housing allowance or residence for personal use			- 1
	Travel for companions Payments for business use of personal residence	۲.	- r, I	1, 1
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			4 -
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)		7.7	-
		1	- 1-1-2- - 1-1-1	
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		-	1. 1. T.
_	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		<u> </u>
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
	and the destative brother, regarding are them.	1, 11	74 L	12.554
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's	:	-L	
•	CEO/Executive Director. Check all that apply.	10/14	5. Y.	the a
	X Compensation committee Written employment contract	7	= 3	
	Independent compensation consultant X Compensation survey or study	* ' → * - : .		100
	Form 990 of other organizations X Approval by the board or compensation committee		45,	
	Tom 555 of Suiter organizations) - -	F. 5	S.T.
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing		- (157
•	organization or a related organization:		. 92	222-5
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a	' '	X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
Ū	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	排		2 5 2 7
	11		. EE	E = 1
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.	14 F 33	표.	
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			1 Z
-	contingent on the revenues of:	5.41" - 1.41	=-j=-F	
а	The organization?	5a		
	Any related organization?	5b		
_	If "Yes" to line 5a or 5b, describe in Part III.	17 F	-75-35-4 =5-15	
6		,12 ' ji ,1 ' et		- :
•	contingent on the net earnings of:	1.7	12.	
а	The organization?	6a		
	Any related organization?	6b		
-	If "Yes" to line 6a or 6b, describe in Part III.		En 1 m	_ ਪੁਟੂ },
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	` `		"1"
-	not described in lines 5 and 6? If "Yes," describe in Part III	7		<u></u>
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
-	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
-	Regulations section 53 4958-6(c)?	9		

Schedule J (Form 990) 2010

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

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 V	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	reported in prior Form 990 or Form 990-EZ
Maile a andoan	€ :	197,93	25,000.	0	0	36,468.	259,398.	0
1 GEORGE B. ALLEN		126,150.	4,000.	2,400.	0	17,565.	150,115.	0
2 WENDY WILSON	<u> </u>		0	0	0	0	0	0
	ε							
3	▣							
	≘_							
4	ᆗ							
	Ξ							
5	흳							
	3							
9	Ξ							
	Ξ							
	≘							
	≘							
8	(ii)							
	(3)							
6	(ii)							
	Ξ							
10	(E)							
	Ξ							
11	≞							
	<u>e</u>							
12	ᆗ							
	Ξ							
13	⊞							
	Ξ							
14	(11)							
	Ξ							
15	<u>(ii)</u>							
	Ξ							
16	(ii)							
							Schedul	Schedule J (Form 990) 2010

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.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service 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

TEXAS APARTMENT ASSOCIATION

Employer identification number 74-1546205

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

EDUCATIONAL PROGRAMS - THE ASSOCIATION HOSTS MANY EDUCATIONAL PROGRAMS

FOR ITS MEMBERS INCLUDING LEGAL & LEASING SEMINARS, CONTINUING

EDUCATION, AND CERTIFICATION PROGRAMS.

FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS.

MEMBERS CAN BE ANY PERSON, FIRM, OR CORPORATION WHO IS A MEMBER IN GOOD

STANDING OF ANY AFFILIATED LOCAL ASSOCIATION. AFFILIATED LOCAL

ASSOCIATIONS ARE ANY ORGANIZED GROUP OF MULTIHOUSING OWNERS AND OPERATORS,

EXCLUDING OWNER-OCCUPIED HOMEOWNERS ORGANIZATIONS, IN THE STATE OF TEXAS

WORKING FOR THE SAME PURPOSES AND OBJECTIVES AS TAA.

FORM 990, PART VI, SECTION A, LINE 7A: EACH LOCAL ASSOCIATION IS ENTITLED TO AT LEAST TWO VOTING DIRECTORS, DEPENDING ON THE NUMBER OF MEMBERS IN THE ASSOCIATION. IN ADDITION, EACH LOCAL ASSOCIATION IS ENTITLED TO A NUMBER OF ALTERNATE DIRECTORS, DEPENDING ON THE NUMBER OF VOTING DIRECTORS

ALLOWED. ALTERNATE DIRECTORS MAY REPRESENT ANY OF THE VOTING DIRECTORS AT A MEETING WHERE THE VOTING DIRECTOR IS NOT PRESENT. OFFICERS ARE ELECTED BY MAJORITY VOTE OF THE BOARD MEMBERS PRESENT AT BOARD MEETING. THE BOARD OF DIRECTORS ELECTS THE EXECUTIVE COMMITTEE (GOVERNING BOARD).

FORM 990, PART VI, SECTION A, LINE 7B: THE BOARD OF DIRECTORS APPROVES BYLAW CHANGES, BUDGETS, LEASE FORM CHANGES AND OTHER SPECIFIC ISSUES.

FORM 990, PART VI, SECTION B, LINE 11: THE TAX RETURN IS PRESENTED TO THE

EXECUTIVE COMMITTEE (GOVERNING BODY) FOR REVIEW, WHICH THEN VOTES TO

PRIOR PERIOD ADJUSTMENTS:

TOTAL TO FORM 990, PART XI, LINE 5

8.

-1,945.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

2010 Open to Public Inspection

Employer identification number 74-1546205

Direct controlling entity

e

foreign country)

of disregarded entity

OMB No 1545-0047

End-of-year assets Total income ਭ Part I I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Legal domicile (state or Primary activity TEXAS APARTMENT ASSOCIATION Name, address, and EIN Name of the organization

| Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt | Part II | Organizations during the tax year.)

organizations during the tax year.							
(a)	(q)	(0)	Đ)	(e)	E	(g) Section 5 (2(b)(13)) 2(b)(13)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public chanty	ξ	contro	lled
of related organization		foreign country)	section	status (if section	entity	entit	17
,				501(c)(3))		Yes	No
TEXAS APARTMENT ASSOCIATION EDUCATION							
FOUNDATION - 74-3021477, 1011 SAN JACINTO							;
BLVD, AUSTIN, TX 78701	EDUCATION	TEXAS	501(C)(3)	LINE 9			×
TEXAS APARTMENT ASSOCIATION PAC - 74-2424192							
1011 SAN JACINTO BLVD	INDIVIUAL POLITICAL	_					;
AUSTIN, TX 78701	CONTRIBUTIONS	TEXAS	527				×
					ļ		

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

Schedule R (Form 990) 2010

032161 12-21-10 LHA

74-1546205 Page 2

Schedule R (Form 990) 2010 TEXAS APARTMENT ASSOCIATION

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

Seneral or Percentage managing ownership ड Yes 8 Code V-UBI amount in box 20 of Schedule 4 K-1 (Form 1065) Ξ ate allocations? Disproportion-Yes No ϵ Share of end-of-year assets <u>(6</u> Share of total income Ξ Predominant income (related, unrelated, excluded from tax under sections 512-514) **e** (d)
Direct controlling
entity (c)
Legal
domicile
(state or
foreign Primary activity 9 Name, address, and EIN of related organization

| Part IV | Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

organizations treated as a corporation of trust during the tax year.)	year.)						
(a)	(q)	(၁)	(p)	(e)	E		Œ
Name, address, and EIN of related organization	Primary activity	Legat domicile (state or foreign country)	Direct controlling Type of entity (C corp., S corp, or trust)	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership
APT LEASE FORMS, INC - 74-2798766			TEXAS				
1011 SAN JACINTO BLVD			APARTMENT				
AUSTIN, TX 78701	COMPUTER LEASE FORMS	TX	ASSOCIATION	C CORP	21,850.	29,501.	100.00%
					-		
			-				
				ļ			
					-		

Schedule R (Form 990) 2010

Page 3

Yes

19

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4 9

Schedule R (Form 990) 2010 TEXAS APARTMENT ASSOCIATION

Part V:4 Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36)

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

- a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
- - b Gift, grant, or capital contribution to other organization(s)
- c Gift, grant, or capital contribution from other organization(s)
 - d Loans or loan guarantees to or for other organization(s)
 - Loans or loan guarantees by other organization(s)
- Sale of assets to other organization(s)
- g Purchase of assets from other organization(s)
- h Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- j Lease of facilities, equipment, or other assets from other organization(s)
- k Performance of services or membership or fundraising solicitations for other organization(s)
- l Performance of services or membership or fundraising solicitations by other organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets
- Sharing of paid employees
- Reimbursement paid to other organization for expenses 0

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- Reimbursement paid by other organization for expenses
- q Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

	ered relationships and transaction thresholds.	(d)	Method of determining amount involved	47,425.ALLOCATION OF COST	16,350.ACTUAL CASH	5,762.ACTUAL CASH	5,528.ACTUAL CASH	54,817.ACTUAL CASH	
	this line, including cover	(2)	Amount involved	47,42	16,35	5,76	5,52	54,81	
	who must complete t	(Q)	Transaction type (a-r)	Ж	ď	0	0	<u>с</u> ч	
(a) compared to be be below a series of the compared to the co	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	(a)	Name of other organization	TEXAS APARTMENT ASSOCIATION EDUCATION (1) FOUNDATION	(2) APT LEASE FORMS, INC	(3) FOUNDATION	(4) TEXAS APARTMENT ASSOCIATION PAC	TEXAS APARTMENT ASSOCIATION EDUCATION (5) FOUNDATION	

74-1546205

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Schedule R (Form 990) 2010 TEXAS APARTMENT ASSOCIATION

Part VI | Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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

(a)	(q)	1	(p)			(6)	(L)
Name, address, and EIN of entity	Primary activity	eji ga	Are all partners section 501(c)(3) organizations?	Share of end-of- year assets	Dispropor- tionate allocations?	Code V-UBI amount in box 20 of Schedille K-1	General or , managing partner?
		country)	Yes No			(Form 1065)	Yes No
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						Schedule R (Form 990) 2010	990) 2010

Schedule R	(Form 990) 2010			ARTMENT	ASSO	CIATION	Γ		74-154620)5 Page 5
Part VII										
	Complete this part to	provide add	itional info	rmation for r	esponses to	questions o	n Schedule R (s	ee instructio	ons).	
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