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# Form **990**

Department of the Treasury

## **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)

2011

OMB No 1545-0047

**Z**VII

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

Open to Public Inspection

		Service Fine organization may have to use a	,		- 1	Inspection		
		2011 calendar year, or tax year beginning 01-01-	-2011 and ending 12-31-201	.1	D Employer id	dentification number		
		NATIONAL ASSOCIATION OF REALTORS						
_	ress ch	Doing Business As		—	36-15206 E Telephone			
∏ Nan					(312)329	-8200		
┌ Inıtı ┌ _		420 N Michigan Aug	elivered to street address) Room/s	uite	, ,	ts \$ 236,082,198		
┌ Terr		d						
∏ Am∈		Chicago, IL 60611						
App	lication	pending						
		F Name and address of principal off DALE STINTON CEO	cer		a group retu			
		430 N Michigan Ave		affiliat	es?	ΓYes <b>Γ</b> No		
		Chicago,IL 60611		H(b) Are all	affiliates inclu	ıded?		
<b>T</b> Toy		npt status		1		st (see instructions)		
			4947(a)(1) or   527	H(c) Group	exemption r	number 🟲		
J W	ebsite	∷► WWW REALTOR ORG						
<b>K</b> Form	n of or	ganization 🔽 Corporation 🗀 Trust 🗀 Association 🗀 Other	•	<b>L</b> Year of for	nation 1908	<b>M</b> State of legal domicile IL		
Pai	rt I	Summary						
Governance		Briefly describe the organization's mission or mos THE NATIONAL ASSOCIATION OF REALTORS EXCHANGE OF INFORMATION AMONG ITS ME REAL PROPERTY	(NAR) PROVIDES A FACIL					
<u>.</u>								
	2	Check this box দ if the organization discontinu	ed its operations or disposed	of more than 25	% of its net	assets		
×ර ග	3	Number of voting members of the governing body	(Part VI, line 1a)	•	3	881		
ë	4	Number of independent voting members of the go	verning body (Part VI, line 1b	)	4	875		
Activities &		Total number of individuals employed in calendar			5	421		
۲		Total number of volunteers (estimate if necessary	•		6	3,500		
		Total unrelated business revenue from Part VIII, Net unrelated business taxable income from Forn	• • • • • • • • • • • • • • • • • • • •		7a	6,732,169		
	ь	Net unrelated business taxable income from Form	1990-1, line 34	Drior	7b	2,131,949		
	8	Contributions and grants (Part VIII, line 1h)		Prior	0	Current Year		
g.	9	Program service revenue (Part VIII, line 2g)		1.	44,981,611	139,900,617		
Revenue	10	Investment income (Part VIII, column (A), line		7,746,614	6,840,962			
#	11	Other revenue (Part VIII, column (A), lines 5,			9,760,907	10,323,662		
	12	Total revenue—add lines 8 through 11 (must e			52.400.122	157.065.241		
	13	Grants and similar amounts paid (Part IX, colu		1,	676,000	157,065,241		
	14	Benefits paid to or for members (Part IX, colum			0/0,000	283,000		
	15	Salaries, other compensation, employee benefi	, ,,		- J			
8	13	5-10)	(	-	50,781,222			
Expenses	16a	Professional fundraising fees (Part IX, column	(A), line 11e)		0	0		
ਬੌ	b	Total fundraising expenses (Part IX, column (D), line 25)						
	17	Other expenses (Part IX, column (A), lines 11a			32,861,812	119,875,980		
	18	Total expenses Add lines 13-17 (must equal			93,829,278	170,942,202		
. op	19	Revenue less expenses Subtract line 18 from	line 12	Beginning	31,340,146	-13,876,961		
ည်း ၁၈၈၂				Ye		End of Year		
Not Assets or Fund Balances	20	Total assets (Part X, line 16)		2	74,120,469	258,251,232		
1 P	21	Total liabilities (Part X, line 26)			81,611,723	88,153,797		
	22	Net assets or fund balances Subtract line 21 f	rom line 20	1	92,508,746	170,097,435		
	penal	Signature Block  Ities of perjury, I declare that I have examined this re and belief, it is true, correct, and complete. Declarati						
		*****			2-11-12			
Sign		Signature of officer		Dat	e			
Here	2	DALE STINTON CEO						
		Type or print name and title						
		Preparer's signature Nicole Bencik		Check If self-	Preparer's taxp (see instruction	payer identification number ns)		
Paid		employed P00756915						
Prepa		Firm's name (or yours CROWE HORWATH LLP if self-employed),			EIN Þ			
Use C	лпу	address, and ZIP + 4 70 West Madison Street						
		Suite 700 Chicago, IL 606024903			Phone no 🕨	(312) 899-7000		

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

Part IV	Che	cklist	of Re	auired	Sche	dules
	CHE	CRIISL	OI NO	aun eu	30110	uuics

			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 instructions)?	2		Νo
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	Yes	
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		Νo
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 for which 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? <i>If "Yes," complete Schedule D, Part II</i>	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 temporarily restricted endowments, permanent endowments, 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	Yes	
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
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
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	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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	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		Νo
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? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

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? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified 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
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or 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? If "Yes," complete Schedule M	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	Yes	
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	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	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 $2$	35b	Yes	
36	<b>Section 501(c)(3) organizations.</b> 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 IRS Filings and Tax Compliance	

	Check in Schedule O contains a response to any question in this Part V	•	•1	
			Yes	No
La	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	<b>1a</b> 357			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
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			
b	return	26	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	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 or securities account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country PBD , CJ			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
5a	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		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7</b> c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	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		
•	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
l1	Section 501(c)(12) organizations. Enter			
	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 )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			_
c	Enter the aggregate amount of reserves on hand  13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI 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.

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

Se	ection A. Governing Body and Management			
			Yes	No
1_	Enter the number of voting members of the governing hady at the and of the tay			
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	Yes	
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	4		
5	filed?  Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
b	more members of the governing body?	7a 7b		No No
8	or persons other than the governing body?			
	year by the following			
а	The governing body?	8a	Yes	
b	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			
ке	evenue Code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	-110
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		No
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14		No
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	
ь		15b		No
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
	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	Yes	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	Yes	
	ection C. Disclosure			
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)			

Own website Another's website V Upon request

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 JOHN PIERPOINT

430 N MICHIGAN AVE Chicago,IL 60611 (312)329-8200

## 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(a) Name and Title  A verage hours par week (describe hours for related organizations in Schedule O)  See Additional Data Table  (b) Position (do not check more than one box, unless person is both an officer and a director/trustee)  (c) Position (do not check more than one box, unless person is both an officer and a director/trustee)  (describe hours for related organizations is not should be a director/trustee)  (describe hours for related organizations is not should be a director/trustee)  (describe hours for related organizations is not should be a director/trustee)  (describe hours for related organizations)  (describe hours for related organizations)  (describe hours for the director/trustee)  (describe hours for related organizations)  (describe hours for the director/trustee)  (describe hours for related organizations)  (describe hours for the director/trustee)  (de	Check this box if neither the organiz	•	lated o	rganı	ızatı	ons	compe	ensat	ed any current or fo	ormer officer, direct	tor, or trustee
for related organizations in Schedule Officer Schedule O) organizations	(A)	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a				eck x, oth		(D) Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
See Additional Data Table		for related organizations in Schedule	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former		MISC)	I
	See Additional Data Table										

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

	(A) Name and Title	(B) Average hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						Rep comp fro organiz	(D) ortable ensation m the zation (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-		(F) Estimated amount of other compensation from the organization and	
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relat organıza	
See A	dditional Data Table													
												_		
								Ļ				$\bot$		
1b c	Sub-Total			<u> </u>	•	•		•						
d	Total (add lines 1b and 1c) .			• •		<u> </u>		<b>F</b>		7,583,888		0		418,713
2	Total number of individuals (incli \$100,000 of reportable compens	udıng but not lın	nited to	thos	e lıs	ted	above	) who	o receive	ed more tha	ın			
3	Did the organization list any <b>forr</b> on line 1a? <i>If</i> "Yes," complete Sch								or highes		ated employee	3	Yes	<b>No</b>
4	For any individual listed on line 1 organization and related organization													110
5	Individual	receive or accru	e comi	• oensa	• atıon	• fror	n any	• unre	· · ·	· · · janization (	or individual for	4	Yes	
	services rendered to the organiz	ation? <i>If "Yes,"</i>	complet	e Sch	edul	e J f	or suci	h per	son .		. [	5		No
	ection B. Independent Con													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	the organizatio ear												
		( <b>A)</b> ne and business ad	dress							Desc	(B) ription of services		(C Comper	
25 EN ALISC	MOST ORGANIZATION ITERPRISE STE 250 , CA 92656									REALTOR MA	ARKETING & BRANDIN	IG	38	,670,851
845 F ARNO	ET SMART COMMUNICATIONS LLC PAT LN PLD, IL 21032									CONSULT &	DIRECT MAILINGS SE	RV	2	,649,192
HUGE LLC 45 MAIN STREET 2ND FLOOR BROOKLYN, NY 11201 WEBSITE AND BRANDING SERV										1,873,198				
568 A	RIENT ITRIUM DRIVE NON HILLS, IL 60061									MEETING &	PLANNING SERV		1	,727,240
	BROWN PRINTING COMPANY									,482,022				

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►115

	•	Statement o	of Dovonus					Page <b>9</b>
Part	<b></b>	Statement o	r kevenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
表表	1a	Federated cam	paigns 1a					
듄	ь	Membership du	es <b>1b</b>					
S.E	c	Fundraising eve	ents <b>1c</b>					
£ ä	d	Related organiz	rations 1d					
% E	e	Government grants	s (contributions) <b>1e</b>					
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no Noncash contri	ons, gifts, grants, and <b>1f</b> ot included above butions included in					
Sec	h		s 1a-1f	▶	0			
				Business Code				
E	2a	MEMBER DUES		900099	126,475,602	126,475,602		
eve	Ь	CONVENTIONS		900099	7,092,129	7,092,129		
മ്	c	ADVERTISING & SU	IRCCD IDTIONS				2 272 101	
Š				541800	3,860,771	587,580	3,273,191	
Š	d	GOVERNMENT AFF		900099	1,649,605	1,649,605		
E B	e	PUBLICATIONS & S		900099	734,405	734,405		
Program Serwoe Revenue	f	All other progra	im service revenue		88,105	88,105	0	0
Δ	g	Total. Add lines	s 2a-2f		139,900,617			
	3	Investment inc	ome (ıncludıng dıvıden	ds, interest				
		and other simila	aramounts)	▶	5,219,264		1,688,468	3,530,796
	4	Income from inves	tment of tax-exempt bond	proceeds 🕨	0			
	5	Royalties		▶	4,962,035			4,962,035
			(ı) Real	(II) Personal				
	6a	Gross rents	7,344,212					
	b	Less rental expenses	3,300,253					
	c	Rental income or (loss)	4,043,959	0				
	d		me or (loss)		4,043,959		1,436,030	2,607,929
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	76,556,266	782,136				
	ь	Less cost or other basis and sales expenses	74,853,716	862,988				
	c	Gain or (loss)	1,702,550	-80,852				
	d	Net gain or (los	s)	▶	1,621,698			1,621,698
enne	8a		luding s reported on line 1c)					
Other Revenue	ь	See Part IV, lin	e 18 a penses b					
₹	c		· (loss) from fundraising	events 🕨	0			
•	9a	Gross income f See Part IV, lin	rom gaming activities le 19 a					
	Ь	Less direct ex	penses <b>b</b>					
	c		· (loss) from gamıng actı	vities	o			
	10a	Gross sales of returns and allo						
	Ь	Less cost of a	oods sold <b>b</b>					
	c		(loss) from sales of inv	entory 🟲	0			
		Miscellaneous		Business Code				
	l .	ENTITY	1 CONTROLLED	900003	174,917		174,917	
	b c	LIST RENTAL		533110	138,390		138,390	
	d	All other reven	ue		1,004,361	983,188	21,173	0
	e	<b>Total.</b> Add lines			1,317,668			
	12	Tatal same	See Instructions .	<b>▶</b>		137,610,614	6,732,169	

## 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)

	heck if Schedule O contains a response to any question in this Part IX	<u> </u>		<u> </u>	
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	285,000			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	5,015,450			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	34,300,923			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,933,880			
9	Other employee benefits	5,877,254			
10	Payroll taxes	2,653,715			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	606,150			
С	Accounting	240,720			
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			_
f	Investment management fees	164,638			_
g	Other	15,103,305			
12	Advertising and promotion	40,909,501			-
13	Office expenses	10,561,154			
14	Information technology	10,060,489			
15	Royalties	0			
16	Occupancy	584,222			
17	Travel	7,496,269			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	8,727,509			-
20	Interest	380,578			
21	Payments to affiliates	,			
22	Depreciation, depletion, and amortization	11,717,149			
23	Insurance	2,451,609			
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	PUBLIC POLICY EXPENSES	3,228,101			
b	INCOME TAXES	3,209,415			
c	MAINTENANCE & REPAIRS	2,657,790			
d	GIFTS/AWARDS/FLOWERS	652,933			
e					
f	All other expenses	1,124,448			_
25	Total functional expenses. Add lines 1 through 24f	170,942,202	0	0	0
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	,,			orm <b>990</b> (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 1 4.453.823 15.372.762 2 2 3 3 1,341,670 2.234.005 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . . . . . . . . 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 8 9 6,479,819 9 4.541.536 Prepaid expenses and deferred charges . . . . . . 10a 161,271,968 Land, buildings, and equipment cost or other basis *Complete* Part VI of Schedule D 10a 10b 82,989,853 b Less accumulated depreciation . . . . 83,863,998 10c 78,282,115 126,502,328 11 100,352,005 11 2,507,086 12 12 2,311,598 Investments—other securities See Part IV, line 11 . . . . . . 13 40,996,553 13 47,667,353 Investments—program-related See Part IV, line 11 . . 5,655,262 14 4,936,160 14 Intangible assets . . . . . . . . . 2,319,930 15 2,553,698 15 274,120,469 258,251,232 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 34,536,388 17 36,122,313 17 Accounts payable and accrued expenses . 18 18 19 27,543,501 19 33,811,616 20 15.000.000 20 15.000.000 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, highest compensated employees, and disqualified persons Complete Part II of Schedule L $\ldots$ . $\ldots$ . $\ldots$ 22 23 Secured mortgages and notes payable to unrelated third parties . . . 3.000.000 23 1,500,000 24 Unsecured notes and loans payable to unrelated third parties . . . . 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 1,531,834 25 1,719,868 D . . . . . 26 81,611,723 26 88,153,797 **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. 27 192,508,746 27 170,097,435 Unrestricted net assets . . . . 28 28 Temporarily restricted net assets . . . . . Fund 29 29 Permanently restricted net assets . . . . Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds . . . . . . 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 Total net assets or fund balances . . . . . 192.508.746 33 170,097,435 34 Total liabilities and net assets/fund balances . . . . . 274.120.469 34 258.251.232

Pal	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		157,0	065,24
2	Total expenses (must equal Part IX, column (A), line 25)	2			942,20
3	Revenue less expenses Subtract line 2 from line 1	3		-13,8	376,96
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		192,5	508,74
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-8,5	534,35
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		170,0	97,43
Pai	The Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII		•	୮	
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			Yes	No
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 t 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	Yes	
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	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
За	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?	9	3a		No
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	equired	3b		

DLN: 93493317001162

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

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 If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization Employer identification number NATIONAL ASSOCIATION OF REALTORS 36-1520690 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV 2 Political expenditures 3 Volunteer hours 0 Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? Yes b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3) Enter the amount directly expended by the filing organization for section 527 exempt function activities 0 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities 0 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 0 Did the filing organization file Form 1120-POL for this year? 4

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter - 0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) NAR FUND	430 N MICHIGAN CHICAGO,IL 60611	26-1725187	0	415,359

**f** Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.)  Lia Total lobbying expenditures to influence public opinion (grass roots lobbying)  b Total lobbying expenditures to influence a legislative body (direct lobbying)  c Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  e Total exempt purpose expenditures (add lines 1c and 1d)  f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000  g Grassroots nontaxable amount (enter 25% of line 1f)  Subtract line 1g from line 1a If zero or less, enter -0-  i Subtract line 1f from line 1c If zero or less, enter -0-  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ ) 2 0 1 1					Page <b>∠</b>
A Check   If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures)    Check   If the filing organization checked box A and "limited control" provisions apply    Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)   Organization Total Incurred (The term "expenditures" means amounts paid or incurred.)   Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying)	Pa	rt II-A		n is exempt under	section 501(	c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures)  Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)  Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)  Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)  Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying)  Lobbying expenditures to influence a legislative body (direct lobbying)  Total lobbying expenditures (add lines 1a and 1b)  Other exempt purpose expenditures  Total obtaining purpose expenditures (add lines 1c and 1d)  Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  If the amount on line 1e, column (a) or (b) is:  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  S1,000 but not over \$1,500,	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)  Total lobbying expenditures to influence public opinion (grass roots lobbying)  Total lobbying expenditures (add lines 1 aand 1b)  Other exempt purpose expenditures (add lines 1 aand 1b)  Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line Le, column (a) or (b) is:  If the amount on line Le, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S10,000,000  Over \$1,000,000 but not over \$1,000,000  S10,000,000  Fig. Soon over \$1,000,000  Fig. Soon ov			expenses, and share of excess lob	bying expenditures)		_	•	
Total lobbying expenditures to influence public opinion (grass roots lobbying)  b Total lobbying expenditures to influence a legislative body (direct lobbying)  c Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  e Total exempt purpose expenditures  f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S175,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S175,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S175,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S175,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000  Over \$1,000,000  The lobbying barbon line 1 of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000  The lobbying the amount of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S175,000,000  S175,000,000  S175,000,000  S175,000,000  Over \$1,000,000  Over \$	3	Check	ıf the filing organization checked bo	ox A and "limited contro	ol" provisions app	ly	1	1
(The term "expenditures" means amounts paid or incurred.)  Ital Total lobbying expenditures to influence public opinion (grass roots lobbying)  b Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  e Total exempt purpose expenditures (add lines 1c and 1d)  f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1225,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but			Limits on Lobbying	Expenditures			(a) Filing	(b) Affiliated
Total lobbying expenditures to influence public opinion (grass roots lobbying)  b Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  Total exempt purpose expenditures (add lines 1c and 1d)  f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is: Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S175,000 plus 15% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S100,000 plus 15% of the excess over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  The lobbying nontaxable amount is:  Not over \$500,000  Over \$1,000,000  Over \$1,000,00					l.)		Organization's Totals	Group Totals
b Total lobbying expenditures to influence a legislative body (direct lobbying)  c Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  e Total exempt purpose expenditures (add lines 1c and 1d)  f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is: Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,7000,000  Over \$1,000,000 but not over \$1,7000,000  S225,000 plus 15% of the excess over \$1,000,000  Over \$1,7000,000  Over \$1,7000,000  F17,000,000  S225,000 plus 5% of the excess over \$1,500,000  Over \$1,7000,000  F17,000,000  F17,000		<b>-</b>			1 \		100013	1 ocars
c Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  e Total exempt purpose expenditures (add lines 1c and 1d)  f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  In the excess over \$1,000,000  F1,000,000  F1,000,0								
d O ther exempt purpose expenditures  Total exempt purpose expenditures (add lines 1c and 1d)  Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000					ying)			
Total exempt purpose expenditures (add lines 1c and 1d)    Lobbying nontaxable amount Enter the amount from the following table in both columns   If the amount on line 1e, column (a) or (b) is:			,	b)				
f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$17,000,000 but not over \$1,7000,000  Over \$17,000,000 but not over \$17,000,000  S225,000 plus 10% of the excess over \$1,000,000  Over \$17,000,000  Over \$17,000,000  Over \$17,000,000  S225,000 plus 5% of the excess over \$1,000,000  Over \$17,000,000  Over \$17,000,000  S1,000,000  S1,000,0	d	Otherexe	empt purpose expenditures					
Columns  If the amount on line 1e, column (a) or (b) is: Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$500,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,7000,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,000,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000  Over \$1,500,000  S1,000,000	e	Total exe	mpt purpose expenditures (add lines 1	.c and 1d)				
Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,7000,000  Over \$1,500,000 but not over \$1,7000,000  Over \$1,500,000 but not over \$1,000,000  Over \$1,500,000 but not over \$1,000,000  S225,000 plus 5% of the excess over \$1,500,000  Over \$17,000,000  S1,000,000  Grassroots nontaxable amount (enter 25% of line 1f)  Subtract line 1g from line 1a If zero or less, enter -0-  Subtract line 1f from line 1c If zero or less, enter -0-  If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008  (b) 2009  (c) 2010  (d) 20  Lobbying celling amount	f		nontaxable amount Enter the amount	from the following table	in both			
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,000,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,00		If the an	ount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Section \$225,000 plus 5% of the excess over \$1,500,000  Over \$17,000,000  g Grassroots nontaxable amount (enter 25% of line 1f)  h Subtract line 1g from line 1a If zero or less, enter -0-  i Subtract line 1ffrom line 1c If zero or less, enter -0-  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008  (b) 2009  (c) 2010  (d) 20  2a Lobbying ceiling amount		Not over \$5	500,000	20% of the amount on lii	ne 1e			
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,00		Over \$500,	000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20  Lobbying celling amount		Over \$1,00	0,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20  Lobbying non-taxable amount		Over \$1,50	0,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	000		
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Over \$17,0	00,000	\$1,000,000				
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount								
i Subtract line 1f from line 1c If zero or less, enter -0-  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008  (b) 2009  (c) 2010  (d) 20  Lobbying non-taxable amount		Grassroo	ts nontaxable amount (enter 25% of li	ne 1f)				
i Subtract line 1f from line 1c If zero or less, enter -0-  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008  (b) 2009  (c) 2010  (d) 20  Lobbying non-taxable amount	h	Subtract	line 1a from line 1a If zero or less. en	ter -0 -				
Jection 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008  (b) 2009  (c) 2010  (d) 20  Lobbying ceiling amount								
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20  Lobbying non-taxable amount					organization file	Form 4720 re	portina	
(Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20  Lobbying non-taxable amount							F - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	┌ Yes ┌ No
Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 2009  Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20  2a Lobbying non-taxable amount  b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
<b>b</b> Lobbying ceiling amount				(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

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)).

		(8	1)	(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
С	Media advertisements?			
d	Mailings to members, legislators, or the public?			
е	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$ ?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

#### Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			res	NO
L	Were substantially all (90% or more) dues received nondeductible by members?	1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		Νo
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	З		Νo

#### Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-B 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	126,475,602
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	22,257,905
b	Carryover from last year	2b	0
C	Total	2c	22,257,905
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	27,822,891
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	0
5	Taxable amount of lobbying and political expenditures (see instructions)	5	-5,564,986

#### **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
Description of political campaign activities		THE ORGANIZATION COLLECTS MEMBER DUES EARMARKED FOR A SEPARATE SEGREGATED FUND AND PROMPTLY AND DIRECTLY TRANSFERS THEM TO THAT FUND AS SUCH, A DETAILED DESCRIPTION OF DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES IS NOT APPLICABLE

DLN: 93493317001162

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

**Supplemental Financial Statements** 

Open to Public

lema	F Attach to Fo	orm 990. F See separate instructions.		<u>-</u>	.iispcct	
	me of the organization TIONAL ASSOCIATION OF REALTORS		Empl	oyer identification	on numbe	r
	TOWNER DESCRIPTION OF REPETIONS		36-1	520690		
Pa	organizations Maintaining Donor Acorganization answered "Yes" to Form 99		ınds d	or Accounts.	Complet	e if the
	organization answered fes to form 99	(a) Donor advised funds	(	<b>b)</b> Funds and oth	eraccou	nts
L	Total number at end of year	(4,20,000,400,400,400,400,400,400,400,400		_,		
<u> </u>	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
ŀ	Aggregate value at end of year					
•	Did the organization inform all donors and donor advi- funds are the organization's property, subject to the		or advis	sed	┌ Yes	┌ No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit	efit of the donor or donor advisor, or for an	y other	purpose	┌ Yes	┌ No
²a⊦	rt II Conservation Easements. Complete		o Form	990, Part IV,	lıne 7.	
L 2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quality	on or pleasure)  Preservation of an Preservation of a c	ertified	historic structu		ā
	easement on the last day of the tax year	Г		Held at the Ei	nd of the	Vear
а	Total number of conservation easements		2a	rield at the Li	id of the	rear
ь	Total acreage restricted by conservation easements	ļ	2b			
c	Number of conservation easements on a certified his	toric structure included in (a)	2c			
d	Number of conservation easements included in (c) ac	equired after 8/17/06	2d			
3	Number of conservation easements modified, transfe	ے rred, released, extinguished, or terminate.	d by th	e organization du	rıng	
	the taxable year ▶					
Ļ	Number of states where property subject to conserva	ation easement is located <b>b</b>				
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	— Iling of	violations, and	┌ Yes	┌ No
•	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	ents du	ring the year 🛌		
,	Amount of expenses incurred in monitoring, inspecting	ng, and enforcing conservation easements	during	the year		
	<b>▶</b> \$					
3	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$ ?	(d) above satisfy the requirements of sec	tion		┌ Yes	┌ No
•	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easem	he footnote to the organization's financial	•	•		
ar	<b>t III</b> Organizations Maintaining Collectio Complete if the organization answered "		or Oth	er Similar As	sets.	
.a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	h in fur			·,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	oublic exhibition, education, or research ir				
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$		
	(ii) Assets included in Form 990, Part X			<b>►</b> \$		
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFAS		r financ			
а	Revenues included in Form 990, Part VIII, line 1			<b>▶</b> \$		

**b** Assets included in Form 990, Part X

Part	•••• Organizations Maintaining Co	llections of Art	<u>:, His</u>	tori	<u>cal T</u>	reası	ures, or O	<u>the</u>	<u>r Similar Asse</u>	ets (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	he fol	owing	that a	re a significa	nt u	se of its collectio	n	
а	Public exhibition		d	Γ	Loan	orexo	change progr	ams			
b	Scholarly research		e	Γ	Othe	:r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ıın hov	w the	y furth	er the	organızatıon	's ex	cempt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									Yes	┌ No
Par	<b>Escrow and Custodial Arrang</b> Part IV, line 9, or reported an an						n answered	Y" b	es" to Form 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	ediary	for c	ontrıb	utions	or other ass	ets i		Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving t	able		Г		Amo	unt	
С	Reginning halance							1c	Allio	unc	
d	Beginning balance  Additions during the year						-	1d			
e	Distributions during the year						<u> </u>	1e			
f	Ending balance						-	1f			
2a	Did the organization include an amount on Fo	orm 990 Bart V lin	o 212	,			L			Yes	
	If "Yes," explain the arrangement in Part XIV		e 21,						'	165	1 140
	rt V Endowment Funds. Complete		n and	: WO r	ad "Ve	ac" to	Form 990	Dar	t IV line 10		
Fa	Endowment Funds. Complete	(a)Current Year		)Prior			wo Years Back			e)Four Y	ears Back
1a	Beginning of year balance	, ,	•	•		1 ,		<del>                                     </del>	,	,	
b	Contributions										
c	Investment earnings or losses							T			
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						<u>'</u>		
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
С	Term endowment ▶										
За	Are there endowment funds not in the posses organization by	ssion of the organiz	atıon	that	are hel	ld and	admınıstered	for	the	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)	<u> </u>	<u> </u>
	If "Yes" to 3a(II), are the related organizatio	•				•		•	3b		
4	Describe in Part XIV the intended uses of th					4.0					
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	90, Pa	art X	, iine	10.	1				
	Description of property				Cost or	r other stment)	( <b>b)</b> Cost or ot basis (othe		(c) Accumulated depreciation	( <b>d</b> ) Bo	ok value
<b>1</b> a	Land						18,370,	,207		1	8,370,207
b I	Buildings						42,420,	,692	12,037,344	3	0,383,348
c I	Leasehold improvements						40,570,	,061	26,977,729	1	3,592,332
d I	Equipment						58,430,	,768	43,974,780	1	4,455,988
	Other	<u> </u>					1,480	,240			1,480,240
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colur	mn (B,	), line	10(c).	) <b>.</b> .			▶	7	8,282,115
	Control of the contro	III I TATE NO COTOR	(0)	,,		, - '	<u> </u>	-	Schedule D (		

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12.	
<ul><li>(a) Description of security or category (including name of security)</li></ul>	( <b>b)</b> Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
(1)Financial derivatives		Cost of one of your market value
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line 13.	
(a) Description of investment type	(b) Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
(1) INVST - REALTORS INFO NETWORK	7,187,291	C
(2) INVST - COUNCIL FOR SPECIALIZED REALTOR	7,187,291	
EDUCATION	15,339,248	С
(3) INVST - REALTORS RELIEF FDN	455,386	С
(4) INVST - SENTRILOCK, LLC	9,236,203	С
(5) INVST - SENTRILOCK FINANCE	1,071,051	C
(6) INVST - SECOND CENTURY VENTURES	6,267,121	C
		C
(7) INVST - REAL PROPERTY RESOURCE	8,111,053	<u> </u>
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	47,667,353	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. See Form 990, Part X, III		
	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15. ption	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 3	ne 15. ption	
Part IX Other Assets. See Form 990, Part X, II  (a) Descri	ne 15. ption	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability	ne 15. ption  (5.)  (7.)  (8.)  (9.)  (9.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability	ne 15. ption  25.) (, line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	ne 15. ption  (5.) (7. line 25. (b) Amount 0	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	157,065,24
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	170,942,20
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-13,876,96
4	Net unrealized gains (losses) on investments	4	-6,088,25
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV )	8	-17,013,04
9	Total adjustments (net) Add lines 4 - 8	9	-23,101,29
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-36,978,25
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Ret	urn
1	Total revenue, gains, and other support per audited financial statements	1	152,086,06
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		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	-6,467,55
3	Subtract line <b>2e</b> from line <b>1</b>	3	158,553,62
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 164,638		
b	Other (Describe in Part XIV) 4b -1,653,017		
C	Add lines <b>4a</b> and <b>4b</b>	4c	-1,488,37
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	157,065,24
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per R	
1	Total expenses and losses per audited financial statements	1	172,676,85
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	<del>-</del> +	
a	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines <b>2a</b> through <b>2d</b>	2e	3,737,14
3	Subtract line <b>2e</b> from line <b>1</b>	3	168,939,70
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   164,638		
b	Other (Describe in Part XIV)	1	
c	Add lines <b>4a</b> and <b>4b</b>	4c	2,002,49
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18 )	5	170,942,20
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	170,942,2

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

## Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
FIN 48 (ASC 740) footnote		THE ASSOCIATION AND ITS CONSOLIDATED AND COMBINED ENTITIES FOLLOW GUIDANCE ISSUED BY THE FASB WITH RESPECT TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES A TAX POSITION IS RECOGNIZED AS A BENEFIT ONLY IF IT IS "MORE LIKELY THAN NOT" THAT THE TAX POSITION WOULD BE SUSTAINED IN A TAX EXAMINATION, WITH A TAX EXAMINATION BEING PRESUMED TO OCCUR THE AMOUNT RECOGNIZED IS THE LARGEST AMOUNT OF TAX BENEFIT THAT IS GREATER THAN 50% LIKELY OF BEING REALIZED ON EXAMINATION FOR TAX POSITIONS NOT MEETING THE "MORE LIKELY THAN NOT" TEST, NO TAX BENEFIT IS RECORDED THE ASSOCIATION RECOGNIZES INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST AND INCOME TAX EXPENSE, RESPECTIVELY THE ASSOCIATION HAS NO AMOUNTS ACCRUED FOR INTEREST OR PENALTIES AS OF DECEMBER 31, 2011 AND 2010

**Statement of Activities Outside the United States** 

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

DLN: 93493317001162 OMB No 1545-0047

2011

Open to Public Inspection

Internal Revenue Service Name of the organization NATIONAL ASSOCIATION OF REALTORS

**SCHEDULE F** 

Department of the Treasury

(Form 990)

Employer identification number

<b>For grantmakers.</b> D assistance, the gran	tees' eligibility for th	maıntaın recor e grants or ass	istance, and the selec	amount of the grants o tion criteria used to awa	
the grants or assista					│ Yes │ No
For grantmakers. Desc United States	ribe in Part V the orga	nızatıon's procedı	ures for monitoring the us	e of grant funds outside th	e
Activites per Region (				T	
(a) Region	( <b>b</b> ) Number of offices in the region		(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
EUROPE (INCLUDING ICELAND AND GREEN		0		ATTENDANCE AT THE CFREA-KVKL CONGRESS MEETINGS TO SHARE INTL REAL ESTATE INFORMATION AND EXPERIENCES	33,882
SOUTH ASIA		0 0	PROGRAM SERVICES	ATTENDANCE AT THE NARI CONFERENCE TO SUPPORT INDIA AND INTL RE TRADING AND ISSUES	32,299
SOUTH AMERICA		0	PROGRAM SERVICES	NAR OFFICER PARTICIPATION IN THE SECOVI MEETINGS TO SUPPORT EFFORTS TO DEVELOP A CULTURE OF REAL ESTATE MARKETING AND TRADE	30,175
EUROPE (INCLUDING ICELAND AND GREEN	· · · · · · · · · · · · · · · · · · ·	0		ATTENDANCE AT THE FNAIM CONGRESS MEETING TO SUPPORT REAL ESTATE TRADE AND SHARE REAL ESTATE INFORMATION AND EXPERIENCES	25,214
SOUTH ASIA		0	PROGRAM SERVICES	ATTENDANCE AT THE MIEA CONFERENCE IN SUPPORT OF INTERNATIONAL REAL ESTATE TRADE	24,494
RUSSIA AND THE NE INDEPENDENT STAT		0	PROGRAM SERVICES	ATTENDANCE AT THE RUSSIAN FEDERATION CONGRESS MEETING IN SUPPORT OF INTERNATIONAL PROPERTY TRADE	19,486
SOUTH AMERICA		0	PROGRAM SERVICES	ATTENDANCE AT THE COFCI BOARD MEETINGS IN SUPPORT OF INTERNATIONAL REAL ESTATE TRADE	11,886
CENTRAL AMERICA A	AND THE (	0	INVESTMENTS	PASSIVE INVESTMENTS	1,026,690
Sub total					
ı Sub-total • Total from contınuatıoı	n sheets	1			

to Part I

Pai	Part IV,	line 15, for any	sistance to Organ recipient who recesspace is needed.	<b>nizations or Entiti</b> erved more than \$5,	<b>es Outside the Ur</b> ,000. Check this box	<b>nited States.</b> Comp x if no one recipient	plete if the organiza received more thai	tion answered "Yes' n \$5,000	' to Form 990, ▶ 厂
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	( <b>d)</b> Purpose of grant	(e) A mount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nur tax-exempt by	mber of recipie y the IRS, or fo	ent organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	as . •	
3	Enter total nur	mber of other o	organizations or en	tities					(Form 990) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	( <b>d)</b> A mount of cash grant	(e) Manner of cash disbursement	( <b>f</b> ) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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						1	dula E (Earry 000) 2011

## Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	r	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	굣	Yes	Γ	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	<b>V</b>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	<u> </u>	Yes	Γ	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	<b>₽</b>	Νo

Schedule F (Form 990) 2011

Part V Supplemental Information

Complete this part to	provide the information	(see instructions)	required in Part I,	line 2, and any	addıtıonal
information					

information.		
Identifier	ReturnReference	Explanation
Method used to account for expenditures on organization's financial statements	Schedule F, Part I, Line 3	EUROPE (INCLUDING ICELAND AND GREENLAND) CASH SOUTH ASIA CASH SOUTH AMERICA CASH EUROPE (INCLUDING ICELAND AND GREENLAND) CASH SOUTH ASIA CASH RUSSIA AND THE NEWLY INDEPENDENT STATES CASH SOUTH AMERICA CASH CENTRAL AMERICA AND THE CARIBBEAN FMV
-		
		Schedule F (Form 990) 2011

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Schedule I (Form 990)

## **Grants and Other Assistance to Organizations,** Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

► Attach to Form 990

OMB No 1545-0047

DLN: 93493317001162

**Inspection** 

Department of the Treasury Internal Revenue Service

Name of the organization NATIONAL ASSOCIATION OF REALTORS Employer identification number

36-1520690

Part I General Information  1 Does the organization main the selection criteria used to pescribe in Part IV the organization.	tain records to subst to award the grants o anization's procedure	antiate the amount of th r assistance? es for monitoring the use	of grant funds in the U	nited States			✓ Yes   N
Form 990, Part IV	, line 21 for any re	ecipient that received	more than \$5,000.	Check this box if no	o one recipient rec	organization answered elived more than \$5,0	)00. Use
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) REALTORS RELIEF FOUNDATION430 M MICHIGAN AVE CHICAGO,IL 60611	36-4468109	501(C)3	200,000	0	NA	NA	HOUSING RELIEF
(2) NEIGHBORHOODWORKS AMERICA1325 G STREET NW WASHINGTON, DC 20005	52-1148078	501(C)3	25,000	0	NA	NA	HOUSING AND COMMUNITY SUPPORT
(3) HABITAT FOR HUMANITY1511 K STREET NW 605 WASHINGTON, DC 20005	77-0233512	501(C)3	60,000	0	NA	NA	HOUSING ASSISTANCE
<ul><li>2 Enter total number of section</li><li>3 Enter total number of other</li></ul>							<u>3</u>

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Suppleme	ental Information. Complete	this part to provide the information required in Part I, line 2, and any other additional information.
Identifier	Return Reference	Explanation
Procedures for monitoring use of grant funds		GRANTS ARE MADE TO ORGANIZATIONS TO SUPPORT THEIR VARIOUS EXEMPT ACTIVITIES ANY FUNDS DONATED FOR SPECIFIC PROJECTS ARE MONITORED ON AN AS NEEDED BASIS TO ENSURE THAT FUNDS ARE USED FOR THEIR INTENDED PURPOSE

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

DLN: 93493317001162

OMB No 1545-0047

Open to Public Inspection

#### **Schedule J** (Form 990)

Department of the Treasury Internal Revenue Service

**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.

Name of the organization NATIONAL ASSOCIATION OF REALTORS **Employer identification number** 

36-1520690

Pa	rt I Questions Regarding Compensation	า	·			
	_				Yes	Νo
1a	Check the appropriate box(es) if the organization provided by Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	▼ Travel for companions	굣	Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	ᅜ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the org			1b	Yes	
2	Did the organization require substantiation prior to re officers, directors, trustees, and the CEO/Executive			2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the		y			
	Compensation committee		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, For a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t?	4a		Νo
b	Participate in, or receive payment from, a supplemen	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and pro	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	st comp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 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," d			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 section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation			other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) DALE ROSS	(I) (II)	458,778 0	150,000	14,598 0	24,500 0	10,529 0	658,405 0	
(2) RONALD PHIPPS	(I) (II)	0	0	241,583 0	0	0	241,583 0	
(3) MAURICE VEISSI	(I) (II)	0	0	202,547	0	0	202,547 0	
(4) WILLIAM ARMSTRONG	(I) (II)	0	0	184,229	0	0	184,229 0	
(5) DALE STINTON	(ı) (ıı)	1,429,358 0	0	9,156	24,500	10,529 0	1,473,543 0	
(6) BOB GOLDBERG	(ı) (ıı)	485,240 0	171,852	33,167	24,500	10,529 0	725,288 0	
(7) DOUG HINDERER	(ı) (ıı)	295,954 0	114,330	19,523	24,500	10,529 0	464,836 0	
(8) LAURENE JANIK	(ı) (ıı)	416,178 0	158,677	18,725	24,500	10,529 0	628,609 0	
(9) FRANK SIBLEY	(ı) (ıı)	391,063 0	175,688 0	18,792 0	24,500	10,529 0	620,572 0	
(10) JOHN PIERPOINT	(ı) (ıı)	201,435	60,293	3,003	20,159	10,529 0	295,419 0	
(11) WALT WITEK	(ı) (ıı)	315,021 0	78,217	16,838	24,500	10,529 0	445,105 0	
(12) LA WRENCE YUN	(ı) (ıı)	321,376 0	81,808	16,703	24,500	13,235 0	457,622 0	
(13) MARK LESSWING	(ı) (ıı)	323,314 0	82,917	15,033	24,500	10,529 0	456,293 0	
(14) JANET BRANTON	(ı) (ıı)	260,632 0	75,744	29,918	24,500	10,529 0	401,323	
(15) JERRY GIOVANIELLO	(ı) (ıı)	359,537 0	152,864	20,929	24,500 0	10,529 0	568,359 0	

#### 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
First-class or charter travel		INTERESTED PERSONS LISTED ON PART VII, SECTION A, LINE 1A HAVE RECEIVED OR HAVE THE OPTION TO RECEIVE THE BENEFITS IDENTIFIED ON SCHEDULE J, PART I, LINE 1A THESE BENEFITS INCLUDE COMPANION TRAVEL AND TAX INDEMNIFICATION AND GROSS UP PAYMENTS FOR SOME, BENEFITS ALSO INCLUDE FIRST-CLASS AIR TRAVEL, PAYMENTS FOR HEALTH AND SOCIAL CLUB DUES, AND A HOUSING ALLOWANCE OR PAYMENTS FOR BUSINESS USE OF PERSONAL RESIDENCE AS A NATIONAL ASSOCIATION SERVING MORE THAN 1,000,000 MEMBERS, NAR REQUIRES EXTENSIVE TRAVEL FOR INDIVIDUALS HOLDING THE RESPONSIBILITY OF AN OFFICER OF THE BOARD OF DIRECTORS OR A SENIOR VICE PRESIDENT (SVP) THIS TRAVEL REQUIREMENT RANGES FROM 2 TO 6 TRIPS A MONTH AND, IN SOME CASES, IN EXCESS OF 200 DAYS A YEAR PER OFFICER OR SVP NAR REVIEWS ALL BENEFITS PROVIDED TO INTERESTED PERSONS, AND WHERE APPROPRIATE, ADDITIONAL TAXABLE COMPENSATION IS IMPUTED
Travel for companions	Schedule J, Part I, Line 1a	SEE NARRATIVE ABOVE
Tax indemnification and gross-up payments	Schedule J, Part I, Line 1a	SEE NARRATIVE ABOVE
	Schedule J, Part I, Line 1a	SEE NARRATIVE ABOVE
,	Schedule J, Part I, Line 1a	SEE NARRATIVE ABOVE
	Schedule J, Part I, Line 1a	SEE NARRATIVE ABOVE
Personal services		DURING 2011, NAR PAID FOR TAX SERVICES RELATED TO THE PREPARATION OF THE CEO'S PERSONAL INCOME TAX RETURN NAR ALSO PAID FOR TAX OR LEGAL SERVICES FOR CERTAIN SENIOR VICE PRESIDENTS OF THE ORGANIZATION THE RELATED BENEFITS WERE TREATED AS TAXABLE COMPENSATION TO THE RECIPIENTS

Schedule K (Form 990)

**Supplemental Information on Tax Exempt Bonds** 

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).
 ► Attach to Form 990.
 ► See separate instructions.

OMB No 1545-0047

2011

DLN: 93493317001162

Open to Public Inspection

Internal Revenue Service
Name of the organization

Department of the Treasury

NATIONAL ASSOCIATION OF REALTORS

Employer identification number

NAT	NATIONAL ASSOCIATION OF REALTORS									36-1520690				
Pa	art I Bond Issues													
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	<b>(e)</b> Issue Pr	rice (1	f) Description of Purpose		( <b>g)</b> De	(g) Defeased		On alf of suer	olf of finance	
			<del></del>		<u> </u>				Yes	No	Yes	No	Yes	No
A	DISTRICT OF COLUMBIA REVENUE BONDS	00000000	254839G98	12-23-2003	15,000,		BUILD A WAS OFFICE	HINGTON,		×		X		x
Pa	rt III Proceeds					•								
					А		<u> </u>	3		С			D	
	A mount of bonds retired						0							
	A mount of bonds defeased				<del>                                     </del>		0							
3	Total proceeds of issue					5,000,00	_							
4	Gross proceeds in reserve funds					1,500,000						<u> </u>		
5	Capitalized interest from proc					0								
6	Proceeds in refunding escrow					0								
7	Issuance costs from proceed	IS				375,00	0							
8	Credit enhancement from pro	ceeds				0								
9	Working capital expenditures	from proceeds			Τ	0								
10	Capital expenditures from pro	oceeds			1	13,125,000								
11	O ther spent proceeds					0								
12	Other unspent proceeds				1		0							
13	Year of substantial completio	n			200	2004								
					Yes	No	Yes	No	Yes		No	Yes	<u>;                                    </u>	No
14	Were the bonds issued as par	rt of a current refund	ling issue?			Х								
15	Were the bonds issued as part of an advance refunding issue?				Х									
16	Has the final allocation of proceeds been made?			Х										
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?			х										
Pai	rt IIII Private Business l	Jse					_							
					A			3		C		<del></del>	D	
					Yes	No	Yes	No	Yes	$-\!$	No	Yes	<u>'—</u> —	No

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

Χ

	2ddie 17 (1 01111 350) 2011									raye Z	
Par	t IIII Private Business Use (Continued)										
				Α		<u>B</u>		<u>C</u>		D	
3a	Are there any management or service contracts that may result in private use?	business	Yes	No X	Yes	No	Yes	No	Yes	No	
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the final property?										
С	Are there any research agreements that may result in private business use financed property?	e of bond-		х							
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper										
4	Enter the percentage of financed property used in a private business use b other than a section 501(c)(3) organization or a state or local government			0 %		1				1	
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government			0 %							
6	Total of lines 4 and 5			0 %							
7	Has the organization adopted management practices and procedures to en post-issuance compliance of its tax-exempt bond liabilities?	sure the	Х								
Pa	rt IV Arbitrage								-		
		Α			В		С		D		
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	Yes	X	Yes	No		Yes	No	Yes	No No	
2	Is the bond issue a variable rate issue?	X									
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		х								
b	Name of provider				•		•				
С	Term of hedge										
d	Was the hedge superintegrated?										
e	Was a hedge terminated?										
	Were gross proceeds invested in a GIC?		X								
b	Name of provider		•		l		•				
	Term of GIC										

## Part V Procedures To Undertake Corrective Action

Did the bond issue qualify for an exception to rebate?

Was the regulatory safe harbor for establishing the fair market

Were any gross proceeds invested beyond an available temporary

Χ

Χ

#### Part VI Supplemental Information

value of the GIC satisfied?

5

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

Identifier Return Reference Explanation

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493317001162

OMB No 1545-0047

#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Transactions with Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

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

**Inspection** 

Open to Public

Name of the organization NATIONAL ASSOCIATION OF REALTORS	E	Employer identification number										
Part I Excess Benefit Tran	ne a cti	one (s	ection 501	(c)(3) =	and section 501	(c)(4)		6-15206				
Complete if the organizat										ine 40b		
1 (a) Name of disqu	qualified person				(b) Description of transaction						(c) Corrected?	
										Yes	No	
2 Enter the amount of tax impos	ed on t	he orgar	nization man	agers or	disqualified pers	ons dur	ına the v	ear unde	r			
section 4958								🕨	·			
3 Enter the amount of tax, if any	, on line	e 2, abo	ve, reimburs	ed by th	e organızatıon .			🕨	· \$			
Part II Loans to and/or F	From	Intere	sted Dere	ons								
Complete if the organiz					, Part IV, line 26	, or For	m 990-E	Z, Part V	, line 38	a		
	(b) ∟	oan to				(5)	T	(f)		( ) \ \ ( ) \ \ ( ) + \ ( ) + \ ( ) \ (		
(a) Name of interested person and	1	om the	( <b>c)</b> 0 rig		(d)Balance due	(e) defau				(g)Written agreement?		
purpose		ızatıon?	principal a	amount				committee?		ļ -		
	То	From				Yes	No	Yes	No	Yes	No	
							-		+			
				<b>.</b> .								
otal				<b>▶</b> \$	3							
Part III Grants or Assistar Complete if the orga						/. line 2	27.					
•					en interested per			ount of a	rant or to	pe of assi	tance	
(a) Name of interested pers	UII		an	d the or	ganızatıon		(C)AII	lount or g	iant or ty	/pe or assis		
						-+						
						+						

Part IV	Business	<b>Transactions</b>	Involving	Interested	Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
(1) GREG STINTON	FAMILY MEMBER- D STINTON	61,040	NAR EMPLOYEE		No

### Part V Supplemental Information

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

Identifier	Return Reference	Explanation
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Schedule L (Form 990 or 990-EZ) 2011

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493317001162

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.

2011

Open to Public
Inspection

Name of the organization NATIONAL ASSOCIATION OF REALTORS Employer identification number

36-1520690

Identifier	Return Reference	Explanation
Delegate broad authority to a committee	Form 990, Part VI, Section A, Line 1a	THE ORGANIZATIONS BOARD DELEGATES AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY TO THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE SHALL CONSIST OF THE PRESIDENT, THE PRESIDENT-ELECT, THE FIRST VICE PRESIDENT, THE TREASURER, THE REGIONAL VICE PRESIDENTS, THE IMMEDIATE PAST PRESIDENT, THE PAST PRESIDENT TWICE-REMOVED, THE VICE PRESIDENT AND LIAISON TO COMMITTEES, THE VICE PRESIDENT AND LIAISON TO GOVERNMENT AFFAIRS, FOUR OTHER PAST PRESIDENTS, TWELVE MEMBERS WHO HAVE NOT SERVED AS PRESIDENT, TWO MEMBERS FROM THE REAL ESTATE SERVICES ADVISORY BOARD, ONE MEMBER BOARD EXECUTIVE OFFICER, AND ONE APPOINTE OF EACH OF THE INSTITUTES, SOCIETIES AND COUNCILS OF THE NATIONAL ASSOCIATION THE POLITICAL FUNDRAISING CHAIRMAN AND THE MEMBER MOBILIZATION CHAIRMAN SHALL ALSO SERVE AS NON-VOTING MEMBERS OF THE EXECUTIVE COMMITTEE. THE PRESIDENT SHALL APPOINT, EACH YEAR, TWO PAST PRESIDENTS TO SERVE TWO YEAR TERMS, TO SUCCEED THOSE WHOSE TERMS EXPIRE AT THE MEETING OF THE BOARD OF DIRECTORS DURING THE NATIONAL CONVENTION, THE PRESIDENT-ELECT SHALL SUBMIT TO THE BOARD OF DIRECTORS SIX NOMINEES, AT LEAST FOUR OF WHOM ARE DIRECTORS, ONE OF WHOM MAY BE A MEMBER WHO HAS NOT PREVIOUSLY SERVED AS A DIRECTOR, AND ONE OF WHOM MAY BE A MEMBER WHO HAS NOT PREVIOUSLY SERVED AS A DIRECTOR, TO SERVE AS MEMBERS OF THE EXECUTIVE COMMITTEE. THE BOARD OF DIRECTORS SHALL ELECT MEMBERS OF THE EXECUTIVE COMMITTEE THE BOARD OF DIRECTORS SHALL ELECT MEMBERS OF THE EXECUTIVE COMMITTEE. SHALL MEET ON THE CALL OF THE PRESIDENT, THE BOARD OF DIRECTORS OR ANY ELEVEN OF ITS MEMBERS. THE PRESIDENT SHALL ACT AS CHAIRMAN OF THE BOARD OF DIRECTORS OR ANY ELEVEN OF ITS MEMBERS. THE PRESIDENT SHALL ACT AS CHAIRMAN OF THE EXECUTIVE COMMITTEE. SEVENTEEN MEMBERS SHALL CONSTITUTE A QUORUM A MEMBER WHO HAS SERVED AS A MEMBER OF THE EXECUTIVE COMMITTEE FOR LIFE UNLESS SOONER TERMINATED BY RESIGNATION FROM THE COMMITTEE OR THE NATIONAL ASSOCIATION.

ldentifier	Return Reference	Explanation
Family/business relationships amongst interested persons	Form 990, Part VI, Section A, Line 2	MAURICE VEISSI - FAMILY RELATIONSHIP, MADELINE VEISSI - FAMILY RELATIONSHIP, ROBERT GOLDBERG - BUSINESS RELATIONSHIP, RICHARD ROSENTHAL - BUSINESS RELATIONSHIP, MARTIN EDWARDS - BUSINESS RELATIONSHIP, HARLEY E ROUDA - FAMILY RELATIONSHIP, LESLIE R SMITH - FAMILY RELATIONSHIP, ELIZABETH J MENDENHALL - FAMILY RELATIONSHIP, RICHARD A MENDENHALL - FAMILY RELATIONSHIP, RICHARD A MENDENHALL - FAMILY RELATIONSHIP, STEVE ASHER - FAMILY RELATIONSHIP, STEVE ASHER - FAMILY RELATIONSHIP, STEVE ASHER - FAMILY RELATIONSHIP, THOMAS CARNAHAN - FAMILY RELATIONSHIP, THOMAS CARNAHAN - FAMILY RELATIONSHIP, RELATIONSHIP, SHARON KEATING - FAMILY RELATIONSHIP, KEITH KELLEY - FAMILY RELATIONSHIP, KOLLEEN KELLEY - FAMILY RELATIONSHIP, NANCY LANE - FAMILY RELATIONSHIP, JESSE LANE - FAMILY RELATIONSHIP, DEANNA WIENER - FAMILY RELATIONSHIP, RELATIONSHIP, JUNE WIENER - FAMILY RELATIONSHIP

ldentifier	Return Reference	Explanation
MEMBERS OR STOCKHOLDERS	FORM 990, PART VI, LINE 6	PER THE INSTRUCTIONS TO THE FORM 990, A MEMBER, AS REFERRED TO IN PART VI, LINE 6, IS DEFINED AS ANY PERSON WHO HAS THE RIGHT TO 1 ELECT THE MEMBERS OF THE GOVERNING BODY (BUT NOT IF THE MEMBERS OF THE GOVERNING BODY ARE THE ORGANIZATION'S ONLY MEMBERS) OR THEIR DELEGATES, 2 APPROVE OR DENY SIGNIFICANT DECISIONS OF THE GOVERNING BODY, OR 3 RECEIVE A SHARE OF THE ORGANIZATION'S PROFITS OR EXCESS DUES OR A SHARE OF THE ORGANIZATION'S NET ASSETS UPON THE ORGANIZATION'S DISSOLUTION NAR'S MEMBERS DO NOT POSSESS THE KINDS OF RIGHTS OUTLINED ABOVE AS SUCH, THE ORGANIZATION HAS CHECKED "NO" TO THE RESPECTIVE QUESTIONS IN THE FORM 990, PART VI, LINES 6 THROUGH 7B

ldentifier	Return Reference	Explanation
Review of form 990 by governing body	Form 990, Part VI, Section B, Line 11b	THE NATIONAL ASSOCIATION OF REALTORS' FORM 990 REVIEW PROCESS INCLUDED 1) A DETAILED REVIEW BY THE CEO, TREASURER AND COMPTROLLER OF THE ORGANIZATION, 2) A REVIEW BY THE ORGANIZATION'S FINANCE COMMITTEE, INCLUDING A PRESENTATION BY THE PAID TAX PREPARER, AND 3) A FINANCE COMMITTEE REPORT TO THE EXECUTIVE COMMITTEE AND BOARD OF DIRECTORS

ldentifier	Return Reference	Explanation
Conflict of interest policy	VI, Section B,	ON AN ANNUAL BASIS, THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS, OFFICERS, AND KEY EMPLOYEES OF NATIONAL ASSOCIATION OF REALTORS® (NAR) RECEIVE A COPY OF THE CONFLICT OF INTEREST POLICY THIS POLICY REQUIRES THEM TO DISCLOSE ANNUALLY INTERESTS THAT COULD GIVE RISE TO POTENTIAL OR ACTUAL CONFLICTS ANY POTENTIAL OR ACTUAL CONFLICTS OF INTEREST ARE REVIEWED AND EVALUATED BY THE NAR LEGAL DEPARTMENT, FOLLOWED UP ON BY THE ASSOCIATION'S GENERAL COUNSEL, AND SHARED WITH NAR'S LEADERSHIP NAR'S LEADERSHIP DETERMINES THE APPROPRIATE STEPS NECESSARY TO ALLEVIATE, MONITOR, AND DEAL WITH CONFLICTS, SUCH AS RESTRICTING THE ACTIONS OF PERSONS WITH A CONFLICT BY PROHIBITING THEM FROM PARTICIPATING IN THE GOVERNING BODY'S DELIBERATIONS AND DECISIONS FOR A PARTICULAR TRANSACTION

ldentifier	Return Reference	Explanation
WRITTEN DOCUMENT RETENTION AND DESTRUCTION POLICY	l '	CURRENTLY, MANY DIVISIONS AND DEPARTMENTS OF NAR HAVE PROCEDURES IN PLACE FOR DOCUMENT RETENTION AND DESTRUCTION FURTHERMORE, THE LEGAL, FINANCE AND HUMAN RESOURCES DIVISIONS ALL HAVE SPECIFIC PROCEDURES AND POLICIES IN PLACE TO ENSURE THE PROPER RETENTION AND DESTRUCTION OF DOCUMENTS

ldentifier	Return Reference	Explanation
establish	Form 990, Part VI, Section B, Line 15a	NAR RELIES ON A COMPENSATION TEAM TO DETERMINE, REVIEW, AND APPROVE THE COMPENSATION OF THE CEO THE TEAM CONSISTS OF THE FOLLOWING NAR INDEPENDENT BOARD MEMBERS PRESIDENT, PRESIDENT-ELECT AND TREASURER ADDITIONALLY, THE COMPENSATION TEAM IS SUPPORTED BY NAR'S SENIOR VICE PRESIDENT OF HUMAN RESOURCES COMPARABILITY DATA IS USED BY THE COMPENSATION TEAM TO HELP DETERMINE COMPENSATION THE MOST RECENT COMPENSATION STUDY WAS CONDUCTED IN NOVEMBER OF 2011 ON AN ANNUAL BASIS, THE CEO HAS A PERFORMANCE EVALUATION WHICH IS USED IN PART TO DETERMINE ANY CHANGES IN PAY (EX BONUSES AND MERIT INCREASES) IN ADDITION, IF IT IS DETERMINED THAT A SEARCH FOR NEW CEO IS NECESSARY, AN INDEPENDENT CONSULTANT IS HIRED TO ASSIST IN THE COMPENSATION PROCESS THE LAST SEARCH TOOK PLACE IN 2005 USING LEONARD PFEIFFER AS THE PROFESSIONAL CONSULTANT WHEN A NEW CEO IS SELECTED OR WHEN A CONTRACT IS EXTENDED, THE ENTIRE NAR LEADERSHIP TEAM MAKES THE FINAL HIRING AND COMPENSATION DETERMINATION THE DELIBERATIONS AND DECISION MAKING WITH RESPECT TO THE CEO'S COMPENSATION ARE DOCUMENTED ON A TIMELY BASIS BY THE COMPENSATION TEAM THE PROCESS FOR DETERMINING THE COMPENSATION OF THE ORGANIZATION'S CEO WAS LAST UNDERTAKEN IN NOVEMBER OF 2010 FOR THE 2011 CALENDAR YEAR COMPENSATION

ldentifier	Return Reference	Explanation
PROCESS USED TO DETERMINE COMPENSATION FOR OTHER OFFICERS AND KEY EMPLOYEES	FORM 990, PART VI, LINE 15B	NAR USES AN OUTSIDE COMPENSATION CONSULTANT TO HELP DETERMINE THE COMPENSATION PACKAGES FOR THE ORGANIZATION'S OTHER OFFICERS AND KEY EMPLOYEES ONCE NAR'S INDEPENDENT COMPENSATION CONSULTANT DETERMINES THE FINAL COMPENSATION PACKAGES FOR THE ORGANIZATION'S OTHER OFFICERS AND KEY EMPLOYEES, THEY ARE REVIEWED AND APPROVED BY THE CEO IN SUBSEQUENT YEARS, THE ORGANIZATION WILL USE AN INDEPENDENT CONSULTANT ON AN AS NEEDED BASIS THIS PROCESS WAS LAST UNDERTAKEN IN THE FOURTH QUARTER OF 2009 FOR THE 2011 COMPENSATION PACKAGES FOR THE POSITIONS OF *VP FINANCE & COMPTROLLER, *SVP COMMUNICATIONS, *SVP & GENERAL COUNSEL, *SVP HUMAN RESOURCES & OFFICE SERVICES, *SVP MARKETING & BUSINESS DEVELOPMENT

ldentifier	Return Reference	Explanation
		THE GOVERNING DOCUMENTS ARE NOT DISCLOSED TO THE PUBLIC, THE CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST, AND THE FINANCIAL STATEMENTS ARE PROVIDED AS DEEMED APPROPRIATE BY THE COMPTROLLER WITHIN THE GUIDELINES OF NAR'S FINANCIAL DISCLOSURE POLICY

ldentifier	Return Reference	Explanation
Average number of hours devoted per w eek to related organization	Form 990, Part VII, Section A, Column B	WILLIAM ARMSTRONG - DEVOTES APPROXIMATELY HALF AN HOUR A WEEK TO NAR FUND, A RELATED TAX-EXEMPT ENTITY BOB GOLDBERG - DEVOTES APPROXIMATELY 2 HOURS A WEEK TO REALTORS INFORMATION NETWORK AND 3 HOURS A WEEK TO SECOND CENTURY VENTURES, RELATED ORGANIZATIONS JOHN PIERPOINT - DEVOTES APPROXIMATELY 1 HOUR A WEEK TO NAR FUND AND HALF AN HOUR A WEEK TO REALTOR UNIVERSITY AND REALTORS POLITICAL ACTION COMMITTEE, RELATED TAX-EXEMPT ORGANIZATIONS

ldentifier	Return Reference	Explanation
Other changes in net assets or fund balances		NET UNREALIZED GAINS (LOSSES) ON INVESTMENTS6088252, LOSS FROM INVEST IN SUBS 15008472, CHANGE IN RETIREMENT OBLIGATION1379000, PURCHASE OF NONCONTROLLING INT IN SENTRILOCK, LLC1748046, DISTRIBUTION TO SENTRILOCK, LLC MEMBERS270157, RPR CAPITAL CONTRIBUTIONS - 16585150, UNREALIZED LOSS ON SWAP AGREEMENTS816195, CHANGE IN TEMP RES NET ASSETS - RU SCHOLARSHIP FUND CONTRIBUTIONS - 190622,

DLN: 93493317001162

2011

OMB No 1545-0047

Open to Public Inspection

# 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.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
NATIONAL ASSOCIATION OF REALTORS

Employer identification number

36-1520690

Part 1 Identification of Disregarded Entities (Comple	ete if the organization	on answered "Yes	" on Form 990	, Part IV, line 33	.)
(a)  Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
(1) REALTORS PROPERTY RESOURCE LLC 430 N MICHIGAN CHICAGO, IL 60611 36-1520690	MEMBER SERVICES	ΙL	206,345	11,337,496	NAR
				·	

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	(g Section (13) coi organi:	512(b) ntrolled
						Yes	No
(1) REALTORS RELIEF FOUNDATION							
430 N MICHIGAN AVE	DISASTER RELIEF	IL	501(C)(3)	7	NAR	Yes	
CHICAGO, IL 60611 36-4468109							
(2) LEONARD P REAUME MEMORIAL FOUNDATION							
430 N MICHIGAN AVE	EDUCATION	IL	501(C)(3)	PF	NAR	Yes	
CHICAGO, IL 60611 _36-3495865				_			
(3) CENTER FOR SPECIALIZED REALTOR EDUCATION							
430 N MICHIGAN AVE	MEMBER SERVICES	IL	501(C)(6)	N/A	NAR	Yes	
CHICAGO, IL 60611 36-4173556							
(4) REALTORS POLITICAL ACTION COMMITTEE							
430 N MICHIGAN AVE	POLITICAL ACTIVITY	IL	527	N/A	NAR	Yes	
CHICAGO, IL 60611 36-2795122							
(5) NAR FUND							
430 N MICHIGAN AVE	NON-FED ELECTION SUPPORT	IL	527	N/A	NAR	Yes	
CHICAGO, IL 60611 26-1725187	JOPT ON						
(6) NAR CONGRESSIONAL FUND							
430 N MICHIGAN AVE	POLITICAL ACTIVITY	IL	527	N/A	NAR	Yes	
CHICAGO, IL 60611 27-3388377							
(7) REALTOR UNIVERSITY							
430 N MICHIGAN	EDUCATION	IL	501(C)(3)	2	CSRE		No
CHICAGO, IL 60611 45-2102449							

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

<b>(k)</b> Percentage ownership					·
ral or iging	No				
(j) Genera mana <u>c</u> partn	Yes				
(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)					
tionate	No				
(h) Dispropr allocatio	Yes				
(g) Share of end-of- year assets					
<b>(f)</b> Share of total Income					
(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)					
<b>(d)</b> Direct controlling entity					
(c) Legal domicile (state or foreign country)					
Primary activity					·
(a) 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" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total Income	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership
(1) REALTORS INFORMATION NETWORK INC 430 N MICHIGAN AVE CHICAGO, IL 60611 36-3981966	REAL ESTATE INFO	IL	NAR	C CORPORATION	1,728,807	7,366,224	100 000 %
(2) SECOND CENTURY VENTURES LLC 430 N MICHIGAN AVE CHICAGO, IL 60611 26-2041343	REAL ESTATE INFO	IL	NAR	C CORPORATION	1,046,987	6,383,568	100 000 %
(3) SENTRILOCK FINANCE CORP 430 N MICHIGAN AVE CHICAGO, IL 60611 20-3467306	REAL ESTATE SERV	DE	NAR	C CORPORATION	805	1,079,064	100 000 %
(4) SENTRILOCK LLC 2710 EAST KEMPER ROAD CINCINNATI, OH 45241 20-0070121	REAL ESTATE SERV	ОН	NAR	C CORPORATION	12,407,951	6,376,319	1 00 %

(6)

Pali	iransactions with Related Organizations (Complete if the organization answered "Yes" on Form 990,	Part IV, line 34, 35, 3	35A, OF 36.)		
	Note. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No
<b>1</b> Du	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in P	arts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a	Yes	;
b	Gift, grant, or capital contribution to related organization(s)		11	Yes	;
c	Gift, grant, or capital contribution from related organization(s)		10		No
d	Loans or loan guarantees to or for related organization(s)		10	1	No
e	Loans or loan guarantees by related organization(s)		16	2	No
f	Sale of assets to related organization(s)		1f	F	No
g	Purchase of assets from related organization(s)		19	9	No
h	Exchange of assets with related organization(s)		11	h	No
i I	Lease of facilities, equipment, or other assets to related organization(s)		11	i	No
j	Lease of facilities, equipment, or other assets from related organization(s)		1j	i	No
k	Performance of services or membership or fundraising solicitations for related organization(s)		11	k Yes	,
1 1	Performance of services or membership or fundraising solicitations by related organization(s)		11		No
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1r	m Yes	,
n	Sharing of paid employees with related organization(s)		1r	n Yes	i
0	Reimbursement paid to related organization(s) for expenses		10	>	No
р	Reimbursement paid by related organization(s) for expenses		1 <sub>f</sub>	Yes	,
q	O ther transfer of cash or property to related organization(s)		10	Yes	;
r	Other transfer of cash or property from related organization(s)		11	r Yes	,
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered re	lationships and transact	tion thresholds		
	(a) (b) Transaction	(c)	(d)		<u> </u>
	Name of other organization  Transaction type(a-r)	Amount involved	Method of determ involve		iount
<b>1)</b> See	ee Addıtıonal Data Table				
2)					
3)					
4)			+		
٠,					
5)			+		
•					

#### 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

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	<b>(f)</b> Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocation		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)			<b>(k)</b> Percentage ownership
			,	Yes	No			Yes	No		Yes	No	

Schedule R (Form 990) 2011

#### Part VII Supplemental Information

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

Identifier	Return Reference	Explanation
RELATED ORGANIZATIONS		ON DECEMBER 15, 2011, THE NATIONAL ASSOCIATION OF REALTORS BECAME THE SOLE MEMBER OF SENTRILOCK, LLC EFFECTIVE DECEMBER 15, 2011, SENTRILOCK, LLC IS TAXED AS A CORPORATION

Schedule R (Form 990) 2011

**Software ID:** 11000230

**Software Version:** v2011.1.0

**EIN:** 36-1520690

Name: NATIONAL ASSOCIATION OF REALTORS

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

- Torin 990, Schedule R, Fart II - Id			-x				
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	<b>(f)</b> Direct Controlling Entity	contr	-
REALTORS RELIEF FOUNDATION						1	Т
430 N MICHIGAN AVE CHICAGO, IL 60611 36-4468109	DISASTER RELIEF	IL	501(C) (3)	7	NAR	Yes	
LEONARD P REAUME MEMORIAL							
FOUNDATION  430 N MICHIGAN AVE CHICAGO, IL 60611 36-3495865	EDUCATION	IL	501(C) (3)	PF	NAR	Yes	
CENTER FOR SPECIALIZED REALTOR							
EDUCATION  430 N MICHIGAN AVE CHICAGO, IL 60611 36-4173556	MEMBER SERVICES	IL	501(C) (6)	N/A	NAR	Yes	
REALTORS POLITICAL ACTION COMMITTEE  430 N MICHIGAN AVE CHICAGO, IL 60611 36-2795122	POLITICAL ACTIVITY	IL	527	N/A	NAR	Yes	
NAR FUND  430 N MICHIGAN AVE CHICAGO, IL 60611 26-1725187	NON-FED ELECTION SUPPORT	IL	527	N/A	NAR	Yes	
NAR CONGRESSIONAL FUND  430 N MICHIGAN AVE CHICAGO, IL 60611 27-3388377	POLITICAL ACTIVITY	IL	527	N/A	NAR	Yes	
REALTOR UNIVERSITY  430 N MICHIGAN  CHICAGO, IL 60611  45-2102449	EDUCATION	IL	501(C) (3)	2	CSRE		No

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	<b>(b)</b> Transaction type(a-r)	(c) A mount Involved (\$)	(d) Method of determining amount involved
(1)	NAR FUND	В	415,359	CASH
(2)	REALTORS RELIEF FOUNDATION	В	200,000	CASH
(3)	CENTER FOR SPECIALIZED REALTOR EDUCATION	А	131,670	CASH
(4)	CENTER FOR SPECIALIZED REALTOR EDUCATION	К	55,712	CASH
(5)	CENTER FOR SPECIALIZED REALTOR EDUCATION	R	2,942,226	CASH
(6)	REALTORS INFORMATION NETWORK	А	15,215	CASH
(7)	REALTOR INFORMATION NETWORK	К	256,177	CASH
(8)	REALTOR INFORMATION NETWORK	N	323,501	CASH
(9)	REALTOR INFORMATION NETWORK	R	190,441	CASH
(10)	REALTOR PROPERTY RESOURCE	А	27,233	CASH
(11)	REALTORS PROPERTY RESOURCE	К	55,169	CASH
(12)	REALTORS PROPERTY RESOURCE	R	6,202,796	CASH
(13)	SECOND CENTURY VENTURES	А	13,716	CASH
(14)	SECOND CENTURY VENTURES	К	13,610	CASH
(15)	SECOND CENTURY VENTURES	R	388,727	CASH

**Software ID:** 11000230 **Software Version:** v2011.1.0

**EIN:** 36-1520690

Name: NATIONAL ASSOCIATION OF REALTORS

### Form 990, Special Condition Description:

### **Special Condition Description**

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

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours	<b>(C)</b> Position (check all that apply)				ıll		(D) Reportable compensation	(E) Reportable compensation	<b>(F)</b> Estimated amount of other	
	per week	Individual trustiee 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	
GARY THOMAS FIRST VICE PRESIDENT	5 00	Х		х				71,335	0	0	
MAURICE VEISSI PRESIDENT ELECT	5 00	Х		х				202,547	0	0	
RONALD PHIPPS PRESIDENT	5 00	Х		Х				241,583	0	0	
VICKI COX GOLDER IMMEDIATE PAST PRESIDENT	5 00	Х		Х				107,533	0	0	
WILLIAM ARMSTRONG TREASURER	5 00	Х		х				184,229	0	0	
AARON MEYERS DIRECTOR	1 00	Х						0	0	0	
ABBIE HIGASHI DIRECTOR	1 00	Х						0	0	0	
ADORNA CARROLL DIRECTOR	1 00	Х						0	0	0	
ADRIAN ARRIAGA DIRECTOR	1 00	Х						0	0	0	
AL MANSELL DIRECTOR	1 00	Х						0	0	0	
ALAN LONG DIRECTOR	1 00	Х						0	0	0	
ALAN MEHRWEIN DIRECTOR	1 00	Х						0	0	0	
ALAN YASSKY DIRECTOR	1 00	Х						0	0	0	
ALBERT VELTRI DIRECTOR	1 00	Х						0	0	0	
ALFRED DINICOLA DIRECTOR	1 00	Х						0	0	0	
ALICE WALKER DIRECTOR	1 00	Х						0	0	0	
ALLAN DECHERT DIRECTOR	1 00	Х						0	0	0	
ALLEN CHIANG DIRECTOR	1 00	Х						0	0	0	
ALLYSON BERNARD DIRECTOR	1 00	Х						0	0	0	
AMLETO MARTOCCHIA DIRECTOR	1 00	Х						0	0	0	
AMY DORSEY DIRECTOR	1 00	Х						0	0	0	
ANDREA BUSHNELL DIRECTOR	1 00	Х						0	0	0	
ANDREA MCKEY DIRECTOR	1 00	Х						0	0	0	
ANDREW BARBAR DIRECTOR	1 00	Х						0	0	0	
ANDREW DONOHUE DIRECTOR	1 00	x						0	0	0	

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

Compensated Employees, and I	T -	ent Co			ors	1		(5)	<b>/-</b> >	<b>/=</b> \
<b>(A)</b> Name and Title	(B) Average hours per		that a					<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustae 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
ANDREW SCHAUS DIRECTOR	1 00	Х						0	0	0
ANDY NAZAROFF DIRECTOR	1 00	Х						0	0	0
ANGIE KOPKA DIRECTOR	1 00	Х						0	0	0
ANN BONE DIRECTOR	1 00	Х						0	0	0
ANN DEFRIES DIRECTOR	1 00	Х						0	0	0
ANN PETTIJOHN DIRECTOR	1 00	Х						0	0	0
ANN THROCKMORTON DIRECTOR	1 00	Х						0	0	0
ANNA DIMICELI DIRECTOR	1 00	Х						0	0	0
ANNE GAULT DIRECTOR	1 00	Х						0	0	0
ANTHONY GODWIN DIRECTOR	1 00	Х						0	0	0
ANTHONY MAURER DIRECTOR	1 00	Х						0	0	0
ANTHONY SCHIPPA DIRECTOR	1 00	Х						0	0	0
ARLENE DAVIS DIRECTOR	1 00	Х						0	0	0
ARNOLD TESH DIRECTOR	1 00	Х						0	0	0
ART CARTER DIRECTOR	1 00	Х						0	0	0
ART DUEL DIRECTOR	1 00	Х						0	0	0
ART GODI DIRECTOR	1 00	Х						0	0	0
AVIS WUKASCH DIRECTOR	1 00	Х						0	0	0
BARBARA KENNON DIRECTOR	1 00	Х						0	0	0
BARBARA LACH DIRECTOR	1 00	Х						0	0	0
BARBARA SCHMERZLER DIRECTOR	1 00	Х						0	0	0
BARRY LEHANE DIRECTOR	1 00	Х						0	0	0
BELTON JENNINGS DIRECTOR	1 00	Х						0	0	0
BENJAMIN ANDERSON DIRECTOR	1 00	Х						0	0	0
BENJAMIN BLAIR DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and Independent Contractors											
<b>(A)</b> Name and Title	(B) Average hours per		tion ( that a		/)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation	
	week	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
		ğ.	e e			Bred Bred					
BERTON HAMAMOTO DIRECTOR	1 00	Х						0	0	0	
BETH FOLEY DIRECTOR	1 00	Х						0	0	0	
BETH HANSEN DIRECTOR	1 00	Х						0	0	0	
BETH PEERCE DIRECTOR	1 00	Х						0	0	0	
BETTE MCTAMNEY DIRECTOR	1 00	Х						0	0	0	
BETTIE MEINEL DIRECTOR	1 00	Х						0	0	0	
BETTY GONZALEZ DIRECTOR	1 00	Х						0	0	0	
BETTY KISSOCK DIRECTOR	1 00	Х						0	0	0	
BEVERLY PINDLING DIRECTOR	1 00	Х						0	0	0	
BILL BROWN DIRECTOR	1 00	Х						0	0	0	
BILL HEINER DIRECTOR	1 00	Х						0	0	0	
BILL JONES DIRECTOR	1 00	Х						0	0	0	
BILL PLATTOS DIRECTOR	1 00	Х						0	0	0	
BOB FLETCHER DIRECTOR	1 00	Х						0	0	0	
BOB HART DIRECTOR	1 00	Х						0	0	0	
BOB HUDGENS DIRECTOR	1 00	Х						0	0	0	
BOB SNOWDEN DIRECTOR	1 00	Х						0	0	0	
BOB TURNER DIRECTOR	1 00	Х						0	0	0	
BOBBI DECKER DIRECTOR	1 00	Х						0	0	0	
BONNIE CASPER DIRECTOR	1 00	Х						0	0	0	
BONNIE FITZGERALD DIRECTOR	1 00	Х						0	0	0	
BONNIE LAZAR DIRECTOR	1 00	Х						0	0	0	
BONNIE SIECKER DIRECTOR	1 00	Х						0	0	0	
BONNIE SMITH DIRECTOR	1 00	Х						0	0	0	
BRAD KNAPP DIRECTOR	1 00	Х						0	0	0	

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per		that a		у)	_		( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation	
	week	Individual trustae 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	
BRADLEY BENNETT DIRECTOR	1 00	×						0	0	0	
BRENDA FIORETTI DIRECTOR	1 00	Х						0	0	0	
BRENDA GHIBAUDI DIRECTOR	1 00	Х						0	0	0	
BRENDA OLIVER DIRECTOR	1 00	Х						0	0	0	
BRENDA SMALL DIRECTOR	1 00	Х						0	0	0	
BRENDA TOSADO DIRECTOR	1 00	х						0	0	0	
BRENDAN GRADY DIRECTOR	1 00	Х						0	0	0	
BRIAN BENTON DIRECTOR	1 00	Х						0	0	0	
BRIDGET REYNOLDS DIRECTOR	1 00	х						0	0	0	
BROOKE HUNT DIRECTOR	1 00	х						0	0	0	
BRUCE AYDT DIRECTOR	1 00	Х						0	0	0	
BRUCE KAMMER DIRECTOR	1 00	Х						0	0	0	
BRUCE WILLIAMS DIRECTOR	1 00	Х						0	0	0	
BUDD BATTERSON DIRECTOR	1 00	х						0	0	0	
BUDGE HUSKEY DIRECTOR	1 00	х						0	0	0	
C JOYNER DIRECTOR	1 00	х						0	0	0	
C LAMONT BRELAND DIRECTOR	1 00	Х						0	0	0	
CANDICE CARPENTER DIRECTOR	1 00	Х						0	0	0	
CAREY JENSEN DIRECTOR	1 00	Х						0	0	0	
CARLOS BUJOSA DIRECTOR	1 00	Х						0	0	0	
CARLOS FUENTES DIRECTOR	1 00	Х						0	0	0	
CARLOTTA ACKLEY DIRECTOR	1 00	Х						0	0	0	
CARLTON LEE MCCLELLAND DIRECTOR	1 00	Х						0	0	0	
CARMEN MERCADO DIRECTOR	1 00	Х						0	0	0	
CAROL FACCIPONTI DIRECTOR	1 00	х						0	0	0	

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per		tion ( that a		/)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> 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	
CAROL HILL DIRECTOR	1 00	Х						0	0	0	
CAROL MANGAN DIRECTOR	1 00	Х						0	0	0	
CAROLE MACLURE DIRECTOR	1 00	Х						0	0	0	
CAROLINA JEMISON DIRECTOR	1 00	Х						0	0	0	
CAROLYN DAGOSTA DIRECTOR	1 00	Х						0	0	0	
CAROLYN DOZOIS DIRECTOR	1 00	Х						0	0	0	
CAROLYN STIFFLER DIRECTOR	1 00	Х						0	0	0	
CATHERINE WHATLEY DIRECTOR	1 00	Х						0	0	0	
CATHY WERNER DIRECTOR	1 00	Х						0	0	0	
CHAILLE RALPH DIRECTOR	1 00	Х						0	0	0	
CHARLES KITCHEN DIRECTOR	1 00	Х						0	0	0	
CHARLES MCMILLAN DIRECTOR	1 00	Х						0	0	0	
CHARLES MELIDOSIAN DIRECTOR	1 00	Х						0	0	0	
CHARLES OPPLER DIRECTOR	1 00	Х						0	0	0	
CHARLES SHOOK DIRECTOR	1 00	Х						0	0	0	
CHARLES VERWILT DIRECTOR	1 00	Х						0	0	0	
CHARLES WILLS DIRECTOR	1 00	Х						0	0	0	
CHARLEY RAY DIRECTOR	1 00	Х						0	0	0	
CHARLIE MURPHY DIRECTOR	1 00	Х						0	0	0	
CHARLOTTE SEARS DIRECTOR	1 00	Х						0	0	0	
CHERYL HAMM DIRECTOR	1 00	Х						0	0	0	
CHRIS GALLER DIRECTOR	1 00	Х						0	0	0	
CHRIS KYLER DIRECTOR	1 00	Х						0	0	0	
CHRIS POLYCHRON DIRECTOR	1 00	Х						0	0	0	
CHRIS READ DIRECTOR	1 00	Х						0	0	0	

Compensated Employees, and Independent Contractors												
<b>(A)</b> Name and Title	(B) Average hours per		(tion that a		y)			( <b>D)</b> Reportable compensation from the	(E) Reportable compensation from related	<b>(F)</b> 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		
CHRIS SLOAN DIRECTOR	1 00	×						О	o	0		
CHRISTIE O'NEIL DIRECTOR	1 00	х						0	0	0		
CHRISTINA BANASIAK DIRECTOR	1 00	×						0	0	0		
CHRISTINA CLEMANS DIRECTOR	1 00	Х						0	0	0		
CHRISTINE KUTZKEY DIRECTOR	1 00	Х						0	0	0		
CHRISTINE MCNAUGHT DIRECTOR	1 00	Х						0	0	0		
CHRISTOPHER MCELROY DIRECTOR	1 00	Х						0	0	0		
CHRISTOPHER PARIS DIRECTOR	1 00	×						0	0	0		
CHRISTOPHER TENGGREN DIRECTOR	1 00	Х						0	0	0		
CINDY ARIOSA DIRECTOR	1 00	Х						0	0	0		
CINDY CHANDLER DIRECTOR	1 00	Х						0	0	0		
CINDY MARSH TICHY DIRECTOR	1 00	Х						0	0	0		
CLAIRE WILLIAMS DIRECTOR	1 00	Х						0	0	0		
CLARK E WALLACE DIRECTOR	1 00	х						0	0	0		
COLLEEN BADAGLIACCO DIRECTOR	1 00	Х						0	0	0		
CONNIE KYLE DIRECTOR	1 00	х						0	0	0		
COURTNEY ROSE DIRECTOR	1 00	Х						0	0	0		
CRAIG OWEN DIRECTOR	1 00	Х						0	0	0		
CRAIG SANFORD DIRECTOR	1 00	Х						0	0	0		
CYNTHIA BUTTS DIRECTOR	1 00	Х						0	0	0		
CYNTHIA RAGLAND DIRECTOR	1 00	Х						0	0	0		
CYNTHIA SHELTON DIRECTOR	1 00	Х						0	0	0		
CYNTHIA STACKHOUSE DIRECTOR	1 00	Х						0	0	0		
D GARY ROGERS DIRECTOR	1 00	Х						0	0	0		
DALE PETERSON DIRECTOR	1 00	x						0	0	0		

Compensated Employees, ar	<del> </del>	lent C			LOIS	•		(D)	<b>(F)</b>	<b>(F)</b>
( <b>A)</b> Name and Title	(B) Average hours per		tion that a		/)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	per week	Individual trustie 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
DALE ROSS DIRECTOR	1 00	Х						623,376	0	35,029
DANA BAUGUSS DIRECTOR	1 00	Х						0	0	0
DANIEL FORSMAN DIRECTOR	1 00	Х						0	0	0
DANIEL HARTNETT DIRECTOR	1 00	Х						0	0	0
DANIEL SIGHT DIRECTOR	1 00	Х						0	0	0
DANIEL WAGNER DIRECTOR	1 00	Х						0	0	0
D'ANN JACKSON DIRECTOR	1 00	Х						0	0	0
DANNY BROCK DIRECTOR	1 00	Х						0	0	0
DANNY FRANK DIRECTOR	1 00	Х						0	0	0
DAPHNA FIELDS DIRECTOR	1 00	Х						0	0	0
DARRELL WATSON DIRECTOR	1 00	Х						0	0	0
DARYL BRAHAM DIRECTOR	1 00	Х						0	0	0
DAVE COBO DIRECTOR	1 00	Х						0	0	0
DAVE GOFF DIRECTOR	1 00	Х						0	0	0
DAVID BARCA DIRECTOR	1 00	Х						0	0	0
DAVID BERT DIRECTOR	1 00	Х						0	0	0
DAVID BRADLEY DIRECTOR	1 00	Х						0	0	0
DAVID BURNETT DIRECTOR	1 00	Х						0	0	0
DAVID CABOT DIRECTOR	1 00	Х						0	0	0
DAVID CALLAHAN DIRECTOR	1 00	Х						0	0	0
DAVID FIALK DIRECTOR	1 00	Х						0	0	0
DAVID HANNA DIRECTOR	1 00	Х						0	0	0
DAVID LANPHER DIRECTOR	1 00	Х						0	0	0
DAVID LECRAW DIRECTOR	1 00	Х						0	0	0
DAVID LOCKWOOD DIRECTOR	1 00	×						0	0	0

Compensated Employees, and	Independ	lent C	onti	act	tors	<u> </u>		, , ,		
(A) Name and Title	(B) Average hours per		tion (		/)	_		( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustae 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
DAVID MAY DIRECTOR	1 00	×						0	0	0
DAVID MCILVAINE DIRECTOR	1 00	Х						0	0	0
DAVID OSBORN DIRECTOR	1 00	Х						0	0	0
DAVID PERETTI DIRECTOR	1 00	Х						0	0	0
DAVID PHILLIPS DIRECTOR	1 00	Х						0	0	0
DAVID SCHOEPF DIRECTOR	1 00	Х						0	0	0
DAVID SOMERS DIRECTOR	1 00	Х						0	0	0
DAVID TANGVALD DIRECTOR	1 00	Х						0	0	0
DAVID TANNER DIRECTOR	1 00	Х						0	0	0
DAVID TINA DIRECTOR	1 00	Х						0	0	0
DAVID WALSH DIRECTOR	1 00	Х						0	0	0
DAVID WLUKA DIRECTOR	1 00	Х						0	0	0
DAVID ZIMMER DIRECTOR	1 00	Х						0	0	0
DEAN ROUSO DIRECTOR	1 00	Х						0	0	0
DEANNA DIPO DIRECTOR	1 00	Х						0	0	0
DEANNA WIENER DIRECTOR	1 00	Х						0	0	0
DEBBIE RAWLS DIRECTOR	1 00	Х						0	0	0
DEBORAH HEFFERNAN DIRECTOR	1 00	Х						0	0	0
DEBRA HOWARD DIRECTOR	1 00	Х						0	0	0
DEBRA JUNKIN DIRECTOR	1 00	Х						0	0	0
DEE DENTON DIRECTOR	1 00	Х						0	0	0
DELILAH KENNEN DIRECTOR	1 00	Х						0	0	0
DENISE JASINSKI DIRECTOR	1 00	Х						0	0	0
DENISE MARX DIRECTOR	1 00	Х						0	0	0
DENISE TATMAN DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and	Independ	ent C	onti	act	tors	<u> </u>				
(A) Name and Title	(B) Average hours per		(tion that a		y)	_		( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustae 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
DENNIS CRONK DIRECTOR	1 00	Х						0	0	0
DENNIS NEVIUS DIRECTOR	1 00	Х						0	0	0
DERENDA GRUBB DIRECTOR	1 00	Х						0	0	0
DIANA BULL DIRECTOR	1 00	Х						0	0	0
DIANA SUTHERLAND	1 00	Х						0	0	0
DIRECTOR DIANA WOOD	1 00	X						0	0	0
DIRECTOR DIANE DILZELL	1 00	X						0	0	0
DIRECTOR DIANE DISBROW										
DIRECTOR DIANE MANNS	1 00	Х						0	0	0
DIRECTOR	1 00	Х						0	0	0
DIANE SCHERER DIRECTOR	1 00	Х						0	0	0
DJ OLIVER DIRECTOR	1 00	Х						0	0	0
DJ SNAPP DIRECTOR	1 00	Х						0	0	0
DOLORES KNUDSEN DIRECTOR	1 00	Х						0	0	0
DOMINIC CARDONE DIRECTOR	1 00	Х						0	0	0
DON FAUGHT DIRECTOR	1 00	Х						0	0	0
DON MASON DIRECTOR	1 00	Х						0	0	0
DON READINGER DIRECTOR	1 00	Х						0	0	0
DON RILEY DIRECTOR	1 00	Х						0	0	0
DONALD ASHER DIRECTOR	1 00	Х						0	0	0
DONALD MARPLE DIRECTOR	1 00	Х						0	0	0
DONALD ROTH DIRECTOR	1 00	Х						0	0	0
DONALD SCANLON	1 00	Х						0	0	0
DIRECTOR  DONALD TREADWELL  DIRECTOR	1 00	Х						0	0	0
DONNA KOSTELECKY DIRECTOR	1 00	X						0	0	0
DONNA SMITH DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and	Independ	lent C	onti	act	tors	·				
(A) Name and Title	(B) Average hours per		tion ( that a		/)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
		Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
DONNA ZEREGA DIRECTOR	1 00	×						О	0	0
DORCAS HELFANT-BROWNING DIRECTOR	1 00	Х						0	0	0
DOUGLAS ANDREWS DIRECTOR	1 00	X						0	0	0
DOUGLAS AZARIAN DIRECTOR	1 00	Х						0	0	0
DOUGLAS BARBER DIRECTOR	1 00	Х						0	0	0
DOUGLAS CARPENTER DIRECTOR	1 00	Х						0	0	0
DOUGLAS EMDE DIRECTOR	1 00	Х						0	0	0
DOUGLAS HARDY DIRECTOR	1 00	Х						0	0	0
DOUGLAS MCCLOUD DIRECTOR	1 00	Х						0	0	0
DOUGLAS SMITH DIRECTOR	1 00	X						0	0	0
DOYLE YATES DIRECTOR	1 00	Х						0	0	0
DREW FISHMAN DIRECTOR	1 00	Х						0	0	0
DUANE FOUTS DIRECTOR	1 00	Х						0	0	0
DUANE UHLIR DIRECTOR	1 00	Х						0	0	0
DUNCAN MACKENZIE DIRECTOR	1 00	Х						0	0	0
DWIGHT HALE DIRECTOR	1 00	Х						0	0	0
E ALICE MIRANDA DIRECTOR	1 00	Х						0	0	0
E LEONARD FERBER DIRECTOR	1 00	Х						0	0	0
EBBY HALLIDAY DIRECTOR	1 00	Х						0	0	0
EDMUND WOODS DIRECTOR	1 00	Х						0	0	0
EDWARD BROWN DIRECTOR	1 00	Х						0	0	0
EDWARD KRAUZE DIRECTOR	1 00	Х						0	0	0
EDWARD MURPHY DIRECTOR	1 00	Х						0	0	0
EDWARD WARD DIRECTOR	1 00	Х						0	0	0
ELIZABETH BLAKE DIRECTOR	1 00	Х						0	0	0

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

Compensated Employees, and		ent C			UFS			(D)	(E)	<b>(E)</b>
<b>(A)</b> Name and Title	(B) Average hours per		ition that		/)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustae 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
ELIZABETH DUENAS DIRECTOR	1 00	Х						0	0	0
ELIZABETH MENDENHALL DIRECTOR	1 00	Х						0	0	0
ELIZABETH NUNAN DIRECTOR	1 00	Х						0	0	0
ELLEN RENISH DIRECTOR	1 00	х						0	0	0
ELMORE COTTON DIRECTOR	1 00	Х						0	0	0
ELOISE MARTIN DIRECTOR	1 00	Х						0	0	0
EMIL MONGEON DIRECTOR	1 00	Х						0	0	0
ENNIS ANTOINE DIRECTOR	1 00	Х						0	0	0
ERIC LOCHER DIRECTOR	1 00	Х						0	0	0
ERIK WEICHELT DIRECTOR	1 00	Х						0	0	0
ESTHER LEMIEUX DIRECTOR	1 00	Х						0	0	0
EVAN FUCHS DIRECTOR	1 00	Х						0	0	0
EVERETT KNIGHT DIRECTOR	1 00	Х						0	0	0
FRAN DAVIS DIRECTOR	1 00	Х						0	0	0
FRANCOIS GREGOIRE DIRECTOR	1 00	Х						0	0	0
FRANK ANTHONY DIRECTOR	1 00	Х						0	0	0
FRANK CONSTANTINO DIRECTOR	1 00	Х						0	0	0
FRANK JACOVINI DIRECTOR	1 00	Х						0	0	0
FRANK KOWALSKI DIRECTOR	1 00	Х						0	0	0
FRANK SIMPSON DIRECTOR	1 00	Х						0	0	0
FRANK SPENCER DIRECTOR	1 00	Х						0	0	0
FRANK URSO DIRECTOR	1 00	Х						0	0	0
FRANKLIN SERIO DIRECTOR	1 00	Х						0	0	0
FRED COLBY DIRECTOR	1 00	Х						0	0	0
FRED PRASSAS DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and	Independ	lent C	óntr	act	ors	<u> </u>				
(A) Name and Title	(B) Average hours per		tion that a		/)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustae 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
FURHAD WAQUAD DIRECTOR	1 00	Х						0	0	0
GAIL HARTNETT DIRECTOR	1 00	Х						0	0	0
GARY CLAYTON DIRECTOR	1 00	Х						0	0	0
GARY KENLINE DIRECTOR	1 00	Х						0	0	0
GARY KRYSLER DIRECTOR	1 00	Х						0	0	0
GARY LARGE DIRECTOR	1 00	Х						0	0	0
GARY LEOGRANDE DIRECTOR	1 00	х						0	0	0
GARY MAJORS DIRECTOR	1 00	Х						0	0	0
GARY MORSE DIRECTOR	1 00	х						0	0	0
GARY REGGISH DIRECTOR	1 00	Х						0	0	0
GAY DILLASHAW DIRECTOR	1 00	Х						0	0	0
GENE FERCODINI DIRECTOR	1 00	Х						0	0	0
GENE WARD DIRECTOR	1 00	Х						0	0	0
GENIE BIRCH DIRECTOR	1 00	Х						0	0	0
GEOFF MCINTOSH DIRECTOR	1 00	Х						0	0	0
GEORGE PEEK DIRECTOR	1 00	Х						0	0	0
GEORGE STEPHENS DIRECTOR	1 00	Х						0	0	0
GEORGIA MEACHAM DIRECTOR	1 00	Х						0	0	0
GILLES RICOUR DE BOUGIES DIRECTOR	1 00	Х						0	0	0
GINA GRANT DIRECTOR	1 00	Х						0	0	0
GINGER DOWNS DIRECTOR	1 00	Х						0	0	0
GINNY SHIPE DIRECTOR	1 00	Х						0	0	0
GLENN CONROY DIRECTOR	1 00	Х						0	0	0
GLENN GARDNER DIRECTOR	1 00	х						0	0	0
GLENN HELLYER DIRECTOR	1 00	х						0	0	0

Compensated Employees, and	Independ	lent C	ontr	act	tors	•				
(A) Name and Title	(B) Average hours per		tion that a		y)		ı	( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustae 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
GLENN VATTEROTT DIRECTOR	1 00	X						0	0	0
GLORIA BOWMAN DIRECTOR	1 00	Х						0	0	0
GLORIA FARRAR DIRECTOR	1 00	X						0	0	0
GORDON MCCANN DIRECTOR	1 00	Х						0	0	0
GORDON SNYDER DIRECTOR	1 00	Х						0	0	0
GREG ZADEL DIRECTOR	1 00	Х						0	0	0
GREGORY HERB DIRECTOR	1 00	Х						0	0	0
GREGORY HRABCAK DIRECTOR	1 00	Х						0	0	0
GREGORY PAWLIK DIRECTOR	1 00	Х						0	0	0
GREGORY ROKEH DIRECTOR	1 00	Х						0	0	0
GRETCHEN FABER DIRECTOR	1 00	Х						0	0	0
GUY MATTEO DIRECTOR	1 00	Х						0	0	0
GUYLA GREENLY DIRECTOR	1 00	Х						0	0	0
H SUE WISKOWSKI-FAIR DIRECTOR	1 00	Х						0	0	0
HARLEY ROUDA DIRECTOR	1 00	Х						0	0	0
HARLEY SNYDER DIRECTOR	1 00	Х						0	0	0
HEATH HILGENBERG DIRECTOR	1 00	Х						0	0	0
HEATHER OZUR DIRECTOR	1 00	Х						0	0	0
HELEN HANNA CASEY DIRECTOR	1 00	Х						0	0	0
HELEN JARRATT DIRECTOR	1 00	Х						0	0	0
HENRY FRIES DIRECTOR	1 00	Х						0	0	0
HENRY KAMMANDEL DIRECTOR	1 00	Х						0	0	0
HENRY RAY DIRECTOR	1 00	Х						0	0	0
HENRY WHITE DIRECTOR	1 00	Х						0	0	0
HOLLY MABERY DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and	Independ	ent C	ontr	act	ors	·				
<b>(A)</b> Name and Title	(B) Average hours per		tion that a		/)			<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> 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
HOPE WHITE DIRECTOR	1 00	Х						0	0	0
HOWARD SMITH DIRECTOR	1 00	Х						0	0	0
IGNACIO OSORIO DIRECTOR	1 00	Х						0	0	0
ILENE KESSLER DIRECTOR	1 00	Х						0	0	0
IRMA VARGAS DIRECTOR	1 00	Х						0	0	0
IVELISSE FIGUEROA ARCHEVALI DIRECTOR	1 00	X						0	0	0
J COLLEEN GUNDERSON DIRECTOR	1 00	X						0	0	0
J D RINEHART DIRECTOR	1 00	Х						0	0	0
J DANNY COOPER DIRECTOR	1 00	Х						0	0	0
J GREGORY CONNORS DIRECTOR	1 00	X						0	0	0
J LENNOX SCOTT DIRECTOR	1 00	Х						0	0	0
J NICHOLAS D'AMBROSIA DIRECTOR	1 00	Х						0	0	0
JACK LEVINE DIRECTOR	1 00	Х						0	0	0
JACK TORZA DIRECTOR	1 00	Х						0	0	0
JACK WOODCOCK DIRECTOR	1 00	Х						0	0	0
JAMES ASBURY DIRECTOR	1 00	Х						0	0	0
JAMES BRINGHURST DIRECTOR	1 00	Х						0	0	0
JAMES CORMIER DIRECTOR	1 00	Х						0	0	0
JAMES HEIDISCH DIRECTOR	1 00	Х						0	0	0
JAMES HELSEL DIRECTOR	1 00	Х						0	0	0
JAMES KINNEY DIRECTOR	1 00	Х						0	0	0
JAMES LIPTAK DIRECTOR	1 00	Х						0	0	0
JAMES SELVEY DIRECTOR	1 00	Х						0	0	0
JAMES SEXTON DIRECTOR	1 00	Х						0	0	0
JAMES STOFKO DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and	Independ	ent C	ontr	act	ors	3				
(A) Name and Title	(B) Average hours per		tion (		/)			<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> 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
JAMES TSIGHIS	1 00	Х						0	0	0
DIRECTOR JAMIE HOLT										
DIRECTOR JAMIE MOORE	1 00	X						0	0	
DIRECTOR	1 00	Х						0	0	0
JAN BAKER DIRECTOR	1 00	Х						0	0	0
JAN CULLIVAN DIRECTOR	1 00	Х						0	0	0
JAN ELLINGSON DIRECTOR	1 00	Х						0	0	0
JAN LEIGHTON	1 00	Х						0	0	0
DIRECTOR JANA WAYCASTER	1 00	Х						0	0	0
DIRECTOR JANET SCAVO	1 00	X						0		0
DIRECTOR JANETTE BRUZAS										
DIRECTOR JANICE SMARTO	1 00	Х						0	0	0
DIRECTOR	1 00	Х						0	0	0
JARED MARTIN DIRECTOR	1 00	Х						0	0	0
JARROD GRASSO DIRECTOR	1 00	Х						0	0	0
JASON WRIGHT DIRECTOR	1 00	Х						0	0	0
JAY GOHIL DIRECTOR	1 00	Х						0	0	0
JAY GUPTA DIRECTOR	1 00	Х						0	0	0
JAYNE COX DIRECTOR	1 00	Х						0	0	0
JEAN TIETGEN DIRECTOR	1 00	Х						0	0	0
JEANNE KOZAK DIRECTOR	1 00	Х						0	0	0
JEANNE RADSICK DIRECTOR	1 00	Х						0	0	0
JEANNETTE WAY DIRECTOR	1 00	Х						0	0	0
JEFF BARNETT DIRECTOR	1 00	Х						0	0	0
JEFF SPOSITO DIRECTOR	1 00	Х						0	0	0
JEFFREY NELSON DIRECTOR	1 00	Х						0	0	0
JEFFREY UPDIKE DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and	Independ	ent C	ontr	act	ors					
<b>(A)</b> Name and Title	(B) Average hours per		tion (		/)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> 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
JENNIFER FRONTERA	1 00	X						0	0	0
DIRECTOR  JENNIFER PIGLOWSKI-SAHRMANN  DIRECTOR	1 00	×						0		
JEREMY STARR DIRECTOR	1 00	Х						0	0	0
JERRY DEL RIO DIRECTOR	1 00	Х						0	0	0
JERRY LYONS DIRECTOR	1 00	Х						0	0	0
JERRY TEESON DIRECTOR	1 00	Х						0	0	0
JESSE ACEVEDO DIRECTOR	1 00	X						0	0	0
JESSE LANE DIRECTOR	1 00	X						0	0	0
JEWELL MCKINNEY DIRECTOR	1 00	Х						0	0	0
JILL BECK DIRECTOR	1 00	Х						0	0	0
JIM DIERST DIRECTOR	1 00	Х						0	0	0
JIM HAMILTON DIRECTOR	1 00	Х						0	0	0
JIMMY LA PETER DIRECTOR	1 00	Х						0	0	0
JO JENKINS DIRECTOR	1 00	Х						0	0	0
JOAN BALLANTYNE DIRECTOR	1 00	Х						0	0	0
JOAN SERAMUR DIRECTOR	1 00	Х						0	0	0
JOAN SHANKS DIRECTOR	1 00	Х						0	0	0
JOAN WITTER DIRECTOR	1 00	X						0	0	0
JOANN HANSEN DIRECTOR	1 00	Х						0	0	0
JOANNE DARLING DIRECTOR	1 00	Х						0	0	0
JOANNE POOLE DIRECTOR	1 00	Х						0	0	0
JOAO CRESTANA DIRECTOR	1 00	Х						0	0	0
JOE HANAUER DIRECTOR	1 00	Х						0	0	0
JOE STEWART DIRECTOR	1 00	Х						0	0	0
JOEL SINGER DIRECTOR	1 00	Х						0	0	0

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

Compensated Employees, and (A)	(B)			C)				(D)	(E)	(F)
Name and Title	A verage hours		ition that a	(che		all		Reportable compensation	Reportable compensation	Estimated amount of other
	per week	Individual trustae 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
JOHN ASDOURIAN DIRECTOR	1 00	Х						0	0	0
JOHN BROCKER DIRECTOR	1 00	Х						0	0	0
JOHN DICKINSON DIRECTOR	1 00	х						0	0	0
JOHN DOHM DIRECTOR	1 00	х						0	0	0
JOHN ECKSTRUM DIRECTOR	1 00	Х						0	0	0
JOHN FERGUSON DIRECTOR	1 00	х						0	0	0
JOHN FLOR DIRECTOR	1 00	Х						0	0	0
JOHN FRIDLINGTON DIRECTOR	1 00	Х						0	0	0
JOHN GATTERMEIR DIRECTOR	1 00	х						0	0	0
JOHN GRIESS DIRECTOR	1 00	х						0	0	0
JOHN HARRISON DIRECTOR	1 00	Х						0	0	0
JOHN HORNING DIRECTOR	1 00	х						0	0	0
JOHN HORTON DIRECTOR	1 00	х						0	0	0
JOHN KMIECIK DIRECTOR	1 00	х						0	0	0
JOHN KRETCHMAR DIRECTOR	1 00	х						0	0	0
JOHN LEARY DIRECTOR	1 00	х						0	0	0
JOHN LYNCH DIRECTOR	1 00	Х						0	0	0
JOHN MCARDLE DIRECTOR	1 00	х						0	0	0
JOHN MCCORMICK DIRECTOR	1 00	Х						0	0	0
JOHN MCKENZIE DIRECTOR	1 00	х						0	0	0
JOHN POWELL DIRECTOR	1 00	Х						0	0	0
JOHN RICE DIRECTOR	1 00	х						0	0	0
JOHN RURKOWSKI DIRECTOR	1 00	х						0	0	0
JOHN SMABY DIRECTOR	1 00	х						0	0	0
JOHN STEFFEY DIRECTOR	1 00	х						0	0	0

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

Compensated Employees, and (A)	(B)			C)				(D)	(E)	(F)
Name and Title	A verage hours per		ition that a	(che	y)	_		Reportable compensation from the	Reportable compensation from related	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
JOHN STIH DIRECTOR	1 00	х						0	0	0
JOHN TORRES DIRECTOR	1 00	×						0	0	0
JOHN VRANAS DIRECTOR	1 00	х						0	0	0
JOHN WOERNER DIRECTOR	1 00	Х						0	0	0
JOHN WOOD DIRECTOR	1 00	Х						0	0	0
JOHN WOOD DIRECTOR	1 00	Х						0	0	0
JOHN YEN WONG	1 00	Х						0	0	0
DIRECTOR JONATHAN NICHOLAS DIRECTOR	1 00	Х						0	0	0
JONATHAN WALLACE DIRECTOR	1 00	х						0	0	0
JOSEPH BROWN DIRECTOR	1 00	Х						0	0	0
JOSEPH CANFORA DIRECTOR	1 00	х						0	0	0
JOSEPH CARNAHAN DIRECTOR	1 00	х						0	0	0
JOSEPH D'AMATO DIRECTOR	1 00	Х						0	0	C
JOSEPH FUNKHOUSER DIRECTOR	1 00	х						0	0	0
JOSEPH REIS JR DIRECTOR	1 00	Х						0	0	C
JOSEPH SCHUTT DIRECTOR	1 00	Х						0	0	C
JOSEPH SIMMS DIRECTOR	1 00	Х						0	0	C
JOYCE NAKAMURA DIRECTOR	1 00	х						0	0	0
JOYCE THOMAS DIRECTOR	1 00	Х						0	0	0
JUDITH LEWIS DIRECTOR	1 00	х						0	0	C
JUDITH MYERS DIRECTOR	1 00	Х						0	0	C
JUDY APPLEBY DIRECTOR	1 00	Х						0	0	0
JUDY ELLIS DIRECTOR	1 00	Х						0	0	C
JUDY JONES DIRECTOR	1 00	Х						0	0	C
JUDY MOORE DIRECTOR	1 00	х						0	0	0

Compensated Employees, and Independent Contractors											
<b>(A)</b> Name and Title	(B) A verage hours per week		(tion that a		y)	_		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	<b>(F)</b> Estimated amount of other compensation	
		Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			from the organization and related organizations	
JUDY ZEIGLER DIRECTOR	1 00	x						0	0	0	
JULIO LAGUARTA DIRECTOR	1 00	Х						0	0	0	
JULIUS CARTWRIGHT DIRECTOR	1 00	×						0	0	0	
JUNE WIENER DIRECTOR	1 00	Х						0	0	0	
K ADRIAN HUNNINGS DIRECTOR	1 00	Х						0	0	0	
KAKI LYBBERT DIRECTOR	1 00	Х						0	0	0	
KAREN GEHLE DIRECTOR	1 00	Х						0	0	0	
KAREN SMITH DIRECTOR	1 00	Х						0	0	0	
KAREN TRAINOR DIRECTOR	1 00	Х						0	0	0	
KAREN VALENTINE-POND DIRECTOR	1 00	Х						0	0	0	
KARL BERRON DIRECTOR	1 00	Х						0	0	0	
KARL MARTONE DIRECTOR	1 00	Х						0	0	0	
KATHLEEN ENGEL DIRECTOR	1 00	Х						0	0	0	
KATHRYN BOVARD DIRECTOR	1 00	Х						0	0	0	
KATHY MEHRINGER DIRECTOR	1 00	Х						0	0	0	
KAY LATHAM DIRECTOR	1 00	Х						0	0	0	
KAY WATSON DIRECTOR	1 00	Х						0	0	0	
KAY WEST DIRECTOR	1 00	Х						0	0	0	
KAY WIRTH DIRECTOR	1 00	Х						0	0	0	
KEITH KELLEY DIRECTOR	1 00	Х						0	0	0	
KELLY SWEENEY DIRECTOR	1 00	Х						0	0	0	
KEN NEUFELD DIRECTOR	1 00	Х						0	0	0	
KENNETH LI DIRECTOR	1 00	Х						0	0	0	
KENNETH LIBBY DIRECTOR	1 00	Х						0	0	0	
KENNY PARCELL DIRECTOR	1 00	Х						0	0	0	

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week		that		/)			( <b>D)</b> Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			
KENT HANLEY DIRECTOR	1 00	Х						0	0	0
KEVIN BROWN DIRECTOR	1 00	Х						0	0	0
KEVIN KIRKPATRICK DIRECTOR	1 00	Х						0	0	0
KEVIN PRICE DIRECTOR	1 00	Х						0	0	0
KEVIN SEARS DIRECTOR	1 00	Х						0	0	0
KIM HORN DIRECTOR	1 00	Х						0	0	0
KIM SKUMANICK DIRECTOR	1 00	Х						0	0	0
KIT COWPERTHWAITE DIRECTOR	1 00	Х						0	0	0
KIT HALE DIRECTOR	1 00	Х						0	0	0
KOLLEEN KELLEY DIRECTOR	1 00	Х						0	0	0
KRISTINE CANNADAY DIRECTOR	1 00	Х						0	0	0
KURT SCHADE DIRECTOR	1 00	Х						0	0	0
KYE POPE DIRECTOR	1 00	Х						0	0	0
LARRY KEATING DIRECTOR	1 00	Х						0	0	0
LARRY KNAPP DIRECTOR	1 00	Х						0	0	0
LARRY PICKERING DIRECTOR	1 00	Х						0	0	0
LAURA COPERSINO DIRECTOR	1 00	Х						0	0	0
LAURIE CADIGAN DIRECTOR	1 00	Х						0	0	0
LAURIE URBIGKIT DIRECTOR	1 00	Х						0	0	0
LEE LELAND LIEBERG DIRECTOR	1 00	Х						0	0	0
LEFRANCIS ARNOLD DIRECTOR	1 00	Х						0	0	0
LEIGH RUTLEDGE DIRECTOR	1 00	Х						0	0	0
LEO SAUNDERS DIRECTOR	1 00	Х						0	0	0
LEON DICKSON DIRECTOR	1 00	Х						0	0	0
LEON SARKISIAN DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and	Independ	ent C	ontr	act	ors	}		T	<u> </u>	
<b>(A)</b> Name and Title	(B) Average hours per		that a		/)			( <b>D)</b> Reportable compensation from the	(E) Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustiee 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
LEONARD METZGER DIRECTOR	1 00	Х						0	0	0
LESLEE MACKENZIE DIRECTOR	1 00	х						0	0	0
LESLIE MUNGER DIRECTOR	1 00	х						0	0	0
LESLIE SMITH DIRECTOR	1 00	х						0	0	0
LINDA BONARELLI LUGO DIRECTOR	1 00	х						0	0	0
LINDA BRANT DIRECTOR	1 00	Х						0	0	0
LINDA FERCODINI DIRECTOR	1 00	х						0	0	0
LINDA PAGE DIRECTOR	1 00	Х						0	0	0
LINDA PHILPOTT DIRECTOR	1 00	х						0	0	0
LINDA PORTERFIELD DIRECTOR	1 00	х						0	0	0
LINDA ST PETER DIRECTOR	1 00	х						0	0	0
LINDA VAUGHAN DIRECTOR	1 00	Х						0	0	0
LISA HATHAWAY DIRECTOR	1 00	х						0	0	0
LISA NOON DIRECTOR	1 00	х						0	0	0
LISA YATES DIRECTOR	1 00	Х						0	0	0
LISBETH ENGLISH DIRECTOR	1 00	х						0	0	0
LOIS KILLEBREW DIRECTOR	1 00	Х						0	0	0
LORETTA ALONZO DIRECTOR	1 00	Х						0	0	0
LORINE WILLIAMS DIRECTOR	1 00	Х						0	0	0
LORNA JOHNSTON DIRECTOR	1 00	Х						0	0	0
LORRAINE ABERCROMBIE DIRECTOR	1 00	Х						0	0	0
LORRAINE CLARK DIRECTOR	1 00	Х						0	0	0
LORRAINE HARDING DIRECTOR	1 00	Х						0	0	0
LOUIS BALDWIN DIRECTOR	1 00	Х						0	0	0
LOUIS LUDWIG DIRECTOR	1 00	х						0	0	0

Compensated Employees, and	Independ	ent C	óntr	act	ors	<u> </u>				
(A) Name and Title	(B) Average hours per		that		y)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> 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
LOUISE MILLER DIRECTOR	1 00	Х						0	0	0
LOYDA TORRES - FONTNEZ DIRECTOR	1 00	х						0	0	0
LUANN KIDD DIRECTOR	1 00	Х						0	0	0
LYNDA BUTLER DIRECTOR	1 00	Х						0	0	0
LYNN LEEGARD DIRECTOR	1 00	Х						0	0	0
LYNNRENEE KESSIE DIRECTOR	1 00	Х						0	0	0
M STEVEN ANAYA DIRECTOR	1 00	Х						0	0	0
MABEL GUZMAN DIRECTOR	1 00	Х						0	0	0
MADELINE VEISSI DIRECTOR	1 00	Х						0	0	0
MALCOLM SMITH DIRECTOR	1 00	Х						0	0	0
MALCOLM YOUNG DIRECTOR	1 00	Х						0	0	0
MARC CHADBOURNE DIRECTOR	1 00	Х						0	0	0
MARGARET DIXON DIRECTOR	1 00	Х						0	0	0
MARGARET HARTMAN DIRECTOR	1 00	Х						0	0	0
MARGARET HUDSON DIRECTOR	1 00	Х						0	0	0
MARGARET KELLY DIRECTOR	1 00	Х						0	0	0
MARGIE DORRANCE DIRECTOR	1 00	Х						0	0	0
MARGO WILLIS DIRECTOR	1 00	Х						0	0	0
MARIA ELENA BANKS DIRECTOR	1 00	Х						0	0	0
MARIA WELLS DIRECTOR	1 00	Х						0	0	0
MARIAN NORRIS DIRECTOR	1 00	Х						0	0	0
MARIETTA ALBA DIRECTOR	1 00	Х						0	0	0
MARIO RUBIO DIRECTOR	1 00	Х						0	0	0
MARJORIE MCLAUGHLIN DIRECTOR	1 00	Х						0	0	0
MARK JONES DIRECTOR	1 00	х						0	0	0

Compensated Employees, an	d Independ	ent C	óntr	act	tors	<u> </u>			· · ·	
(A) Name and Title	(B) Average hours per		(tion that a					( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustiee 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
MARK KITABAYASHI DIRECTOR	1 00	Х						0	0	0
MARK MACEK DIRECTOR	1 00	Х						0	0	0
MARK MARCHAND DIRECTOR	1 00	Х						0	0	0
MARK MARQUEZ DIRECTOR	1 00	Х						0	0	0
MARK PETERSON DIRECTOR	1 00	Х						0	0	0
MARK WOODROOF DIRECTOR	1 00	Х						0	0	0
MARTHA DENT DIRECTOR	1 00	Х						0	0	0
MARTHA POMARES DIRECTOR	1 00	Х						0	0	0
MARTIN EDWARDS DIRECTOR	1 00	Х						0	0	0
MARY ALICE RUPPERT DIRECTOR	1 00	Х						0	0	0
MARY ANTOUN DIRECTOR	1 00	Х						0	0	0
MARY DYKSTRA DIRECTOR	1 00	Х						0	0	0
MARY EDNA WILLIAMS DIRECTOR	1 00	Х						0	0	0
MARY FLEISCHMANN DIRECTOR	1 00	Х						0	0	0
MARY FRANCES BURLESON DIRECTOR	1 00	Х						0	0	0
MARY FUNK DIRECTOR	1 00	Х						0	0	0
MARY SGOBBA DIRECTOR	1 00	Х						0	0	0
MATTHEW MILLER DIRECTOR	1 00	Х						0	0	0
MAX HILL DIRECTOR	1 00	Х						0	0	0
MELANIE THOMPSON DIRECTOR	1 00	Х						0	0	0
MELBA FRANKLIN DIRECTOR	1 00	Х						0	0	0
MELISSA SIEG DIRECTOR	1 00	Х						0	0	0
MELROSE FORDE DIRECTOR	1 00	Х						0	0	0
MERLE WHITEHEAD DIRECTOR	1 00	Х						0	0	0
MICHAEL BRAY DIRECTOR	1 00	х						0	0	0

<b>(A)</b> Name and Title	(B) Average hours		(tion that a					(D) Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other
	per week	Individual trustae 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
MICHAEL BRUNO DIRECTOR	1 00	Х						0	0	0
MICHAEL FLYNN DIRECTOR	1 00	Х						0	0	0
MICHAEL GRAESSLE DIRECTOR	1 00	Х						0	0	0
MICHAEL JEWELL DIRECTOR	1 00	х						0	0	0
MICHAEL MCGREW DIRECTOR	1 00	Х						0	0	0
MICHAEL MORAN DIRECTOR	1 00	Х						0	0	0
MICHAEL OLDENETTEL DIRECTOR	1 00	Х						0	0	0
MICHAEL ONORATO DIRECTOR	1 00	Х						0	0	0
MICHAEL OWEN DIRECTOR	1 00	Х						0	0	0
MICHAEL SCHMELZER DIRECTOR	1 00	Х						0	0	0
MICHAEL SCHOONOVER DIRECTOR	1 00	Х						0	0	0
MICHAEL THEO DIRECTOR	1 00	Х						0	0	0
MICHAEL TRACY DIRECTOR	1 00	Х						0	0	0
MICHAEL TSENG DIRECTOR	1 00	Х						0	0	0
MICHEL LEPAGE DIRECTOR	1 00	Х						0	0	0
MICHELE COHEN DIRECTOR	1 00	Х						0	0	0
MICHELLE KLEVEN DIRECTOR	1 00	Х						0	0	0
MIKE BRODIE DIRECTOR	1 00	Х						0	0	0
MIKE CASSIDY DIRECTOR	1 00	Х						0	0	0
MIKE CRADDOCK DIRECTOR	1 00	х						0	0	0
MIKE GAUGHAN DIRECTOR	1 00	Х						0	0	0
MIKE YOUNG DIRECTOR	1 00	Х						0	0	0
MILAGROS KANYAR DIRECTOR	1 00	Х						0	0	0
MILTON SHOCKLEY DIRECTOR	1 00	Х						0	0	0
MITCHELL KAMINER DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and	Independ	ent C	ontr	act	ors					
(A) Name and Title	(B) Average hours		(tion that a			II		(D) Reportable compensation	(E) Reportable compensation	<b>(F)</b> 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
MONIKA MCGILLICUDDY DIRECTOR	1 00	Х						0	0	0
MONTIE BOX DIRECTOR	1 00	Х						0	0	0
MOSES SEURAM DIRECTOR	1 00	Х						0	0	0
MYRA ZOLLINGER DIRECTOR	1 00	Х						0	0	0
MYRNA KINGHAM DIRECTOR	1 00	Х						0	0	0
NANCI RANDS DIRECTOR	1 00	Х						0	0	0
NANCY DONAHUE-JONES DIRECTOR	1 00	Х						0	0	0
NANCY FURST DIRECTOR	1 00	Х						0	0	0
NANCY KENNEDY DIRECTOR	1 00	X						0	0	0
NANCY LANE DIRECTOR	1 00	Х						0	0	0
NANCY RILEY DIRECTOR	1 00	Х						0	0	0
NATASCHA TELLO DIRECTOR	1 00	Х						0	0	0
NATE JOHNSON DIRECTOR	1 00	Х						0	0	0
NATHAN BELL DIRECTOR	1 00	Х						0	0	0
NATHAN CARNES DIRECTOR	1 00	Х						0	0	0
NEAL CLAYTON DIRECTOR	1 00	Х						0	0	0
NESTOR WEIGAND DIRECTOR	1 00	Х						0	0	0
NICHOLAS GIGANTE DIRECTOR	1 00	Х						0	0	0
NICHOLLE DAGATA DIRECTOR	1 00	Х						0	0	0
NICK KREMYDAS DIRECTOR	1 00	Х						0	0	0
NICOLE BRULE-FISHER DIRECTOR	1 00	Х						0	0	0
NINA COTTRELL DIRECTOR	1 00	Х						0	0	0
NORKA DIAZ DIRECTOR	1 00	Х						0	0	0
NORMAN FLYNN DIRECTOR	1 00	Х						0	0	0
O RANDALL WOODBURY DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and		ent C			ors			· · ·		
(A) Name and Title	(B) Average hours per		that		y)		ı	( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustae 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
OLIVER RUIZ DIRECTOR	1 00	Х						0	0	0
OTTO CATRINA DIRECTOR	1 00	Х						0	0	0
OWEN HALL DIRECTOR	1 00	Х						0	0	0
PAMELA FRESTEDT DIRECTOR	1 00	Х						0	0	0
PAMELA MONROE DIRECTOR	1 00	Х						0	0	0
PAMELA TESTROET DIRECTOR	1 00	Х						0	0	0
PAT CALLAN DIRECTOR	1 00	Х						0	0	0
PAT COMBS DIRECTOR	1 00	Х						0	0	0
PAT KAPLAN DIRECTOR	1 00	Х						0	0	0
PAT WILLIAMS DIRECTOR	1 00	Х						0	0	0
PAT ZICARELLI DIRECTOR	1 00	Х						0	0	0
PATRICE WILLETTS DIRECTOR	1 00	Х						0	0	0
PATRICIA DELINOIS DIRECTOR	1 00	Х						0	0	0
PATRICIA FITZGERALD DIRECTOR	1 00	Х						0	0	0
PATRICIA HUEY DIRECTOR	1 00	Х						0	0	0
PATRICIA JENSEN DIRECTOR	1 00	Х						0	0	0
PATRICIA KLINE DIRECTOR	1 00	Х						0	0	0
PATRICIA MAYS DIRECTOR	1 00	Х						0	0	0
PATRICIA OHMBERGER DIRECTOR	1 00	Х						0	0	0
PATRICIA PALZET-TAYLOR DIRECTOR	1 00	Х						0	0	0
PATRICIA PETRALIA DIRECTOR	1 00	Х						0	0	0
PATRICIA PIPKIN DIRECTOR	1 00	Х						0	0	0
PATRICIA SZEGO DIRECTOR	1 00	Х						0	0	0
PATRICIA SZOT DIRECTOR	1 00	Х						0	0	0
PATRICK DALESSANDRO DIRECTOR	1 00	х						0	0	0

Compensated Employees, an		ent C			UFS			(P)	(E)	(E)
<b>(A)</b> Name and Title	(B) Average hours per		ition that a		/)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> 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
PATRICK GRAHAM DIRECTOR	1 00	Х						0	0	0
PATRICK O'NEIL DIRECTOR	1 00	Х						0	0	0
PATTI LAWTON DIRECTOR	1 00	Х						0	0	0
PAUL BELL DIRECTOR	1 00	Х						0	0	0
PAUL EVERSON DIRECTOR	1 00	Х						0	0	0
PAUL GRIFFIN DIRECTOR	1 00	Х						0	0	0
PAUL SCOTT DIRECTOR	1 00	Х						0	0	0
PAUL SEMANEK DIRECTOR	1 00	Х						0	0	0
PAULA SERVEN DIRECTOR	1 00	Х						0	0	0
PEGGY LLAGAS DIRECTOR	1 00	Х						0	0	0
PEGGY TRENK DIRECTOR	1 00	Х						0	0	0
PEGGYANN MCCONNOCHIE DIRECTOR	1 00	Х						0	0	0
PETE GALBRAITH DIRECTOR	1 00	Х						0	0	0
PETE KOPF DIRECTOR	1 00	Х						0	0	0
PETER HELIE DIRECTOR	1 00	Х						0	0	0
PETER MERRITT DIRECTOR	1 00	Х						0	0	0
PETER TUCKER DIRECTOR	1 00	Х						0	0	0
PEYTON NORVILLE DIRECTOR	1 00	Х						0	0	0
PHIL JONES DIRECTOR	1 00	Х						0	0	0
PHILIP CHILES DIRECTOR	1 00	Х						0	0	0
PHILIP HARLAN DIRECTOR	1 00	Х						0	0	0
PHILLIP SCHAEFER DIRECTOR	1 00	Х						0	0	0
PHILLIP STARK DIRECTOR	1 00	Х						0	0	0
PILI MEYER DIRECTOR	1 00	Х						0	0	0
QUINCY VIRGILIO DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and					.013	<i>y</i>		(D)	/E)	(E)
<b>(A)</b> Name and Title	(B) Average hours per		that a					( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustae 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
R BRIAN MATZA DIRECTOR	1 00	Х						0	0	0
R CHRIS OSTEEN DIRECTOR	1 00	Х						0	0	0
R DENNIS MCCLELLAND DIRECTOR	1 00	Х						0	0	0
R MORRILL DIRECTOR	1 00	х						0	0	0
RALPH DE MARTINO DIRECTOR	1 00	Х						0	0	0
RANDALL THOMAS DIRECTOR	1 00	Х						0	0	0
RANDY JEFFERS DIRECTOR	1 00	Х						0	0	0
RANDY RECTOR DIRECTOR	1 00	Х						0	0	0
RANDY REYNOLDS DIRECTOR	1 00	х						0	0	0
RANDY SCHEIDT DIRECTOR	1 00	х						0	0	0
RAY MARK PANDO DIRECTOR	1 00	х						0	0	0
RAYMOND BARKETT DIRECTOR	1 00	х						0	0	0
RAYMOND JOSEPH DIRECTOR	1 00	Х						0	0	0
REBECCA CONNATSER DIRECTOR	1 00	х						0	0	0
REINALDO MESA DIRECTOR	1 00	х						0	0	0
RENEE RYAN EDWARDS DIRECTOR	1 00	Х						0	0	0
RICHARD BENJAMIN DIRECTOR	1 00	Х						0	0	0
RICHARD BROGAN DIRECTOR	1 00	Х						0	0	0
RICHARD CHITTAM DIRECTOR	1 00	х						0	0	0
RICHARD CROSBY DIRECTOR	1 00	х						0	0	0
RICHARD FRYER DIRECTOR	1 00	х						0	0	0
RICHARD GAYLORD DIRECTOR	1 00	х						0	0	0
RICHARD HOLLANDER DIRECTOR	1 00	х						0	0	0
RICHARD MENDENHALL DIRECTOR	1 00	Х						0	0	0
RICHARD ROSENTHAL DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and	Independ	lent C	ontr	act	tors	3				
(A) Name and Title	(B) Average hours per		tion ( that a		/)	_	1	( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> 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
RICHARD SNYDER DIRECTOR	1 00	х						0	0	0
RICK HARRIS DIRECTOR	1 00	Х						0	0	0
RICK SHELTON DIRECTOR	1 00	Х						0	0	0
RICK TURLEY DIRECTOR	1 00	X						0	0	0
RICK VIOLETT DIRECTOR	1 00	Х						0	0	0
RITA COFFEY DIRECTOR	1 00	Х						0	0	0
ROB MEHTA DIRECTOR	1 00	Х						0	0	0
ROBERT ARKLEY DIRECTOR	1 00	Х						0	0	0
ROBERT AUTHIER DIRECTOR	1 00	Х						0	0	0
ROBERT BAILEY DIRECTOR	1 00	Х						0	0	0
ROBERT CALDWELL DIRECTOR	1 00	Х						0	0	0
ROBERT ELROD DIRECTOR	1 00	Х						0	0	0
ROBERT FLECK DIRECTOR	1 00	Х						0	0	0
ROBERT FOWLER DIRECTOR	1 00	Х						0	0	0
ROBERT FREEMAN DIRECTOR	1 00	Х						0	0	0
ROBERT GOLDEN DIRECTOR	1 00	Х						0	0	0
ROBERT HAY DIRECTOR	1 00	Х						0	0	0
ROBERT HILL DIRECTOR	1 00	Х						0	0	0
ROBERT KEEFE DIRECTOR	1 00	Х						0	0	0
ROBERT KENNEDY DIRECTOR	1 00	Х						0	0	0
ROBERT KEVANE DIRECTOR	1 00	Х						0	0	0
ROBERT KIMBALL DIRECTOR	1 00	Х						0	0	0
ROBERT KULICK DIRECTOR	1 00	Х						0	0	0
ROBERT LAMONTE DIRECTOR	1 00	Х						0	0	0
ROBERT MILLER DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and	Independ	ent C	óntr	act	ors					
(A) Name and Title	(B) Average hours per		tion that		/)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	الممنير	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
ROBERT OPPENHEIMER DIRECTOR	1 00	Х						0	0	0
ROBERT PAHLKE DIRECTOR	1 00	Х						0	0	0
ROBERT PEIRCE DIRECTOR	1 00	Х						0	0	0
ROBERT RAYNER DIRECTOR	1 00	Х						0	0	0
ROBERT SCOTT DIRECTOR	1 00	Х						0	0	0
ROBERT TAYLOR DIRECTOR	1 00	X						0	0	0
ROBERT WALICK DIRECTOR	1 00	Х						0	0	0
ROBERT WATSON	1 00	Х						0	0	0
DIRECTOR ROBERT WHITE	1 00	Х						0	0	0
DIRECTOR ROBERT WIGTON	1 00	Х						0	0	0
DIRECTOR ROBERT WILSON	1 00	X						0	0	0
DIRECTOR ROBERT WOODUL	1 00	X						0	0	0
DIRECTOR ROBERT WRIGHT DIRECTOR	1 00	Х						0	0	0
ROBIN LANCE DIRECTOR	1 00	Х						0	0	0
ROBINA ENGLISH DIRECTOR	1 00	Х						0	0	0
ROLAND LEDEBUHR DIRECTOR	1 00	Х						0	0	0
RONALD GOSS DIRECTOR	1 00	Х						0	0	0
RONALD MYLES DIRECTOR	1 00	Х						0	0	0
RONALD PELTIER DIRECTOR	1 00	Х						0	0	0
RONALD THOMPSON DIRECTOR	1 00	Х						0	0	0
RONDA TOMPERS DIRECTOR	1 00	Х						0	0	0
ROSEMARY KOBERLEIN DIRECTOR	1 00	Х						0	0	0
ROY DEL BOSQUE DIRECTOR	1 00	Х						0	0	0
RUDY KOCH DIRECTOR	1 00	Х						0	0	0
RUSS BOOTH DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and	Independ	ent C	ontr	act	ors	·				
<b>(A)</b> Name and Title	(B) Average hours per		tion ( that a		/)			<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> 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
		u.	ŭ							
RUSS COFANO DIRECTOR	1 00	Х						0	0	0
RUSSELL GROOMS DIRECTOR	1 00	Х						0	0	0
RUSSELL PORTELE DIRECTOR	1 00	Х						0	0	0
RUSSELL SALZMAN DIRECTOR	1 00	Х						0	0	0
RUSTY GARRETT DIRECTOR	1 00	Х						0	0	0
SALLY HEIMBROOK DIRECTOR	1 00	Х						0	0	0
SALLY MCFOLLING DIRECTOR	1 00	Х						0	0	0
SANDRA O'CONNOR DIRECTOR	1 00	Х						0	0	0
SANDY EHERENMAN DIRECTOR	1 00	Х						0	0	0
SCOTT BOLES DIRECTOR	1 00	Х						0	0	0
SCOTT BRADY DIRECTOR	1 00	Х						0	0	0
SCOTT BRUNNER DIRECTOR	1 00	Х						0	0	0
SCOTT CABALLERO DIRECTOR	1 00	Х						0	0	0
SHADRICK BOGANY DIRECTOR	1 00	Х						0	0	0
SHANNON KING DIRECTOR	1 00	Х						0	0	0
SHARON BOWLER DIRECTOR	1 00	Х						0	0	0
SHARON KEATING DIRECTOR	1 00	Х						0	0	0
SHARON MILLETT DIRECTOR	1 00	Х						0	0	0
SHARON SPRATLEY DIRECTOR	1 00	Х						0	0	0
SHARON TELLES DIRECTOR	1 00	Х						0	0	0
SHELLY MURRAY DIRECTOR	1 00	Х						0	0	0
SHERRI MEADOWS DIRECTOR	1 00	Х						0	0	0
SHERRY DINGES DIRECTOR	1 00	Х						0	0	0
SHERYL GRIDER WHITEHURST DIRECTOR	1 00	Х						0	0	0
SHIRLEY HICKS DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and	Independ	ent C	ontr	act	ors	·				
<b>(A)</b> Name and Title	(B) Average hours per		tion ( that a		/)			<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustae 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
SILVIA RODRIGUEZ DIRECTOR	1 00	Х						0	0	0
SOCAR CHATMON-THOMAS DIRECTOR	1 00	Х						0	0	0
STAN SIERON DIRECTOR	1 00	Х						0	0	0
STEFANIE TUGAW-MADSEN DIRECTOR	1 00	Х						0	0	0
STEPHANIE DOUGHTY DIRECTOR	1 00	Х						0	0	0
STEPHANIE WALKER DIRECTOR	1 00	X						0	0	0
STEPHEN ANTONI DIRECTOR	1 00	Х						0	0	0
STEPHEN CASPER DIRECTOR	1 00	Х						0	0	0
STEPHEN HARDING DIRECTOR	1 00	X						0	0	0
STEPHEN HOOVER DIRECTOR	1 00	X						0	0	0
STEPHEN MCWILLIAM DIRECTOR	1 00	X						0	0	0
STEPHEN MESZAROS DIRECTOR	1 00	Х						0	0	0
STEVE BROWN DIRECTOR	1 00	Х						0	0	0
STEVE FRANCKS DIRECTOR	1 00	Х						0	0	0
STEVE GODDARD DIRECTOR	1 00	Х						0	0	0
STEVE ROSCO DIRECTOR	1 00	Х						0	0	0
STEVE WHITE DIRECTOR	1 00	Х						0	0	0
STEVEN ASHER DIRECTOR	1 00	Х						0	0	0
STEVEN BANKS DIRECTOR	1 00	Х						0	0	0
STEVEN FISCHER DIRECTOR	1 00	X						0	0	0
STEVEN MANOS DIRECTOR	1 00	Х						0	0	0
STEVEN MOREIRA DIRECTOR	1 00	Х						0	0	0
STEVEN WIEDENFELD DIRECTOR	1 00	Х						0	0	0
STUART ELSEA DIRECTOR	1 00	Х						0	0	0
SUE APPLEGATE DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and Independent Contractors											
<b>(A)</b> Name and Title	(B) Average hours per		that		/)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	week	Individual trustae 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	
THERESE WUNDERLICH DIRECTOR	1 00	Х						0	0	0	
THOMAS CARNAHAN DIRECTOR	1 00	Х						0	0	0	
THOMAS GIROIR DIRECTOR	1 00	Х						0	0	0	
THOMAS HASSELBECK DIRECTOR	1 00	Х						0	0	0	
THOMAS INNES DIRECTOR	1 00	Х						0	0	0	
THOMAS JEFFERSON DIRECTOR	1 00	Х						0	0	0	
THOMAS MURPHY DIRECTOR	1 00	Х						0	0	0	
THOMAS QUATTLEBAUM DIRECTOR	1 00	Х						0	0	0	
THOMAS RILEY DIRECTOR	1 00	Х						0	0	0	
THOMAS RIZEN DIRECTOR	1 00	Х						0	0	0	
THOMAS SALOMONE DIRECTOR	1 00	Х						0	0	0	
THOMAS STEVENS DIRECTOR	1 00	Х						0	0	0	
THOMAS WILLIAMS DIRECTOR	1 00	Х						0	0	0	
TIMOTHY BLANCHFIELD DIRECTOR	1 00	Х						0	0	0	
TIMOTHY MCFADDEN DIRECTOR	1 00	Х						0	0	0	
TINA HARRIS DIRECTOR	1 00	Х						0	0	0	
TINA LUCAS DIRECTOR	1 00	Х						0	0	0	
TOBY BRADLEY DIRECTOR	1 00	Х						0	0	0	
TODD EMERSON DIRECTOR	1 00	Х						0	0	0	
TODD MENARD DIRECTOR	1 00	Х						0	0	0	
TODD SHIPMAN DIRECTOR	1 00	Х						0	0	0	
TODD STONESIFER DIRECTOR	1 00	Х						0	0	0	
TODD UMBENHAUER DIRECTOR	1 00	Х						0	0	0	
TOM FARLEY DIRECTOR	1 00	Х						0	0	0	
TOM GRANT DIRECTOR	1 00	Х						0	0	0	

(A) Name and Title	(B) Average hours		(ition that			ıll		<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other
	per week	Individual trustae 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
SUE FLUCKE DIRECTOR	1 00	x						o	0	0
SUE PFOHL DIRECTOR	1 00	Х						0	0	0
SUMMER GREENE	1.00	.,								
DIRECTOR	1 00	Х						0	0	0
SUSAN ARNOLD DIRECTOR	1 00	x						0	0	0
SUSAN GOLDY	1 00	Х						0	0	0
DIRECTOR SUSAN HELM										
DIRECTOR	1 00	Х						0	0	0
SUSAN MARSHALL DIRECTOR	1 00	×						О	0	0
SUSAN MEKENNEY DIRECTOR	1 00	Х						0	0	0
SUSAN PATT DIRECTOR	1 00	Х						0	0	0
SUSAN RAMSEY DIRECTOR	1 00	Х						0	0	0
SUSAN RENFREW DIRECTOR	1 00	Х						0	0	0
SUSAN TILLING DIRECTOR	1 00	Х						0	0	0
SUZANNE DES MARAIS DIRECTOR	1 00	Х						0	0	0
SUZANNE SHERER DIRECTOR	1 00	Х						0	0	0
TAMELA BROOKHOUSER DIRECTOR	1 00	Х						0	0	0
TATE CYMBALUK DIRECTOR	1 00	Х						0	0	0
TED LORING DIRECTOR	1 00	Х						0	0	0
TERENCE SULLIVAN DIRECTOR	1 00	Х						0	0	0
TERESA RAMOS DIRECTOR	1 00	Х						0	0	0
TERESITA BERSACH DIRECTOR	1 00	Х						0	0	0
TERI MILES DIRECTOR	1 00	Х						0	0	0
TERRY KIRKWOOD DIRECTOR	1 00	Х						0	0	0
TERRY MILLER DIRECTOR	1 00	Х						0	0	0
TERRY WESTBROOK DIRECTOR	1 00	Х						0	0	0
THEODORE BRYANT DIRECTOR	1 00	Х						0	0	0

(A) Name and Title	(B) A verage	Pos	(ition i	<b>C)</b> (che	cka	ıll		( <b>D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
	hours per week		at Institutional Trustee			Highest compensated employee	Former	compensation from the organization (W- 2/1099-MISC)	compensation from related organizations (W- 2/1099- MISC)	amount of other compensation from the organization and related organizations
		ustee	Trustee		)ee	ensated				
TOM RAU DIRECTOR	1 00	Х						0	0	0
TONY CLARK DIRECTOR	1 00	Х						0	0	0
TRACY STICE DIRECTOR	1 00	Х						0	0	0
TRAVIS KESSLER DIRECTOR	1 00	Х						0	0	0
TREASURE FAIRCLOTH DIRECTOR	1 00	Х						0	0	0
TRISHA MCCARTHY DIRECTOR	1 00	Х						0	0	0
TRUDY MOORE DIRECTOR	1 00	Х						0	0	0
VAN JOHNSON DIRECTOR	1 00	Х						0	0	0
VERNON TAYLOR DIRECTOR	1 00	Х						0	0	0
VICKI FULLERTON DIRECTOR	1 00	Х						0	0	0
VICTOR ULLOA DIRECTOR	1 00	Х						0	0	0
VINCENT LEISEY DIRECTOR	1 00	Х						0	0	0
VINCENT MALTA DIRECTOR	1 00	Х						0	0	0
VINH NGUYEN DIRECTOR	1 00	Х						0	0	0
VIRGINIA COOK DIRECTOR	1 00	Х						0	0	0
W ALAN HUFFMAN DIRECTOR	1 00	Х						0	0	0
WALAUDDIN HOOSEIN DIRECTOR	1 00	Х						0	0	0
WALTER MC DONALD DIRECTOR	1 00	Х						0	0	0
WAYNE CAPLAN DIRECTOR	1 00	Х						0	0	0
WAYNE POPLIN DIRECTOR	1 00	Х						0	0	0
WAYNE STROMAN DIRECTOR	1 00	Х						0	0	0
WENDELL BULLARD DIRECTOR	1 00	Х						0	0	0
WENDELL DAVIS DIRECTOR	1 00	Х						0	0	0
WENDY FURTH DIRECTOR	1 00	Х						0	0	0
WES GRAHAM DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per		ition that a		y)			( <b>D)</b> Reportable compensation from the	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	<b>(F)</b> Estimated amount of other compensation	
	week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)		from the organization and related organizations	
WEST DE YOUNG DIRECTOR	1 00	Х						0	0	0	
WIGHT MIXON DIRECTOR	1 00	х						0	0	0	
WILLIAM ARNOLD DIRECTOR	1 00	Х						0	0	0	
WILLIAM BOATMAN DIRECTOR	1 00	Х						0	0	0	
WILLIAM CHEE DIRECTOR	1 00	Х						0	0	0	
WILLIAM FULTON DIRECTOR	1 00	Х						0	0	0	
WILLIAM FURST DIRECTOR	1 00	Х						0	0	0	
WILLIAM HANLEY DIRECTOR	1 00	Х						0	0	0	
WILLIAM JONES	1 00	Х						0	0	0	
DIRECTOR WILLIAM LUCKS	1 00	Х						0	0	0	
DIRECTOR WILLIAM MALKASIAN	1 00	Х						0	0	0	
DIRECTOR WILLIAM MARTIN	1 00							0	0	0	
DIRECTOR WILLIAM MILLIKEN DIRECTOR	1 00	Х						0	0	0	
WILLIAM MOORE DIRECTOR	1 00	Х						0	0	0	
WILLIAM NELSON DIRECTOR	1 00	Х						0	0	0	
WILLIAM OVERACRE DIRECTOR	1 00	Х						0	0	0	
WILLIAM RHODES DIRECTOR	1 00	Х						0	0	0	
WILLIAM RICHARDSON DIRECTOR	1 00	Х						0	0	0	
WILMA ROMAN GONZALEZ DIRECTOR	1 00	Х						0	0	0	
WINNIE DAVIS DIRECTOR	1 00	Х						0	0	0	
ZSOLT SZERENCSES DIRECTOR	1 00	Х						0	0	0	
DALE STINTON CEO	38 00			Х				1,438,514	0	35,029	
BOB GOLDBERG SVP MARKETING AND BUS DEV	38 00				Х			690,259	0	35,029	
DOUG HINDERER SVP HUMAN RESOURCES	38 00				Х			429,807	0	35,029	
FRANK SIBLEY SVP COMMUNICATIONS & CONV	38 00				Х			585,543	0	35,029	

(A) Name and Title		tion that a		/)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other compensation	
	per week	Individual trustae 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
JOHN PIERPOINT VP FINANCE AND COMPTROLLER	38 00				х			264,731	0	30,688
LAURENE JANIK SVP GENERAL COUNSEL	38 00				х			593,580	0	35,029
JANET BRANTON SVP GLOBAL BUSINESS	38 00					Х		366,294	0	35,029
JERRY GIOVANIELLO SVP GOV AFFAIRS	38 00					Х		533,330	0	35,029
LAWRENCE YUN SVP CHIEF ECONOMIST	38 00					х		419,887	0	37,735
MARK LESSWING SVP CHIEF TECH OFFICER	38 00					Х		421,264	0	35,029
WALT WITEK SVP COMMUNITY & POL AFFAIRS	38 00					х		410,076	0	35,029