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## Form **990**

Department of the Treasury Internal Revenue Service

A For the 2011 calendar year, or tax year beginning

## **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)

OMB No 1545-0047

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

and ending

2011 Open to Public Inspection

a	pplicab	HAMPTON ROADS ASSOCIATION FOR COMMERC	CIAL	Employer identili	ication number
	Addre   chang				
	Name chang	e Doing Business As		<sup>-</sup> 54−1	.648222
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/sur	E Telephone numbe	er
	Termi		В		)481-2494
	Amen	ded		G Gross receipts \$	362,885.
	Apple			H(a) Is this a group r	
	pendi	F Name and address of principal officer:		for affiliates?	Yes X No
		The state of the s		H(b) Are all affiliates in	
	ax-ex	empt status: 501(c)(3)	) or 52	<del>-</del>	list. (see instructions)
		te: N/A	, -: <b>_</b>	H(c) Group exemption	
		organization: X Corporation Trust Association Other	L Yea		M State of legal domicile: VA
	rt I	Summary			VI Charle of Fogal Commons, 1 = 0
	1	Briefly describe the organization's mission or most significant activities: TO	DUCAT	E AND INFORM	THE
Governance		COMMERCIAL REAL ESTATE INDUSTRY AND OTHE			
ī.	2	Check this box  if the organization discontinued its operations or disp			
Ş.		Number of voting members of the governing body (Part VI, line 1a)	0000 01 1110	3	39
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)	<b>.</b>	4	39
S S		Total number of individuals employed in calendar year 2011 (Part V, line 1a)	,	5	0
iţie		Total number of volunteers (estimate if necessary)		6	ŏ
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12		<del></del>	0.
ĕ		Net unrelated business taxable income from Form 990-T, line 34		7a	0.
		Net unrelated business taxable income from Form 990-1, line 34		7b   Prior Year	
	۰	Contributions and grants (Part VIII June 1h)	-	126,649.	Current Year 120,885.
Jue		Contributions and grants (Part VIII, line 1h)	_	157,064.	163,835.
Revenue		Program service revenue (Part VIII, line 2g)	<u> </u>	137,004.	103,033.
æ		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		25,552.	54,586.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	309,265.	339,306.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,000.	
		Grants and similar amounts paid (Part IX, column IA). (Page 1-3)	_	10,000.	0.
	14	Benefits paid to or for members (Part IX, column (A) time (TVE)			
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5 10) Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	) ⊢	2,397.	2,292.
en	16a	Professional fundraising fees (Part IX, column (A), lines (10)  Total fundraising expenses (Part IX, column (D), line 25)	_ ^ <b>⊢</b>	0.	0.
Exp		Total fundraising expenses (Part IX, column (D), line 25)	0.	204 200	210 700
_	17	Other expenses (Part IX, column (A), lines 11a 1 a 1124e)	<u> </u>	394,280.	310,780.
		Total expenses. Add lines 13-17 (must equal Path Column (A) line 25)	<u> </u>	406,677.	313,072.
- 8	19_	Revenue less expenses. Subtract line 18 from line 12		<97,412.	
ets or lances			<u> </u>	Beginning of Current Year	End of Year
ssel 3ala		Total assets (Part X, line 16)	<u> </u>	144,031.	123,756.
Net Ass Fund Ba		Total liabilities (Part X, line 26)	<u> </u>	54,032.	7,523.
		Net assets or fund balances. Subtract line 21 from line 20		89,999.	116,233.
	rt II	Signature Block			
		ilties of perjury, I declare that I have examined this return, including accompanying schedul			y knowledge and belief, it is
true,	correc	ct, and complete. Declaration of preparer other than officer) is based on all information of v	vhich prepar	er has any knowledge.	
		Signature of officer		14/6/1	<u> </u>
Sigr	1	17\ ' 11	_	Date	
Her	е	TABICE M. HALL, PRESIDEN Type or print name and title	7		
				EData -	II BYIU
		Print/Type preparer's name Preparer's signature		Date 2 9 2012 Check L	PTIN
Paid		JOEL T. FLAX		self-employ	
-	arer	Firm's name DIXON HUGHES GOODMAN LLP		Firm's EIN	56-0747981
Use	Only	Firm's address 440 MONTICELLO AVE, SUITE 1400			
		NORFOLK, VA 23510		Phone no. 7	57.624.5100
May	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
1320	01 01-2	3-12 LHA For Paperwork Reduction Act Notice, see the separate instruct	tions.		Form <b>990</b> (2011)

SCANNED APR 3 0 2012

<u>No</u> √~

REAL ESTATE 54-1648222 Form 990 (2011) Page 2 Part III | Statement of Program Service Accomplishments X Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission: TO EDUCATE AND INFORM THE COMMERCIAL REAL ESTATE INDUSTRY AND OTHER INTERESTED PARTIES OF IMPORTANT TIMELY REAL ESTATE ISSUES. Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a including grants of \$ ) (Revenue \$ REGULAR LUNCHEON MEETINGS HAVE BEEN HELD TO KEEP MEMBERS CURRENT ON COMMERCIAL REAL ESTATE ISSUES (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ MIX N MINGLE, OYSTER ROAST AND OTHER ACTIVITIES HAVE BEEN HELD TO PROVIDE NETWORKING OPPORTUNITIES FOR THE MEMBERS ) (Revenue \$ (Code ) (Expenses \$ including grants of \$ AWARDS PROGRAMS WERE CONDUCTED TO RECOGNIZE OUTSTANDING ACHIEVEMENT OR CONTRIBUTION TO THE COMMERCIAL REAL ESTATE INDUSTRY Other program services (Describe in Schedule O.) including grants of \$ ) (Revenue \$ Total program service expenses Form 990 (2011) 132002 02-09-12

54-1648222 Page 3

## Form 990 (2011) REAL ESTATE Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	Ť		
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
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		X
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.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a	X	
ь	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		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		x
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
D	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, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
-	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
_		Form	<b>990</b> (	2011)

REAL ESTATE

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	<del></del>		<del></del>
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	<del></del> -	$\vdash$	
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	ľ	х
240	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	<u> </u>		
24a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
		١		Х
	Schedule K. If "No", go to line 25	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26 '	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
-	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
•	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	<u> </u>		
-	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	<del> </del>		
~	If "Yes," complete Schedule R, Part V, line 2	20		
27	• • •	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			Х
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		x	
	Note. All Form 990 filers are required to complete Schedule O	38	Δ.	

Form 990 (2011)

Page 5

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	Test countries	*****	
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			1
	filed for the calendar year ending with or within the year covered by this return	0	<u> </u>	<u> </u>
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	.		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b_		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			l
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	<u> </u>	X
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>	├	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	├	X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>	<b></b>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solic			<sub>**</sub>
	any contributions that were not tax deductible?	6a	ļ	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	۱	l	
_	were not tax deductible?	6b	├	₩
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly as a cont	7a 7b	<del>                                     </del>	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	"	<del> </del>	╁
С	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	1,0	<del>                                     </del>	<del>                                     </del>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	] -	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
q.	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required	<u> </u>		İ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 109			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year	ar? <b>8</b>		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	<u> </u>
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		l	
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1	}
	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		<del>↓</del>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			İ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	-	1
	Note. See the instructions for additional information the organization must report on Schedule O.			
Ь	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans	-		
140	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	14a	<del>                                     </del>	X
	If "Yes." has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a	$\vdash$	<del> </del>
- 1	in 100, may a mod a form the to report those partitions, it into provide an explanation in contease of			

Form **990** (2011)

Form 990 (2011) REAL ESTATE

54-1648222

Page 6

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

Sacti	on A. Governing Body and Management						
Seci	on A. Governing body and Management				-	Yes	No
4- 1	Takan kha mumbay af waking mambaya af kha gayaranga badu at tha and af tha tay way	1 40		39		res	No
	Enter the number of voting members of the governing body at the end of the tax year	1a					l
	f there are material differences in voting rights among members of the governing body, or if the governing			ŀ			1
	pody delegated broad authority to an executive committee or similar committee, explain in Schedule O.	41.		39			1
	Enter the number of voting members included in line 1a, above, who are independent	1b					
	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	iip with	any otner	- 1-			X
	officer, director, trustee, or key employee?		<b>.</b>	ŀ	2		┢┻
	Did the organization delegate control over management duties customarily performed by or under t	ne airea	t supervision				x
	of officers, directors, or trustees, or key employees to a management company or other person?	000	- 61-40	ŀ	3		X
	Did the organization make any significant changes to its governing documents since the prior Form		s filea?	ŀ	4		X
	Did the organization become aware during the year of a significant diversion of the organization's at	Sets?		ŀ	5		X
	Did the organization have members or stockholders?			ŀ	6		
	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or	İ			x
	more members of the governing body?	_414_		ŀ	7a		
	Are any governance decisions of the organization reserved to (or subject to approval by) members,	Stockno	olaers, or				х
	persons other than the governing body?		- fellennes	ŀ	7b		
	Did the organization contemporaneously document the meetings held or written actions undertaken during the yi	ar by tri	e rollowing:	}-		X	
	The governing body?	•		ŀ	8a	X	
	Each committee with authority to act on behalf of the governing body?			ŀ	8b		
	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached a	at the	1			v
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	20	· Code \		9		X
Secu	on B. Policies (This Section B requests information about policies not required by the Internal l	revenue	e Code.)				<u> </u>
40- 1	Did the average teach have lead chapters by a chapter of the chapter			Г	40-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	hantam	a officiation	ŀ	10a		
	f "Yes," did the organization have written policies and procedures governing the activities of such organization to account their organizations are account to the company of the company	napter	s, annates,		406		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	di bata	ra filma aba fam	<u>.</u> ,	10b		X
	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	ay belo	re ming the form	)'	11a		A
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.					~= ······	X
	<ul> <li>12a Did the organization have a written conflict of interest policy? If "No," go to line 13</li> <li>b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</li> </ul>						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If $^{\circ}$			H	12b		
	n Schedule O how this was done	res, ut	SCIDE		400		
	Did the organization have a written whistleblower policy?			F	12c 13		X
	Did the organization have a written document retention and destruction policy?			ŀ	14		X
	Did the process for determining compensation of the following persons include a review and approx	val by in	dependent	<u> </u>			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision		аоренови				
		•			15a		X
	<ul> <li>a The organization's CEO, Executive Director, or top management official</li> <li>b Other officers or key employees of the organization</li> </ul>						X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			F	15b		
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment w	oth a			l	
	taxable entity during the year?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			16a		X
	if "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its r	articination	ŀ			
	n joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga		•		i		
	exempt status with respect to such arrangements?				16b	· 1	
	ion C. Disclosure						
	List the states with which a copy of this Form 990 is required to be filed ► NONE					-	
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	T (Sect	on 501(c)(3)s o	nlv) av	/aılah	le	
	for public inspection. Indicate how you made these available. Check all that apply.	,_25	(-)(-)	,,		-	
·	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	onflict (	of interest policy	v. and	finan	icial	
	statements available to the public during the tax year.		pono	, ,		J. <del></del>	
	State the name, physical address, and telephone number of the person who possesses the books	and rec	ords of the ords	nızatı	on:	•	
20 3							
	EXECUTIVE ADMINISTRATOR - (757) 481-2494		ordo or ano orga	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	OII. <b>P</b>		

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

1	officer, director, or trustee.		
(A) (B) (C) (D)	(E)	(F)	
Name and Title Average Position Reportabl		Estimated	
hours per box, unless person is both an compensati		amount of	
week   rom	from related	other	
(describe   ਬੁੱ	organizations	compensation	
hours for $\begin{bmatrix} \frac{\pi}{2} \\ \frac{\pi}{2} \end{bmatrix}$ organization	on (W-2/1099-MISC)	from the	
related 등 등 등 등 (W-2/1099-M	ISC)	organization	
organizations $\begin{bmatrix} \frac{2}{3} & \frac{1}{5} & \frac{1}{5} & \frac{1}{5} \\ \frac{1}{5} & \frac{1}{5} & \frac{1}{5} \\ \frac{1}{5} & \frac{1}{5} & \frac{1}{5} \end{bmatrix}$		and related	
(describe hours for related organizations in Schedule O)  (describe hours for related organizations in Schedule O)  (W-2/1099-M		organizations	
(1) SEE SCHEDULE ATTACHED		۱ .	
	0. 0.	0	
	1		
<del></del>		<u> </u>	
	1		
		i	
		1	
	j		
		<del></del>	
		l	

132007 01-23-12

REAL ESTATE

Par	t VII Section A. Officers, Directors, Tre	ıstees, Key Er	nplo	yee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)				
	(A) Name and title	(B) Average hours per	(do box	(C) Position o not check more than one x, unless person is both an			than o	one h an	( <b>D)</b> Reportable compensation	(E) Reportable compensation		(F) Estimated amount o		
		week (describe hours for related organizations in Schedule O)	tee or director	Institutional trustee	Officer		Highest compensated → employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC	7)	compe from organ and r	ner nsation n the ization elated zations	
			_								$\downarrow$			
				_							$\dashv$			
											_			
											$\dashv$	<u> </u>		
						-					$\dashv$	<del></del>		
											+			
											$\exists$			
С	Sub-total  Total from continuation sheets to Part V	II, Section A					<b>&gt;</b>		0. 0.		0. 0.		0. 0.	
2	Total (add lines 1b and 1c)  Total number of individuals (including but r compensation from the organization	not limited to th	ose	liste	d al	bov	e) wt	no re					0	
3	Did the organization list any former officer,	director, or tn	uste	e, ke	y er	nplo	yee,	or	highest compensated e	mployee on		Y	es No	
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the si	um of reportab								the organization	-	3	X	
5	and related organizations greater than \$15  Did any person listed on line 1a receive or	accrue compe	nsat	ion f	rom	any	unr/			idual for services	-	4	X	
Sec	rendered to the organization? If "Yes," contion B. Independent Contractors	ipiete Scriedui	e J /	Or Si	JCH	pers	SON					5	A	
1	Complete this table for your five highest co the organization. Report compensation for										ensa	ation fro	m	
	(A) Name and business	address	N	INC	3				(B) Description of s	ervices	Co	(C) ompens	ation	
								_						
				_				4						
								4						
2	Total number of independent contractors (	_	ot li	mıte	d to		se li	stec	d above) who received n	nore than				
	\$100,000 of compensation from the organ	ization >								L	<del></del>	Form 99	0 (2011)	

REAL ESTATE

i i	I VII	Statement of Rever	iue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a b c d e f	Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran	ts, and	120,885.				
	g	similar amounts not included abo  Noncash contributions included in lines						
<u>8</u>	h				120,885.			12-14-14
Program Service Revenue	2 a b	LUNCHEON PROGRA		Business Code	59,495. 55,235.	59,495. 55,235.		
a Se	c	DESIGN PROGRAM			32,190.	32,190.		
Re	d	AWARDS PROGRAMS		<u> </u>	16,915.	16,915.		<del> </del>
g	f	All other program service reve	enue					
$\perp$	g	Total. Add lines 2a-2f		<u> </u>	163,835.			t E
	3	Investment income (including other similar amounts)	dividends, inter	est, and				
	4	Income from investment of ta	x-exempt bond ;	oroceeds				
İ	5	Royalties		<b></b>				
			(i) Real	(ii) Personal				
]	6 a			<del> </del>				<b>∱</b>
	b							
1	c d		L	. •				
1		Gross amount from sales of	(i) Securities	(ii) Other				
1		assets other than inventory						,
	b	Less: cost or other basis						
		and sales expenses		<b>↓</b>				E E E E E E E E E E E E E E E E E E E
	C	` '		<u> </u>				
	d		a overte (not					Į į
Other Revenue	8 a	including \$ contributions reported on line Part IV, line 18	of	44,385.				
the	ь	Less: direct expenses	b	22 570				
0		Net income or (loss) from fund			20,806.			20,806.
		Gross income from gaming ac	-					E
		Part IV, line 19	a					
į		Less: direct expenses	b Dana actuation					
		Net income or (loss) from gan Gross sales of inventory, less	-					
		and allowances	а					E
	b	Less: cost of goods sold	b				_	,
Į.	С	Net income or (loss) from sale	s of inventory					
ŀ		Miscellaneous Revenu	ie	Business Code	-20 422	100 422	-	!
		MISCELLANEOUS FALL EVENT - RE	TURNITE C		29,433. 4,347.	29,433. 4,347.		
ļ	b	TALL EVENT - KE	A DHOR 9		4,34/.	4,34/.	-	<del></del>
	c d	All other revenue						<del></del>
	e	Total. Add lines 11a-11d		<b>b</b>	33,780.		,	į.
	12	Total revenue. See instructions.		<u> </u>	339,306.	197,615.	0.	20,806.
13200 01-23	9 - 12							Form <b>990</b> (2011)

Form 990 (2011)

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).

	0, 1,0,1,1,0,		- 5- 4 11/		X
	Check if Schedule O contains a respon	(A)	IS Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees		<del></del>		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages		·		
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	2,292.			
11	Fees for services (non-employees):				
а	Management				
b	Legal	650.			
С	Accounting	3,656.	<u> </u>		
đ	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties	1110			
16	Occupancy	14,420.			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	<u>-</u> .			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization			ļ	<u>-</u> -
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	ADMINISTRATIVE SUPPORT	95,810.			
b	CATERING EXPENSE	48,707.			
C	PRINTING	33,729.			
d	VECTRE DUES	23,665.			
е	All other expenses SEE SCH O	90,143.			
25	Total functional expenses. Add lines 1 through 24e	313,072.			
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	l			
	Check here if following SOP 98-2 (ASC 958-720)		_		

132010 01-23-12

Pa	rt X	Balance Sheet				
				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	<del>-</del>	12,577.	1	3,230.
	2	Savings and temporary cash investments		103,878.	2	106,220.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		17,420.	4	4,725.
	5	Receivables from current and former officers, dir-	· — "			
		employees, and highest compensated employee	s. Complete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as	defined under section			,
		4958(f)(1)), persons described in section 4958(c)	(3)(B), and contributing			
		employers and sponsoring organizations of secti	on 501(c)(9) voluntary			
		employees' beneficiary organizations (see instruc	ctions)		6	
Assets	7	Notes and loans receivable, net			7	
Ass	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other	1			
		basis. Complete Part VI of Schedule D	10a			
	ь	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 1	1		12	
	13	Investments - program-related. See Part IV, line 1	1		13	
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	10,156.	15	9,581.	
	16	Total assets. Add lines 1 through 15 (must equa	il line 34)	144,031.	16	123,756.
	17	Accounts payable and accrued expenses		16,746.	17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
Ş	21	Escrow or custodial account liability. Complete F	art IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors	s, trustees, key employees,			,
abi		highest compensated employees, and disqualified	ed persons. Complete Part II			
=		of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	I third parties		24	
	25	Other liabilities (including federal income tax, pay	ables to related third			
	ĺ	parties, and other liabilities not included on lines	17-24). Complete Part X of			
		Schedule D		37,286.	25	7,523.
	26	Total liabilities. Add lines 17 through 25		54,032.	26	7,523.
	1	Organizations that follow SFAS 117, check he	re 🕨 📖 and complete			
es		lines 27 through 29, and lines 33 and 34.				W
anc	27	Unrestricted net assets			27	
Bali	28	Temporarily restricted net assets			28	
ᅙ	29	Permanently restricted net assets			29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, ch	eck here 🕨 🛣 and			•
5		complete lines 30 through 34.				
ets	30	Capital stock or trust principal, or current funds		0.	30	0.
488	31	Paid-in or capital surplus, or land, building, or eq	uipment fund	0.	31	0.
et	32	Retained earnings, endowment, accumulated in	come, or other funds	89,999.	32	116,233.
Z	33	Total net assets or fund balances	•	89,999.	33	116,233.
	34	Total liabilities and net assets/fund balances	<del>.</del>	144,031.	34	123,756.

Form **990** (2011)

Form	990 (2011) REAL ESTATE	_54-1648	<u> </u>	Pag	<u> </u>	
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI				<u></u>	
	,					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	339,306			
2	Total expenses (must equal Part IX, column (A), line 25)	2	313,072			
3	Revenue less expenses. Subtract line 2 from line 1	3	26,234			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	89,999.			
5	Other changes in net assets or fund balances (explain in Schedule O)	5				
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	110	5,2	33.	
Pa	rt XIII Financial Statements and Reporting				_	
	Check if Schedule O contains a response to any question in this Part XII				<u> </u>	
				Yes	No	
1	Accounting method used to prepare the Form 990: Lash La Accrual La Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			X	
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					
b	Were the organization's financial statements audited by an independent accountant?		2b		X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audīt,				
	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.					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a				
	separate basis, consolidated basis, or both:				,	
	Separate basis Consolidated basis Both consolidated and separate basis					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit				
	Act and OMB Circular A-133?	•	3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b			

Form **990** (2011)

#### 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

OMB No 1545-0047

Open to Public Inspection

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

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

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

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

•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.		· · · · · · · · · · · · · · · · · · ·	
Nan		ROADS ASSOCIATI	ION FOR COMM	ERCIAL Em	oloyer identification number
	REAL ES				54-1648222
Pa	art I-A   Complete if the org	ganization is exempt un	der section 501(c)	or is a section 527	organization.
2	Provide a description of the organiz Political expenditures Volunteer hours	zation's direct and indirect politi .	cal campaign activities i	n Part IV. ▶	\$
Pa	art I-B Complete if the org	ganization is exempt un	der section 501(c)	(3).	
1	Enter the amount of any excise tax	<del></del>		<b>•</b>	\$
2	Enter the amount of any excise tax	incurred by organization manage	gers under section 4955	•	\$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	o for this year?		Yes No
<b>4</b> a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	ganization is exempt un	der section 501(c),	except section 501	(c)(3).
1	Enter the amount directly expended	d by the filing organization for s	ection 527 exempt func	tion activities	\$
2	Enter the amount of the filing organ	ization's funds contributed to c	other organizations for se	ection 527	
	exempt function activities			•	\$
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-POL		
	line 17b			•	\$
4	Did the filing organization file Form	· ·			└─ Yes └─ No
5	Enter the names, addresses and er	· ·	•	-	
	made payments. For each organiza	•			·
	contributions received that were propolitical action committee (PAC). If	• •	• • • • • •	•	ate segregated fund or a
_	· · · · · · · · · · · · · · · · · · ·				1 () 4
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	
				,	delivered to a separate
					political organization.  If none, enter -0
					in none, enter e :
			· -		<del> </del>
			<del> </del> -		<del> </del>
					<u> </u>

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

Schedule C (Form 990 or 990-EZ) 2011

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Schedule C (Form 990 or 990-EZ) 2011	REAL I	STATE		= = = 1 / \/A\	54-1	1648222 Page 2
Part II-A Complete if the org	-		mpt under sectio	n 501(c)(3) and fil	ed Form 5768	
(election under sec	_	<del></del>				
	-			n Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and sha			, ,			
B Check ► L if the filing organiza	ation check	ed box A ar	nd "limited control" pro	ovisions apply.		
Limi (The term "expend	(a) Filing organization's totals	(b) Affiliated group totals				
1a Total lobbying expenditures to infli	uence publ	ic opinion (	grass roots lobbying)			
<b>b</b> Total lobbying expenditures to infli	•	-				
c Total lobbying expenditures (add I	_		, (,,,,			
d Other exempt purpose expenditure		•,	·			
e Total exempt purpose expenditure		s 1c and 1c	1)		· · · · · · · · · · · · · · · · · · ·	
f Lobbying nontaxable amount. Enter				th columns.		<del>†</del>
If the amount on line 1e, column (a) of			bying nontaxable am			
Not over \$500,000			the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000	\$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000		00 plus 5% of the exce			
Over \$17,000,000		\$1,000,	000.	]		1
g Grassroots nontaxable amount (er	nter 25% of	line 1f)				
h Subtract line 1g from line 1a If zer	ro or less, e	nter -0-				
i Subtract line 1f from line 1c. If zero	o or less, er	nter -0-				
j If there is an amount other than ze	ero on eithe	r line 1h or	line 11, did the organiz	ation file Form 4720		
reporting section 4911 tax for this	year?					Yes No
		4-Year Ave	eraging Period Under	Section 501(h)		
•			• •	n do not have to com		
CC				es 2a through 2f on pa	age 4.) 	
	Lobb	ying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	2008	<b>(b)</b> 2009	(c) 2010	<b>(d)</b> 2011	(e) Total
2a Lobbying nontaxable amount						
<b>b</b> Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))	ļ					
				1		

Schedule C (Form 990 or 990-EZ) 2011

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2011 REAL ESTATE 54-164822 Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(4	a)	(b)	
	e lobbying activity.	Yes	No	Amou	
1	During the year, did the filing organization attempt to influence foreign, national, state or			4	
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:	-			
а	Volunteers?				,
Ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1))?				
C	Media advertisements?				
	Mailings to members, legislators, or the public?			<u> </u>	
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?		_		
9	Direct contact with legislators, their staffs, government officials, or a legislative body?				
n	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?	}			
J	Total. Add lines 1c through 1:	<b> </b>			
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912  If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u> </u>			
	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ction	
	501(c)(6).	(-,	(-), -:		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X
Par	t III-B Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				3, is
1	Dues, assessments and similar amounts from members		1	120	,885.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	cal			
_	expenses for which the section 527(f) tax was paid).				
а	Current year		2a	23	,665.
b	Carryover from last year		2b	-	
С	Total		2c	23	,665.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	23	,665.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?	_	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; P part for any additional information.	art II-A; and	Part II-B, lir	ne 1. Also, co	omplete
	· · · · · · · · · · · · · · · · · · ·				
			<del></del>		
		<del></del>	·		<u> </u>
			<u> </u>	_	
		Schedu	le C (Form	990 or 990-	EZ) 2011

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

2011
Open to Public Inspection

Name of the organization

HAMPTON ROADS ASSOCIATION FOR COMMERCIAL REAL ESTATE

Employer identification number 54-1648222

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
	·	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi-	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		used only
	for charitable purposes and not for the benefit of the donor		
	impermissible private benefit?	, , , , ,	Yes No
Par		ganization answered "Yes" to Form 990,	
1	Purpose(s) of conservation easements held by the organizat		
•	Preservation of land for public use (e.g., recreation or	· ——	storically important land area
	Protection of natural habitat	· —	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	fied conservation contribution in the form	of a conservation easement on the last
_	day of the tax year.		
	day of the tax your.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic st	ructure included in (a)	2c
	Number of conservation easements included in (c) acquired		· · · · · · · · · · · · · · · · · · ·
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased extinguished or terminated by th	
•	year >	noused, extended by the	o organization during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	<del></del>	
•	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
•	and section 170(h)(4)(B)(ii)?	, , , ,	Yes No
9	In Part XIV, describe how the organization reports conservation	tion easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza		
	conservation easements.		, o. <b>g</b>
Par	t III Organizations Maintaining Collections	of Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A		ment and balance sheet works of art.
	historical treasures, or other similar assets held for public ex	**	
	the text of the footnote to its financial statements that descri		,
h	If the organization elected, as permitted under SFAS 116 (A		at and balance sheet works of art, historical
•	treasures, or other similar assets held for public exhibition, e		
	relating to these items:		solves, planes are renorming amounts
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		• • • • • • • • • • • • • • • • • • •
2	If the organization received or held works of art, historical tri	easures, or other similar assets for financi	al gain, provide
2	the following amounts required to be reported under SFAS		a. ga., provido
_	Revenues included in Form 990, Part VIII, line 1	. 10 y 300 000) reading to these items.	<b>&gt;</b> \$
a	Assets included in Form 990, Part X		<b>*</b>
b	Assets included in Form 330, Fall A		

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

2

132051 01-23-12 Schedule D (Form 990) 2011

	dule D (Form 990) 2011 REAL ES								48222	
Par	t III   Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures,	or Othe	er Simil	ar Asse	ts (contin	ued)
3	Using the organization's acquisition, access	on, and other record	ds, chec	k any of the	following the	at are a sı	gnıficant	use of its	collection	rtems
	(check all that apply).		_							
а	Public exhibition	C	, <u> </u>	Loan or exc	hange progr	ams				
b	Scholarly research	•	• []	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ın how t	hey further t	he organızat	ion's exer	mpt purpo	ose in Par	t XIV.	
5	During the year, did the organization solicit of	or receive donations	of art, h	istorical trea	sures, or oth	ner sımilar	assets		_	
	to be sold to raise funds rather than to be m	aintained as part of	the orga	anızation's c	ollection?				Yes	No No
Par	t IV Escrow and Custodial Arran	_	ete if the	e organizatio	on answered	"Yes" to	Form 990	, Part IV,	lıne 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.						_		
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other a	ssets not	ıncluded		_	
	on Form 990, Part X?							L_	Yes	└─ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table:						
									Amount	
C	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	217						」 Yes	L No
<u>b</u>	If "Yes," explain the arrangement in Part XIV								_	
Par	t V Endowment Funds. Complete	f the organization ar	nswered	"Yes" to Fo	rm 990, Parl	t IV, line 1	0.			
		(a) Current year	(b) F	Prior year	(c) Two year	rs back	(d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									j
ь	Contributions									×
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities								<b>~</b>	**
	and programs									į
f	Administrative expenses									Į.
g	End of year balance							_		1
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	1g, column (a	a)) held as:		·			
а	Board designated or quasi-endowment		%							
ь	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	and administ	ered for th	ne organiz	zation		
	by.								\	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization	s listed as required o	on Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the						<del> </del>			
Pai	t VI 🌡 Land, Buildings, and Equipn	nent. See Form 99	0, Part >	(, line 10.						
	Description of property	(a) Cost or o		(b) Cost	t or other		ccumulate	- 1	(d) Book	value
		basis (investi	ment)	basis	(other)	der	preciation			
1a	Land					1				
b	Buildings					L				
С	Leasehold improvements .									
d	Equipment									
	Other	L								
Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colu	mn (B), line	10(c).)			ightharpoons		0.

Schedule D (Form 990) 2011

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the of 132053

11-23-12

(9) (10) (11)

Schedule D (Form 990) 2011

7,523.

Sche	dule D (Form 990) 2011 REAL ESTATE			54-1648222 Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990	to Audited Fir	nancial State	ments
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses	_	6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net). Add lines 4 through 8		9	_
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3	and 9	10	
Par	t XII Reconciliation of Revenue per Audited Financial Stater	ments With Re	venue per R	eturn
1	Total revenue, gains, and other support per audited financial statements			1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	_2a		1 1
ь	Donated services and use of facilities	2b		1 1
С	Recoveries of prior year grants	2c		1 1
d	Other (Describe in Part XIV.)	2d		
е	Add lines 2a through 2d			2e
3	Subtract line 2e from line 1		-	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4b		ļ l
C	Add lines 4a and 4b			4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			Dotum
	t XIII Reconciliation of Expenses per Audited Financial State	ments with E	xpenses per	
1	Total expenses and losses per audited financial statements			1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1		
a	Donated services and use of facilities	2a		
Þ	Prior year adjustments	2b		1
C	Other losses	2c		1
d	Other (Describe in Part XIV.)	2d		<del> </del>
_	Add lines 2a through 2d Subtract line 2e from line 1			2e 3
3	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
4	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4b		1 1
	Add lines 4a and 4b	40.]		1 4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5
	rt XIV Supplemental Information		•	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Pai	rt III, lines 1a and 4	4; Part IV, lines 1	b and 2b; Part V, line 4, Part
	e 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also co			
				- "

#### **SCHEDULE G**

(Fòrm 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization answered Yes to Form 990, Part IV, lines 17, 16, to rif the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

HAMPTON ROADS ASSOCIATION FOR COMMERCIAL

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

**Employer identification number** E4 1640333

REAL ES	TATE				34-1046	<u> 444                                 </u>
Fundraising Activities required to complete this part	Complete if the organization answert.	ered "Y	'es" to	Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
1 Indicate whether the organization rais a	e Solicitat f Solicitat g X Special or oral agreement with any individual art VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of tion of fundra (includ	non-govern using of ding of conal f	overnment grants nment grants events fficers, directors, trus undraising services?	stees or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	istody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
3000						
otal			_			
List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	utions	s or has been notified	d it is exempt from re	egistration
			_			
					·	

Schedule G (Form 990 or 990-EZ) 2011

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

HAMPTON ROADS ASSOCIATION FOR COMMERCIAL 54-1648222 Page 2 Schedule G (Form 990 or 990-EZ) 2011 REAL ESTATE Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (c) Other events (a) Event #1 (b) Event #2 (d) Total events NONE (add col. (a) through GOLF OUTING col. (c)) (total number) (event type) (event type) Revenue 44,385. 44,385. 1 Gross receipts 2 Less: Chantable contributions 44,385. 44,385. 3 Gross income (line 1 minus line 2) 4 Cash prizes 8,780. 8,780. 5 Noncash prizes Expenses 8,879. 8,879. Rent/facility costs Direct 5,481. 5,481. 7 Food and beverages 8 Entertainment 439. 439. 9 Other direct expenses 23,579 10 Direct expense summary. Add lines 4 through 9 in column (d) 20,806. 11 Net income summary. Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes **Direct Expenses** 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain:

Schedule G (Form 990 or 990-EZ) 2011

Yes No

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," explain:

132082 01-23-12

Schedule G (Form 990 or 990-EZ) 2011 REAL ESTATE	54-1648222 Page 3
11` Does the organization operate gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity for	ormed
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity operated in:	
a The organization's facility	13a <u>%</u>
b An outside facility	13b   %
14 Enter the name and address of the person who prepares the organization's gaming/special events books	and records:
Name	
Address	-
15a Does the organization have a contract with a third party from whom the organization receives gaming reve	enue? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and	the amount
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party:	
Name	
Address ►	
16 Gaming manager information:	
Carring manager mornation.	
Name	
Gaming manager compensation > \$	
Description of services provided	
	<del></del>
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations	or spent in the
organization's own exempt activities during the tax year	·
Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line	e 2b, columns (III) and (v), and Part III,
lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any add	itional information (see instructions).
	<del></del>
132083 01-23-12	Schedule G (Form 990 or 990-EZ) 2011

**SCHEDULE 1** (Form 990)

OMB No 1545-0047

**ջ** ⊠ Schedule I (Form 990) (2011) × Employer identification number 54-1648222 Open to Public Inspection (h) Purpose of grant or assistance \ \ Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed and address of organization (b) EIN (c) IRC section or government assistance or government (c) IRC section if applicable cash grant or government or g Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. HAMPTON ROADS ASSOCIATION FOR COMMERCIAL Enter total number of section 501(c)(3) and government organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table General Information on Grants and Assistance criteria used to award the grants or assistance? REAL ESTATE 1 (a) Name and address of organization Name of the organization Department of the Treasury Internal Revenue Service Part Part II

HAMPTON ROADS ASSOCIATION FOR COMMERCIAL REAL ESTATE

54-1648222 Schedule I (Form 990) (2011) REAL ESTATE

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

Page 2

(f) Description of non-cash assistance									
(book, FMV, appraisal, other)				additional information.					
(d) Amount of non- cash assistance				line 2, and any other					
(c) Amount of cash grant			1	n required in Part I,					
(b) Number of recipients				de the information					
(a) Type of grant or assistance				Part IV   Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.					

132102 01-27-12

#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

HAMPTON ROADS ASSOCIATION FOR COMMERCIAL REAL ESTATE

Employer identification number 54-1648222

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
IMPORTANT TIMELY REAL ESTATE ISSUES
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
JOINT FALL EVENT, A NETWORKING OPPORTUNITY, NEW MEMBER OREIENTATION, NEWS LETTER, AND MEMBERSHIP DIRECTORY
FORM 990, PART VI, SECTION B, LINE 11: NOT PROVIDED TO THE GOVERNING BODY
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST
FORM 990, PART IX, LINE 24F, ALL OTHER FUNCTIONAL EXPENSES:  AWARDS PROGRAMS:
TOTAL EXPENSES 14,297.
CVENT:
TOTAL EXPENSES 13,125.
MAILHOUSE:
TOTAL EXPENSES 6,827.
AUDIOVISUAL EXPENSE:
TOTAL EXPENSES 6,706.
EQUIPMENT RENTALS:

Schedule O (Form 990 or 990-EZ) (2011)

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

Schedule O (Form 990 or 9	HAMPTON ROADS ASSOCIATION FOR COMMERCIAL	Page 2  Employer identification number
	REAL ESTATE	54-1648222
TOTAL EXPENSE	S	6,318.
INSURANCE:		
TOTAL EXPENSE	S	4,438.
CREDIT CARD F	EES:	
TOTAL EXPENSE	S	4,294.
SPACE RENTAL:		
TOTAL EXPENSE	S	4,141.
WEBSITE EXPEN	SE:	
TOTAL EXPENSE	S	4,010.
MISCELLANEOUS	- ADMINISTRATIVE:	
TOTAL EXPENSE	S	3,160.
TELEPHONE:		
TOTAL EXPENSE	S .	2,970.
BEVERAGE EXPE	NSE:	
TOTAL EXPENSE	S	2,731.
POSTAGE:		
TOTAL EXPENSE	S	2,312.
SPEAKERS EXPE	NSE:	
TOTAL EXPENSE	S	2,167.
132212 01-23-12	26	chedule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-EZ) (2011)  Name of the organization HAMPTON ROADS ASSOCIATION FOR COMMERCIAL REAL ESTATE	Page 2 Employer identification number 54-1648222
PERFORMERS' EXPENSE:	····
TOTAL EXPENSES	2,000.
PRESIDENT'S COUNCIL:	
TOTAL EXPENSES	1,980.
JUDGES EXPENSES:	
TOTAL EXPENSES	1,037.
CHAMBER DUES:	
TOTAL EXPENSES	989.
UTILITIES:	
TOTAL EXPENSES	913.
LICENSES:	
TOTAL EXPENSES	906.
COPYING:	
TOTAL EXPENSES	849.
MEALS:	
TOTAL EXPENSES	842.
FLOWERS AND GIFTS:	
TOTAL EXPENSES	727.
132212	

Schedule O (Form 990 or 990-EZ) (20	11)	A GGOGTAMTON	HOD	COMPRETAT	T =	Page 2
	ESTATE	ASSOCIATION	FOR	COMMERCIAL	Employer identif 54-1648	222
SOFTWARE EXPENSE:						
TOTAL EXPENSES						719.
BAD DEBTS:						
TOTAL EXPENSES					<del></del>	585.
SIGNAGE:						
TOTAL EXPENSES						521.
ADVERTISING:	•	<u>.                                    </u>				
TOTAL EXPENSES						200.
DECORATIONS:						
TOTAL EXPENSES						136.
				· · · · · · · · · · · · · · · · · · ·		
PRIZES:				· · · · · · · · · · · · · · · · · · ·		
TOTAL EXPENSES						100.
GRAPHIC ARTIST:						
TOTAL EXPENSES				<del></del>		90.
BANK CHARGES:						
TOTAL EXPENSES						53.
TOTAL OTHER EXPENS	ES ON FOR	M 990, PART	IX,	LINE 24F, COI	. A	90,143.
					· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·

Last Name	Contact	Title
Adams	J. Scott Adams, CCIM	Director
Atherton	Thomas H. Atherton, III	Director
Barrett	Michael J. Barrett	Director
Barry	Larry S. Barry, P.E.	Director
Beale	Karen R. Beale, SIOR	Director
Beck	Tony Beck	Director
Brezinski	Gregory S. Brezinski, AIA	Director
Campana	Vincent A. Campana, Jr.	Director
Colorito	Lawrence J. Colorito, Jr., MAI	Secretary/Treasurer
Costello	Richard A. Costello, P.E.	Director
Dillon	Thomas M. Dillon	Director
Divaris	Michael B. Divaris	Director
Drucker	Wendy C. Drucker, CPM	Director
Eckert	Peter S. Eckert, CRE, MAI	Immediate Past President
Flax	Joel T. Flax, CPA	Director
France	Cathie J. France	Director
Gossett	Nancy D. Gossett, MAI, SRA	Director
Hahn	Cami Hahn	Director
Hall	Janice M. Hall, CPSM, LEED AP	Director
Hansen	Paul D. Hansen	Director
Horton	Susan Horton	Director
James	Candi James	Director
Kerr	Robert P. Kerr, PWS, REP	Director
Kimple	Edward A. Kimple	Director
Knibb	John M. Knibb	Director
Lydon	Gregory D. Lydon	Director
Murphy	Lisa M. Murphy	Director
Owens	Alvin J. Owens	Director
Owens	James N. Owens, CCIM	President
Perry	Donald E. Perry	Director
Read	F. Craig Read	Director
Rodman, Jr. P.E.	Kenneth E. Rodman, Jr., P.E.	Director
Romine	Stephen R. Romine	Director
Sacks	Stewart J. "Skip" Sacks, Esq.	Director
Sechrest	KennethE. Sechrest	Director
Snyder	Thoams E. Snyder, Esq.	Director
Sykes	Michael J. Sykes	Director
Taves	Kurt W. Taves, CPA, CVA	Director
Wimbush	F. Blair Wimbush	Director