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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2010

Open to Public Inspection

A Fort	he 20	010 са	lendar year, or tax year begin	ning 10-01-2010 and ending 09-30-20)11			
B Check	ıf apı	plicable	C Name of organization MINNESOTA ASSOCIATION OF RE	ALTORS		D Empl	oyer	identification number
Addre	ss cha	ange	Doing Business As			41-6	039	154
Name	chan	ge	Doing Business As			E Telep	hone	number
Initial	return	n		ıf maıl ıs not delivered to street address)	Room/suite	(952)91	2-2664
Temı	nated		5750 LINCOLN DRIVE					
Amen	ded re	eturn	City or town, state or country, ar EDINA, MN 55436	nd ZIP + 4	<u> </u>	— G Gross	recei	ots \$ 4,493,918
Applic	ation į	pending	EDINA, PIN 55450					
			F Name and address of p	orincipal officer	H(a) Is th	ıs a group return	for affil	ıates?
			CHRISTOPHER GALLER 5750 LINCOLN DRIVE					
			EDINA, MN 55436			all affiliates ind No." attach		Yes No t (see instructions)
						oup exempt		
I lax-e	exemp	ot status	501(c)(3) > 501(c) (6)	◀ (insert no)				
J Web	site:	: ► WW	W MNREALTOR COM					
K Form (of orga	anızatıon	Corporation Trust Associa	ation Other 🕨	L Year of	formation 19		M State of legal domicile
Part		Sum	mary					MN
Pall			-	sion or most significant activities				
		,	3	SION OF MOST SIGNIFICANT ACTIVITIES OURCE FOR REAL ESTATE INFORMA	TION AND P	ROFESSIO	NAL	SERVICES
<u>2</u>	Ξ							
屋	_							
Activities & Governance	2 C	heck th	nis box 🛏 if the organization	discontinued its operations or dispose	d of more than	25% of its	neta	assets
উ	3 N	umber	of voting members of the gove	erning body (Part VI, line 1a)			3	63
න් ගු	4 N	umber	of independent voting membe	rs of the governing body (Part VI, line 1	b)	. [4	63
	5 T	otal nu	mber of individuals employed	ın calendar year 2010 (Part V , lıne 2a)			5	14
ਓ	6 T	otal nu	mber of volunteers (estimate	ıfnecessary)			6	360
4				n Part VIII, column (C), line 12			7a	200
	ЬN	et unre	lated business taxable incom	e from Form 990-T, line 34			7b	0
					Pr	ior Year		Current Year
<u>o</u>	8		butions and grants (Part VIII				0	0
Revenu	9			, line 2g)		2,876,9	-	2,575,290
å ,	.0 .1		,	mn (A), lines 3, 4, and 7d)	•	84,2 55,8		79,520 39,594
	.2		, , ,	11 (must equal Part VIII, column (A), l	ıne	33,0	310	39,394
			_	<u> </u>		3,016,9	975	2,694,404
	.3			art IX, column (A), lines 1–3)		8,6	528	2,165
	.4			rt IX, column (A), line 4)	_		0	0
82 1	.5	Salarıe 10)	es, other compensation, emplo	oyee benefits (Part IX, column (A), lines	5 5 -	1,107,9	923	1,255,838
Expenses	.6a	•	sional fundraising fees (Part I	X, column (A), line 11e)			0	0
훘	ь	Total fu	ndraising expenses (Part IX, column	(D), line 25) ▶0				
	.7), lines 11a-11d, 11f-24f)		1,741,6	590	1,485,071
1	.8	Total	expenses Add lines 13-17 (r	nust equal Part IX, column (A), line 25)		2,858,2	241	2,743,074
	.9	Reven	ue less expenses Subtract lır	ne 18 from line 12		158,	734	-48,670
ው ው ው					Beginni	ing of Curre	nt	End of Year
Net Assets or Fund Balances	20	Totala	assets (Part X line 16)			Year 5,120,9	981	5,005,366
A B 2	21					176,8	_	142,780
호를 2	22			ct line 21 from line 20		4,944,:	-	4,862,586
Part	П		ature Block			, ,		, ,
Under p	enalti Ige ar	ies of po	erjury, I declare that I have exan	nined this return, including accompanying te. Declaration of preparer (other than offi	schedules and cer) is based o	statements, n all informa	and ition	to the best of my of which preparer has any
	T	****				2012-03-01		
Sign			iture of officer			Date		
Here		Туре	STOPHER GALLER CHIEF EXECUTIVE or print name and title	E OFFICER		Lac		
		Print/Type preparer's		Preparer's signature JOHN TAUER	Date	Check if sel employed		PTIN
Paid -	F	<u> </u>	me CLIFTONLARSONALLEN LLP	1	·	1	•	Firm's EIN
Prepare		ırm's add	ress • 220 SOUTH SIXTH STREET S	SUITE 300				Phone no (612) 376-
Use On	ııy		MINNEAPOLIS, MN 55402					4500

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

	330 (2						i age 🚣
Par	t IIII			e Accomplishments se to any question in this Pa	art III		. [고
1	Briefl	y describe the org	janization's mission				
ASSI MEM	ST ITS BERS T	MEMBERS IN SI	ERVING THE PUBLIC SINESS WITHOUT U	WITH A HIGH DEGREE OF	IVERING PROGRAMS, SERVIO PROFESSIONALISM, BY PRO STRAINT AND TO PROMOTE	TECTING THE RI	GHTS OF
2				program services during th	e year which were not listed on	┌ Yes ┌ No	
	If "Yes	s," describe these	new services on Sche	dule O			
3	servic	es?		ke significant changes in ho	w it conducts, any program · · · · · · · · · ·	┌ Yes ┌ No	
4	Descr Section	ibe the exempt pu on 501(c)(3) and !	urpose achievements fo 501(c)(4) organization	or each of the organization's	three largest program services rusts are required to report the ogram service reported		nd
	(Code	:) (Expenses \$	ıncludıng grants of	\$) (Revenue \$	<u> </u>)
	SERVI TRANS	CES PROVIDED TO MI SACTION FORMS THA	EMBERS, THE ASSOCIATION F GIVE CONSISTENCY FOR A	1 CONDUCTED PEER REVIEWS (ALL OF THE DIFFERENT TRANSACT	000 MEMBERS FOR THE YEAR ENDED S DF COMPLAINTS AGAINST REALTORS, 2 TONS CONDUCTED BY REALTORS, 3 RANSACTIONS, AND4 PROVIDED CON	PROVIDED REAL ESTA PROVIDED BROKERS W	ATE ITH THE LEGAL
4b	(Code	<u> </u>) (Expenses \$	ıncludıng grants of	\$) (Revenue \$	<u> </u>)
		LATIVE IMPACT DAY T MEMBERS	THE ASSOCIATION RECEIVED	D UPDATES ON LEGISLATION CONC	CERNING REAL ESTATE AND VISITED W	TTH LEGISLATORS IN S	UPPORT OF
4c	(Code	:) (Expenses \$	ıncludıng grants of	\$) (Revenue \$:)
4d	Othe	r program service	es (Describe in Schedi	ule O)			
	(Exp	enses \$	ıncludı	ing grants of \$) (Revenue \$)	
4e	Tota	l program service	evnenses i -\$				

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2		No
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		No
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	Yes	
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
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		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
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.	1.1f	Yes	
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		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b		No
15	organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
	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 U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		No
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		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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Par	t IV Checklist of Required Schedules (continued)			
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 1^7 If "Yes," complete Schedule I, Parts I and II	21		Νο
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
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-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		No
	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> " <i>Yes,"</i> complete Schedule L, Part IV	28b		No
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	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			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V	Statements	Regarding	Other	TRS Filings	and Tax	Compliance

Form	990 (2010)			Page 5
Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	Check it 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		103	110
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable]		
b	1b			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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	4		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	163	
3а	Did the organization have unrelated business gross income of \$1,000 or more during the			NI -
ь	year?	3a 3b		No
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		No
Ь	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N o
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
c-	Does the committee have a moved areas receipts that are named by avertage than \$1.00,000 and did the	5c		N
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6Ь		
7	Organizations that may receive deductible contributions under section 170(c).	"		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
b	services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
الم	file Form 8282?	7c		
u	If tes, indicate the number of Forms 6262 filed during the year	1		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
h	required?	7g		
	Form 1098-C?	7h		
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		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a 9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
17-		12-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the	12a		
	year 12b	4		
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?			
а	Note. See the instructions for additional information the organization must report on Schedule O	13a		
			<u> </u>	
Ь	Enter the amount of reserves the organization is required to maintain by the states			
c	Enter the amount of reserves on hand	1		
	13c			,
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		N o
	1. 165, has it hed a form 726 to report these payments. It ino, provide an explanation in Schedule O			(2010)

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

Charle of Cabadula O	contains a response to an	augetien in this Dart I/I					1.4
Check if Schedule O	contains a response to any	question in this Part VI					

Se	ction 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			
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 officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct			
4	supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was	3		No
7	filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the			
	year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
	vende code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	1,10
	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	100	No
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	100		
	Thus the organization provided a copy of this form 550 to an inembers of its governing body before ining the form.	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	4.01	.,	
c	to conflicts?	12b	Yes	
-	describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		Νo
	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 taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	ection C. Disclosure	_00		l
17	List the States with which a copy of this Form 990 is required to be filed.			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
_5	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of			

- 19 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 See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► PEG ANDERSON 5750 LINCOLN DRIVE

EDINA, MN 55436 (952) 912-2664

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees 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 organ		elated o	rgan	ızatı	on c	omper	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) A verage hours	Posi		C) (che	cka			(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See Additional Data Table										
-										
			<u> </u>							

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours	1	tion ((che		11		(D) Reportable compensation from the	(E) Reportable compensation from related	n ,	(F) Estima amount o	ated fother
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)		from s organizat relat organiza	the ion and ed
See A	Additional Data Table												
							1						
							1						
							+						
							+						
							+						
							1						
	Cub Tatal							<u> </u>					
1b c	Sub-Total				•	•	· ·						
d	Total (add lines 1b and 1c) .							-	293,485		0		70,080
2	Total number of individuals (incl \$100,000 in reportable compen					ted	above)) who	received more tha	n	,		
												Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sca					eye •	mploy •	ee,o	r highest compens	ated employee	3		No
4	For any individual listed on line organization and related organiz	ations greater t									4	Yes	
5	Did any person listed on line 1a services rendered to the organiz	receive or accr									5	1 e s	No
S	ection B. Independent Con	tractors											
1	Complete this table for your five \$100,000 of compensation from	highest compe		ndep	ende	ent c	ontra	tors	that received more	than			

(A) Name and business address	(B) Description of services	(C) Compensation
BRINGMETHENEWSCOM 110 N FIFTH STREET 520 MINNEAPOLIS, MN 55403	ADVERTISING	257,000
THOMSEN NYBECK PA 3600 AMERICAN BLVD 400 BLOOMINGTON, MN 55431	LEGAL SERVICES	189,917
MEDICA NW 7958 BOX 1450 MINNEAPOLIS, MN 55485	INSURANCE	148,806
MH PRINTING 6585 EDENVALE BLVD STE 110 EDEN PRAIRIE, MN 55346	PRINTING SERVICES	130,432
INTERDYN 2227 W HWY 36 300 ROSEVILLE, MN 55113	DATABASE/WEBSITE MANAGEMENT	110,471
2 Total number of independent contractors (including but not limited to those listed above \$100,000 in compensation from the organization ►5) who received more than	

	990 (2010)				Pa	age 9
Part V	VIII Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or
Contributions, gifts, grants and other similar amounts	1a Federated campaigns					514
Program Service Revenue	2a MEMBERSHIP DUES b EDUCATION/SERVICES c TOWNHALL MEETINGS d LEGISLATIVE e f All other program service revenue g Total. Add lines 2a-2f	900099 900099 900099 900099	2,306,746 147,762 97,263 23,519 2,575,290	147,762 97,263 23,519		
	Investment income (including dividends, interest and other similar amounts). Income from investment of tax-exempt bond proceeds. Royalties. (i) Real Ga Gross Rents Less rental expenses Rental income or (loss)	(II) Personal	85,295 10,867			85,295 10,867
Other Revenue	(i) Securities 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) Net gain or (loss) 8a Gross income from fundraising events (not including \$	(II) Other 200 Business Code 900099	-5,775 200 28,527		200	-5,775 28,527
	b c d All other revenue e Total. Add lines 11a-11d		28,527		200	118,914
			2,094,404	2,575,290	orm 990 (2	

	990 (2010)				Page 10
Par	Statement of Functional Expenses				
	Section $501(c)(3)$ and $501(c)(4)$ organizations mus II other organizations must complete column (A) but are not required to c			(D)	
	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	2,165		усполагодрогосо	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	,			
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	368,089			_
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	654,386			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	35,364			
9	Other employee benefits	123,105			
10	Payroll taxes	74,894			
а	Fees for services (non-employees) Management	,			
ь	Legal	135,115			
c	Accounting	36,815			
d	Lobbying	33,525			
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	37,822			
12	Advertising and promotion	266,249			
13	Office expenses	279,724			
14	Information technology	4,808			
15	Royalties	.,,,,,			
16	Occupancy	26,901			
17	Travel	180,585			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	100,303			
19	Conferences, conventions, and meetings	131,539			_
20	Interest	6,246			
21	Payments to affiliates	, , , ,			
22	Depreciation, depletion, and amortization	95,057			
23	Insurance	14,322			
24	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)				
а	TECH/LEGAL HELPLINE	84,807			
b	LOCAL ASSN EDUCATION	54,240			
С	LOCAL PAC REIMBURSEMENT	30,000			
d	ISSUES MOBIL FUND	24,263			
е	RESEARCH MATERIALS	23,621			
f	All other expenses	52,957			
25	Total functional expenses. Add lines 1 through 24f	2,743,074			
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	English and the second of the				

Part X Balance Sheet (A) (B) Beginning of year End of year 1,766,089 501,383 1 Cash—non-interest-bearing 1,600,749 2 1.685.604 2 Savings and temporary cash investments 3 3 53,887 4 71,578 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 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) **A**ssets 7 8 8 Prepaid expenses and deferred charges 48,540 9 40,859 10a Land, buildings, and equipment cost or other basis Complete 1.468.873 10a Part VI of Schedule D 10b 742,778 ь Less accumulated depreciation 753,277 10c 726.095 898.439 11 11 1.979.847 12 Investments—other securities See Part IV, line 11 12 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 16 5,120,981 16 5,005,366 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 114,156 17 103.420 17 Accounts payable and accrued expenses . 18 18 22.100 6.853 19 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 40.614 23 23 32.507 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities Complete Part X of Schedule D 26 176.870 26 142,780 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 4.944.111 4,862,586 Temporarily restricted net assets 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 4,944,111 33 4,862,586 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 5.120.981 5.005.366

Ра	Check if Schedule O contains a response to any question in this Part XI			. I	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,6	594,40
2	Total expenses (must equal Part IX, column (A), line 25)	2			743,074
3	Revenue less expenses Subtract line 2 from line 1	3			-48,670
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,9	944,11
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-	-32,85
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		4,8	362,580
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c		No
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separated basis	sued			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		Νο
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b		

Software ID: Software Version:

EIN: 41-6039154

Name: MINNESOTA ASSOCIATION OF REALTORS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and I	ndepend	ent Co	ntr	acto	ors					
(A) Name and Title	(B) Average hours	Posi t	tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
JUNE WIENER PRESIDENT	1 00	Х		х				0	0	0
JAMES CORMIER PRESIDENT-ELECT	1 00	Х		х				0	0	0
RODNEY HELM TREASURER	1 00	Х		х				0	0	0
RUSSELL PORTELE PAST-PRESIDENT	1 00	Х		х				0	0	0
REBECCA BLECKER DIRECTOR	1 00	Х						0	0	0
DARYL BRAHAM DIRECTOR	1 00	Х						0	0	0
CHERYL BRELLENTHIN DIRECTOR	1 00	Х						0	0	0
MICHAEL BRENNAN DIRECTOR	1 00	Х						0	0	0
JEFFREY BYRD DIRECTOR	1 00	Х						0	0	0
MARK CHRISTOPHERSON DIRECTOR	1 00	Х						0	0	0
HOLLY CONNAKER DIRECTOR	1 00	Х						0	0	0
DAVID COSTELLO DIRECTOR	1 00	Х						0	0	0
PHETSAMONE EKHOLM DIRECTOR	1 00	Х						0	0	0
JAMES EMOND DIRECTOR	1 00	Х						0	0	0
LYNN FOULKE DIRECTOR	1 00	Х						0	0	0
KEVIN GOEDKER DIRECTOR	1 00	Х						0	0	0
EMILY GREEN DIRECTOR	1 00	Х						0	0	0
DEBRA GREENE DIRECTOR	1 00	Х						0	0	0
RUTH ANN HALVORSON DIRECTOR	1 00	Х						0	0	0
RYAN HANSON DIRECTOR	1 00	Х						0	0	0
GREGG HARTOS DIRECTOR	1 00	Х						0	0	0
JAN HETTWER-DUMMER DIRECTOR	1 00	Х						0	0	0
MICHAEL HOFFMAN DIRECTOR	1 00	Х						0	0	0
CHARLES HOLLAND DIRECTOR	1 00	Х						0	0	0
SHEILA HOLLEY DIRECTOR	1 00	Х						0	0	0
<u>r</u>				•						

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, an	d Independ	dent C	ont	ract	tors	<u> </u>				
(A) Name and Title	(B) Average hours per		tion (that a	che		_		(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
MIKE HUNSTAD DIRECTOR	1 00	x						0	0	0
JOANNA HVEZDA DIRECTOR	1 00	Х						0	0	0
PAULA JACKSON DIRECTOR	1 00	х						0	0	0
DARLENE JOHNSON DIRECTOR	1 00	х						0	0	0
JIMMY KAISER DIRECTOR	1 00	Х						0	0	0
KEVIN KNUDSEN DIRECTOR	1 00	х						0	0	0
JOE KNUTSON DIRECTOR	1 00	х						0	0	0
MELISSA KORNOVICH DIRECTOR	1 00	х						0	0	0
CONNIE KRUM DIRECTOR	1 00	Х						0	0	0
ROGER KUEHN DIRECTOR	1 00	х						0	0	0
LYNN LEEGARD DIRECTOR	1 00	Х						0	0	0
MARY LINDGREN DIRECTOR	1 00	Х						0	0	0
MARK MASON DIRECTOR	1 00	Х						0	0	0
ANTHONY MAURER DIRECTOR	1 00	Х						0	0	0
DAVID MAY DIRECTOR	1 00	Х						0	0	0
CARINA MCCALL SCHAFER DIRECTOR	1 00	Х						0	0	0
GREG MCMILLAN DIRECTOR	1 00	Х						0	0	0
ROB MEHTA DIRECTOR	1 00	Х						0	0	0
JANE O'LEARY DIRECTOR	1 00	Х						0	0	0
RICHARD PAULSEN DIRECTOR	1 00	Х						0	0	0
ROBERT PELTIER DIRECTOR	1 00	х						0	0	0
ROBIN PETERSON DIRECTOR	1 00	Х						0	0	0
JOHN PICHE DIRECTOR	1 00	Х						0	0	0
ANGELO POALETTI DIRECTOR	1 00	Х						0	0	0
THOMAS REHMAN DIRECTOR	1 00	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours	Posi t	((tion (hat a	che)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
KIM REICHEL DIRECTOR	1 00	Х						0	0	0
JOSEPH REIS JR DIRECTOR	1 00	Х						0	0	0
AUDREY RICHARDSON DIRECTOR	1 00	Х						0	0	0
DEBRA RICHMOND-JOHNSON DIRECTOR	1 00	Х						0	0	0
LEONARD SARVELA DIRECTOR	1 00	Х						0	0	0
JULIE SATHERS DIRECTOR	1 00	Х						0	0	0
JAMES STANTON DIRECTOR	1 00	Х						0	0	0
JERRY TEESON DIRECTOR	1 00	Х						0	0	0
RICHARD TUCKER DIRECTOR	1 00	Х						0	0	0
DANIEL WAGNER DIRECTOR	1 00	Х						0	0	0
CASSANDRA WESLEY PRESIDENT	1 00	Х						0	0	0
BUTCH ZELINSKY DIRECTOR	1 00	Х						0	0	0
PATRICIA ZUZEK DIRECTOR	1 00	Х						0	0	0
CHRISTOPHER GALLER CHIEF EXECUTIVE OFFICER	60 00			Х				160,600	0	31,284
LINDA MODLINSKI SENIOR VICE PRESIDENT	65 00			х				132,885	0	38,796

DLN: 93493061025072

OMB No 1545-0047

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.

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),

- ◆ 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

Na	ection 501(c)(4), (5), or (6) organ me of the organization	·		Employe	rıden	tification number
MIN	NNESOTA ASSOCIATION OF REALTORS			41-6039	9154	
ar	t I-A Complete if the or	ganization is exempt und	er section 501(organization.
1	Provide a description of the oi	ganızatıon's dırect and ındırect po	olitical campaign act	tivities in Part IV		
2	Political expenditures		. 5	•	•	\$
3	V olunteer hours					
ar	t I-B Complete if the or	ganization is exempt und	er section 501(c)(3).		
1.		e tax incurred by the organization			►	\$
2	Enter the amount of any excis	e tax incurred by organization ma	nagers under sectio	n 4955	•	\$
3	If the organization incurred a	section 4955 tax, did it file Form	4720 for this year?			┌ Yes ┌ No
4a	Was a correction made?					┌ Yes ┌ No
b	If "Yes," describe in Part IV					
ar	t I-C Complete if the or	ganization is exempt und	er section 501(c) except section	า 501	L(c)(3).
1	Enter the amount directly exp	ended by the filing organization fo	r section 527 exem	pt function activities	•	\$
2		organization's funds contributed t	o other organization	s for section 527	.	\$
	exempt funtion activities					т —
3	·	itures Add lines 1 and 2 Enter he	ere and on Form 112	20-POL, line 17b	F	¢
4	Total exempt function expend Did the filing organization file Enter the names, addresses a		r (EIN) of all sectior	ı 527 political organiz		
3 4 5	Total exempt function expend Did the filing organization file Enter the names, addresses a organization made payments amount of political contribution	Form 1120-POL for this year? nd employer identification numbe	r (EIN) of all sectior r the amount paid fro nd directly delivered	n 527 political organiz om the filing organizat to a separate politica	ion's f il orga	s to which the filing funds Also enter the nization, such as a
4	Total exempt function expend Did the filing organization file Enter the names, addresses a organization made payments amount of political contribution	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly ar	r (EIN) of all sectior r the amount paid fro nd directly delivered	n 527 political organiz om the filing organizat to a separate politica	ion's f il orga format from n's	to which the filing funds Also enter the nization, such as a tion in Part IV (e) A mount of political contributions receive and promptly and directly delivered to a separate political
1	Total exempt function expend Did the filing organization file Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered i If additional space	n 527 political organization the filing organization a separate politica is needed, provide information (d) A mount paid filing organization	ion's f il orga format from n's	to which the filing funds Also enter the nization, such as a tion in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
1	Total exempt function expend Did the filing organization file Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered i If additional space	n 527 political organization the filing organization a separate politica is needed, provide information (d) A mount paid filing organization	ion's f il orga format from n's	to which the filing funds Also enter the nization, such as a tion in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
1	Total exempt function expend Did the filing organization file Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered i If additional space	n 527 political organization the filing organization a separate politica is needed, provide information (d) A mount paid filing organization	ion's f il orga format from n's	to which the filing funds Also enter the nization, such as a tion in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
1	Total exempt function expend Did the filing organization file Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered i If additional space	n 527 political organization the filing organization a separate politica is needed, provide information (d) A mount paid filing organization	ion's f il orga format from n's	to which the filing funds Also enter the nization, such as a tion in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Total exempt function expend Did the filing organization file Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered i If additional space	n 527 political organization the filing organization a separate politica is needed, provide information (d) A mount paid filing organization	ion's f il orga format from n's	to which the filing funds Also enter the nization, such as a tion in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Total exempt function expend Did the filing organization file Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered i If additional space	n 527 political organization the filing organization a separate politica is needed, provide information (d) A mount paid filing organization	ion's f il orga format from n's	to which the filing funds Also enter the nization, such as a tion in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Total exempt function expend Did the filing organization file Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered i If additional space	n 527 political organization the filing organization a separate politica is needed, provide information (d) A mount paid filing organization	ion's f il orga format from n's	to which the filing funds Also enter the nization, such as a tion in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,

Sc	hedule C (Form 990 or 990-EZ) 2010						Page 2
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c)(3) and fi	led Form 5768	
A B	Check If the filing organization belongs to a Check If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	from th	e following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expendit	ures During 4	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

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)).

legislation, ii through the i a Volunteers?	ar, did the filing organization attempt to influence foreign, national, state or local cluding any attempt to influence public opinion on a legislative matter or referendum, see of management (include compensation in expenses reported on lines 1c through 1i)? isements? iembers, legislators, or the public? or published or broadcast statements? er organizations for lobbying purposes? it with legislators, their staffs, government officials, or a legislative body?	Yes	No No	Aı	(b) mount	:
legislation, ii through the i a Volunteers?	recluding any attempt to influence public opinion on a legislative matter or referendum, se of management (include compensation in expenses reported on lines 1c through 1i)? isements? iembers, legislators, or the public? or published or broadcast statements? er organizations for lobbying purposes?	Yes	No	Aı	mount	:
legislation, ii through the i a Volunteers?	recluding any attempt to influence public opinion on a legislative matter or referendum, se of management (include compensation in expenses reported on lines 1c through 1i)? isements? iembers, legislators, or the public? or published or broadcast statements? er organizations for lobbying purposes?					
	or published or broadcast statements? er organizations for lobbying purposes?					
	or published or broadcast statements? er organizations for lobbying purposes?					
	or published or broadcast statements? er organizations for lobbying purposes?					
	or published or broadcast statements? er organizations for lobbying purposes?					
_	er organizations for lobbying purposes?					—
•						
						—
_	Instrations, seminars, conventions, speeches, lectures, or any similar means?					
•	Other activities? If "Yes," describe in Part IV					—
j Total lines 1	·					
-	ities in line 1 cause the organization to be not described in section 501(c)(3)?	I	ı			—
	er the amount of any tax incurred under section 4912					
	er the amount of any tax incurred by organization managers under section 4912		-			—
•	rganization incurred a section 4912 tax, did it file Form 4720 for this year?	1	·			
	mplete if the organization is exempt under section 501(c)(4), section 5	01(c)(5), or	se	ction	_
	1(c)(6).		,(-),			•
			_	-	Yes	No
	itially all (90% or more) dues received nondeductible by members?		<u> </u>	<u> </u>		Νo
	ization make only in-house lobbying expenditures of \$2,000 or less?			2		Νo
	ization agree to carryover lobbying and political expenditures from the prior year?			3		Νo
50 an	mplete if the organization is exempt under section 501(c)(4), section 5 1(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II swered "Yes".			s		
•	ments and similar amounts from members	1			2,306	<u>,746</u>
	e) non-deductible lobbying and political expenditures (do not include amounts of political which the section 527(f) tax was paid).					
a Current year		2a			427	,283
b Carryover fro	m last year	2b				
c Total		2c				,283
	nount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			482	,208
does the org	re sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess inization agree to carryover to the reasonable estimate of nondeductible lobbying and inditure next year?	4				
•	unt of lobbying and political expenditures (see instructions)	5			-54	,925

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier Return Reference Explanation

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DLN: 93493061025072

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

nal Revenue Service F Attach to Form 990. F See separate instructions.	Inspection
lame of the organization IINNESOTA ASSOCIATION OF REALTORS	Employer identification number
	41-6039154
organizations Maintaining Donor Advised Funds or Other Similar organization answered "Yes" to Form 990, Part IV, line 6.	Funds or Accounts. Complete if the
(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year	
Aggregate contributions to (during year)	
Aggregate grants from (during year)	
Aggregate value at end of year	
Did the organization inform all donors and donor advisors in writing that the assets held in d funds are the organization's property, subject to the organization's exclusive legal control?	donor advised Yes No
Did the organization inform all grantees, donors, and donor advisors in writing that grant fun used only for charitable purposes and not for the benefit of the donor or donor advisor, or for conferring impermissible private benefit	·
art II Conservation Easements. Complete if the organization answered "Yes"	" to Form 990, Part IV, line 7.
	an historically importantly land area a a certified historic structure orm of a conservation
casement on the last day of the tax year	Held at the End of the Year
Total number of conservation easements	2a
Total acreage restricted by conservation easements	2b
Number of conservation easements on a certified historic structure included in (a)	2c
Number of conservation easements included in (c) acquired after 8/17/06	2d
Number of conservation easements modified, transferred, released, extinguished, or terminative the taxable year 🛌	ated by the organization during
Number of states where property subject to conservation easement is located 🛌	
Does the organization have a written policy regarding the periodic monitoring, inspection, he enforcement of the conservation easements it holds?	andling of violations, and Yes No
Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation eas	
A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easeme	ents during the year 🟲 \$
Does each conservation easement reported on line $2(d)$ above satisfy the requirements of $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	section Yes No
In Part XIV, describe how the organization reports conservation easements in its revenue a balance sheet, and include, if applicable, the text of the footnote to the organization's financ the organization's accounting for conservation easements	cial statements that describes
Organizations Maintaining Collections of Art, Historical Treasures Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
If the organization elected, as permitted under SFAS 116, not to report in its revenue state art, historical treasures, or other similar assets held for public exhibition, education or rese provide, in Part XIV, the text of the footnote to its financial statements that describes these	ment and balance sheet works of earch in furtherance of public service,
If the organization elected, as permitted under SFAS 116, to report in its revenue statemen historical treasures, or other similar assets held for public exhibition, education, or researc 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	► \$
If the organization received or held works of art, historical treasures, or other similar assets following amounts required to be reported under SFAS 116 relating to these items	
Revenues included in Form 990, Part VIII, line 1	▶ \$

Part	Organizations Maintaining Co	llections of Ar	<u>t, His</u>	stori	<u>cal T</u>	reasu	res, or Oth	er S	<u>imilar</u>	· Asse	ts (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	ny of th	ne fol	lowing	that are	e a significant	use	of its co	llection	ı	
а	Public exhibition		d	Γ	Loan	orexch	nange progran	าร				
ь	Scholarly research		e	Γ	O the	r						
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ain hov	w the	y furth	er the o	rganızatıon's	exem	pt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,				ımılar	-	Г	Yes	Г No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	organ	ızatıon		'Yes"	to For	m 990),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interm	edıary	for c	ontribi	utions o	r other asset	s not		Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving t	able					A mou	nt	
_	Parinning balance						1			Alliou	iiit.	
c d	Additions during the year						10					
e	Additions during the year Distributions during the year						16	_				
f	Ending balance						1f	-				
		000 Bart V II	. 717								Yes	
2a L	Did the organization include an amount on Fo		ie Zīr							,	res) NO
	If "Yes," explain the arrangement in Part XIV rt V Endowment Funds. Complete i		n and	wor	ad "Va	c" to E	Orm 000 D	art IV	/ line	10		
Fα	Endowinient Funds. Complete	(a)Current Year)Prior					e Years E		Four Y	ears Back
1a	Beginning of year balance		Ì	•		` _	<u> </u>					
b	Contributions											
С	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as							•		
а	Board designated or quasi-endowment											
ь	Permanent endowment											
c	Term endowment ▶											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are hel	d and a	dmınıstered fo	or the				
	organization by									1	Yes	No
	(i) unrelated organizations		•							3a(i)		<u> </u>
	(ii) related organizations							•		3a(ii)	 	<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization. Describe in Part XIV the intended uses of the	•								3b		<u> </u>
	t VI Investments—Land, Buildings					100 Da	rt Y line 10	`				
Fell	Threstments—Land, Buildings	s, and Equipme	:IIC. 3				,		-> ^	lastad		
	Description of investment					or other stment)	(b)Cost or other)		c) Accum deprecia		(d) Bo	ook value
1a	Land		•				101,58	37				101,587
b	Buildings						817,13	30		346,683		470,447
	Leasehold improvements			- 1			34,90	07		34,907		0
c	Leasenoia improvements		•				34,90			34,907		
	Equipment						174,28	_		99,039		75,242
d e	·						<u> </u>	31	:	•		

Investments—Other Securities. See	roi ili 990, Pait X, ilile 12		
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)	(2)20011 10100	Cost or end-of-year market v	alue
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
		12	
Part VIII Investments—Program Related. See	: гогиг ээо, rait x, ime . T		
(a) Description of investment type	(b) Book value	(c) Method of valuation	ماليم
		Cost or end-of-year market v	aiue
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, In	e 15.		
(a) Descrip	tion	(b) Book v	alue
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
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Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
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Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
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Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		

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 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
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		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	1	
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d]	
e	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		
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	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	leturn
1	Total expenses and losses per audited financial	₁	
2	statements		
² a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d	- 2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
ь	Other (Describe in Part XIV) 4b	1	
c	Add lines 4a and 4b	- 4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
	t XIV Supplemental Information		
	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P.	art IV . Iı	nes 1b and 2b.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ASSOCIATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE IT HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION OF THE INTERNAL REVENUE CODE AND CONTRIBUTIONS TO THE ASSOCIATION QUALIFY AS A CHARITABLE CONTRIBUTION DEDUCTION FOR DONORS THE ASSOCIATION HAS ADOPTED THE INCOME TAX
		STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS THIS STANDARD HAS NO IMPACT ON THE ASSOCIATION'S FINANCIAL STATEMENTS FOR THE YEARS ENDING SEPTEMBER 30, 2011 AND 2010 THE ASSOCIATION'S TAX RETURNS ARE SUBJECT TO REVIEW BY FEDERAL AND STATE AUTHORITIES THE ASSOCIATION IS NOT AWARE OF ANY ACTIVITIES THAT WOULD JEOPARDIZE ITS TAXEXEMPT STATUS THE TAX RETURNS FOR THE YEARS ENDING 2008 TO 2011 ARE OPEN TO EXAMINATION BY FEDERAL AND STATE AUTHORITIES

DLN: 93493061025072

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Internal Revenue Service

Department of the Treasury

Name of the organization

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

MIII	INESOTA ASSOCIATION OF REALTORS		41-6039154			
Pa	rt I Questions Regarding Compensation	n	141 0033134			
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc	_		1b		
2	Did the organization require substantiation prior to rofficers, directors, trustees, and the CEO/Executive			2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the		,			
	Compensation committee	l F	Written employment contract			
	Independent compensation consultant	▽	Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A , line $f 1a$ with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t from the organization or a related organization?	4a		No
ь	Participate in, or receive payment from, a supplement	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	ıst comp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	lıne 1a,	did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	lıne 1a,	did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7		
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III		·	8		
9	If "Yes" to line 8, did the organization also follow the	e rebutta	able presumption procedure described in Regulations			

section 53 4958-6(c)?

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

(A) Name					(C) Retirement and		(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) CHRISTOPHER GALLER	(1) (11)	160,000 0	600 0	0	9,000 0	22,284 0	191,884 0	o 0
(2) LINDA MODLINSKI	(1) (11)	126,000 0	6,885 0	0	8,913 0	29,883 0	171,681 0	0 0
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Schedule J (Form 990) 2010 Page **3**

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier Return Reference Explanation

Schedule J (Form 990) 2010

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DLN: 93493061025072

OMB No 1545-0047

2010

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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 to provide any additional information.

Attach to Form 990 or 990-EZ.

Name of the organization MINNESOTA ASSOCIATION OF REALTORS Employer identification number

41-6039154

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1		THE EXECUTIVE COMMITTEE HAS THE AUTHORITY TO ACT ON BEHALF OF THE BOARD OF DIRECTORS MEMBERS OF THE EXECUTIVE COMMITTEE MEMBERS ARE ALSO MEMBERS OF THE BOARD OF DIRECTORS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4		THE ORGANZIATION AMENDED ITS BY-LAWS ON OCTOBER 13, 2011 TO CHANGE THE MEMBERSHIP OF EXECUTIVE COMMITTEE FROM 8 TO 6 DUE TO THE COMBINATION OF REGIONS THEY ALSO ADDED A NEW PARAGRAPH OF PUBLIC ADVOCACY COMMITTEE TO ARTICLE VI SECTION 1 - STANDING COMMITTEE

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE ASSOCIATION HAS SIX CLASSES OF MEMBERS, WITH EQUAL VOTING RIGHTS REALTOR MEMBER, MEMBER BOARD/ASSOCIATION, AFFILIATE MEMBER, HONORARY MEMBER, INSTITUTE AFFILIATE, AND REALTOR EMERITUS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		EACH MEMBER ASSOCIATION OR BOARD ELECTS UP TO FOUR DIRECTORS TO THE BOARD OF DIRECTORS, DEPENDING ON THE NUMBER OF REALTOR MEMBERS OF THE ASSOCIATION OR BOARD EACH REAL ESTATE COMPANY ELECTS UP TO THREE DIRECTORS TO THE BOARD OF DIRECTORS, DEPENDING ON THE NUMBER OF REALTOR MEMBERS IN THE COMPANY EACH REAL ESTATE BROKERAGE FRANCHISOR WITH 500 OR MORE REALTOR MEMBERS ELECT ONE DIRECTOR TO THE BOARD OF DIRECTORS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		AMENDMENTS TO THE ASSOCIATION'S BY LAWS AFFECTING THE ADMISSION OR QUALIFICATION OF REALTOR MEMBERS AND INSTITUTE AFFILIATE MEMBERS AND THE USE OF THE TERMS "REALTOR" OR "REALTORS" OR ANY ALTERATION IN THE TERRITORIAL JURISDICTION OF A BOARD ONLY BECOME EFFECTIVE UPON APPROVAL OF THE BOARD OF DIRECTORS OF THE NATIONAL ASSOCIATION AMENDMENTS TO THE ASSOCIATION'S ARTICLES OF INCORPORATION REQUIRE A TWO-THIRDS MAJORITY VOTE BY THE MEMBERS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 10B		THE ASSOCIATION'S LOCAL AFFILIATE IS A POLITICAL ACTION COMMITTEE ACTIVITIES OF POLITICAL ACTION COMMITTEES ARE STRICTLY GOVERNED BY STATE LAWS AND REGULATIONS THE ASSOCIATION'S POLITICAL ACTION COMMITTEE FOLLOWS ALL SUCH LAWS AND REGULATIONS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE FORM 990 WAS REVIEWED BY THE ASSOCIATION'S DIRECTOR OF OFFICE MANAGEMENT AND CHIEF OPERATING OFFICER IT WAS THEN PROVIDED ELECTRONICALLY TO ALL BOARD MEMBERS PRIOR TO FILING

MEMBER HAVING A CONFLICT OF INTEREST IS REQUIRED TO DISCLOSE ALL MATERIAL FACTS A PERSON WHO HAS A CONFLICT OF INTEREST MAY NOT PARTICIPATE IN OR BE PERMITTED TO HEAR THE BOARD'S OR COMMITTEE'S DISCUSSION OF THE MATTER EXCEPT TO DISCLOSE MATERIAL FACTS AND TO RESPOND TO QUESTIONS SUCH PERSON MAY NOT ATTEMPT TO EXERT THEIR PERSONAL INFLUENCE WITH RESPECT TO THE MATTER, EITHER AT OR OUTSIDE THE MEETING THE PERSON HAVING A CONFLICT OF INTEREST MAY NOT VOTE	ldentifier	Return Reference	Explanation
TAKEN, UNLESS THE VOTE IS BY SECRET BALLOT IN THE EVENT IT IS NOT ENTIRELY CLEAR THAT A CONFLICT OF INTEREST EXISTS, THE CHAIR OR THE CHAIR'S DESIGNEE DETERMINES WHETHER A CONFLICT OF INTEREST EXISTS ALL PROCEEDINGS RELATED TO CONFLICTS OF INTEREST ARE DOCUMENTED IN THE MEETING MINUTES		PART VI, SECTION B,	EACH PERSON GOVERNED BY THIS POLICY IS REQUIRED TO COMPLETE AN ANNUAL DISCLOSURE FORM IDENTIFY ING ANY RELATIONSHIPS, POSITIONS OR CIRCUMSTANCES IN WHICH THE PERSON IS INVOLVED THAT THEY BELIEVE COULD CONTRIBUTE TO A CONFLICT OF INTEREST ARISING BEFORE BOARD OR COMMITTEE ACTION ON A CONTRACT OR TRANSACTION INVOLVING A CONFLICT OF INTEREST, A DIRECTOR OR COMMITTEE MEMBER HAVING A CONFLICT OF INTEREST IS REQUIRED TO DISCLOSE ALL MATERIAL FACTS A PERSON WHO HAS A CONFLICT OF INTEREST MAY NOT PARTICIPATE IN OR BE PERMITTED TO HEAR THE BOARD'S OR COMMITTEE'S DISCUSSION OF THE MATTER EXCEPT TO DISCLOSE MATERIAL FACTS AND TO RESPOND TO QUESTIONS SUCH PERSON MAY NOT ATTEMPT TO EXERT THEIR PERSONAL INFLUENCE WITH RESPECT TO THE MATTER, EITHER AT OR OUTSIDE THE MEETING THE PERSON HAVING A CONFLICT OF INTEREST MAY NOT VOTE ON THE CONTRACT OR TRANSACTION AND MAY NOT BE PRESENT IN THE MEETING ROOM WHEN THE VOTE IS TAKEN, UNLESS THE VOTE IS BY SECRET BALLOT IN THE EVENT IT IS NOT ENTIRELY CLEAR THAT A CONFLICT OF INTEREST EXISTS, THE CHAIR OR THE CHAIR'S DESIGNEE DETERMINES WHETHER A CONFLICT OF INTEREST

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	THE COMPENSATION OF THE CEO IS DETERMINED BY THE EXECUTIVE COMMITTEE, WHICH SERVES AS THE PERSONNEL COMMITTEE THE ASSOCIATION USES SALARY SURVEYS FOR COMPARABILITY DATA AND DOCUMENTS ALL STEPS IN THE PROCESS THE PROCESS LAST INCLUDED REVIEW AND APPROVAL BY INDEPENDENT PERSONS, COMPARABILITY DATA AND CONTEMPORANEOUS SUBSTANTIATION IN AUGUST 2011 FOR THE CEO, C GALLER ALL OTHER COMPENSATION IS DETERMINED BY THE CEO SALARY SURVEYS AND COMPARABILITY DATA ARE USED TO DETERMINE COMPENSATION

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ASSOCIATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST THE FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE ASSOCIATION'S WEBSITE

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -32,855

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493061025072

SCHEDULE R (Form 990)

Department of the Treasury

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Internal Revenue Service					Ιij	nspectio	n
Name of the organization MINNESOTA ASSOCIATION OF REALTORS				Employer iden 41-6039154	tification number		
Part I Identification of Disregarded Entities (Com	plete if the organization	on answered "Yes"	on Form 990, Par	· ·			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)		(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during		ıf the organization	ı answered "Yes" o	on Form 990, Part	: IV, line 34 becau	ıse ıt had	one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont	(g) 512(b)(1 trolled nization
(1) MINNESOTA ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE			<u> </u>			Yes	No
5750 LINCOLN DRIVE	POLITICAL & LEGISLATIVE ACTIVITY	MN	527	N/A	N/A		No
EDINA, MN 55436 41-6141740							<u> </u>
						\bot	

(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets		(h) Disproprtionate allocations?		(i) Code V— amount in bo Schedule (Form 10	x 20 of K-1	(j Gener mana partr	al or ging	(k) Percentage ownership
								Yes	No			Yes	No	
				ble as a Corpora zations treated as a						nswered "Y	es" on	Form	990,	Part IV,
Name, address, ar	(a) nd EIN of related organiz	zation	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct cor enti	ntrolling	(e) Type of e (C corp, S or trust	corp,	Share of	(f) f total income	Shai end-o	(g) hare of I-of-year assets		(h) Percentage ownership
					1	I								

(6)

	Note. Complete line 1 if any entity is listed in Parts II, III or IV				- [Yes	No			
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organ	ızatıons lısted ın Parts	s II-IV?							
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1	la	Ì	No			
b	Gift, grant, or capital contribution to other organization(s)			1	lЬ		No			
c	Gift, grant, or capital contribution from other organization(s)			1	.c		No			
d	Loans or loan guarantees to or for other organization(s)			1	ld		No			
е	Loans or loan guarantees by other organization(s)			1	le		No			
f	Sale of assets to other organization(s)			1	.f		No			
g	Purchase of assets from other organization(s)			1	.g		No			
h	Exchange of assets			1	lh		No			
i	Lease of facilities, equipment, or other assets to other organization(s)			1	Li		No			
j	Lease of facilities, equipment, or other assets from other organization(s)			1	Lj		No			
k	Performance of services or membership or fundraising solicitations for other organization(s)			1	.k	Yes				
ı	Performance of services or membership or fundraising solicitations by other organization(s)			1	ш		No			
n	Sharing of facilities, equipment, mailing lists, or other assets			1	.m	Yes				
n	-									
0	Reimbursement paid to other organization for expenses			1	Lo		No			
р	Reimbursement paid by other organization for expenses			1	р	Yes				
q	O ther transfer of cash or property to other organization(s)			1	lq		No			
r	Other transfer of cash or property from other organization(s)			1	Lr		No			
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, in	cluding covered relati	onships and transact	on thresholds						
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	Method of deterr	nının	ng amo	unt			
1)										
2)										
3)		tal contribution to other organization(s) tal contribution from other organization(s) tal contribution from other organization(s) tantees to or for other organization(s) tantees by other organization(s) to their organization(s) tis contribution from other organization from other organization(s) tis contribution from other organization from other organization from other organization from other organization from expenses and to other organization for expenses and to other organiz								
4)										
4)										
5)										
-		1	1							

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on 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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	(e) Share of end-of-year assets		rtionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	agın tner?
			Yes	No		Yes	No		Yes	N
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2010