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Department of the Treasury

Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2012

Return of Organization Exempt From Income Tax

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

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

2011
Open to Public Inspection

A F	or the	2011 calendar year, or tax year beginning and	ending				
B c	heck if	SNOHOMISH COUNTY - CAMANO ASSOCIATION		D Employer identific	cation number		
	Addres change	OF REALTORS					
	Name change	Doing Business As		91-6	032407		
	Initial return Terminated	· • • • • • • • • • • • • • • • • • • •	Room/suite	E Telephone number	Telephone number 425-339-1388		
	Amend return	City or town, state or country, and ZIP + 4		G Gross receipts \$	443,641.		
	Application	EVEREIT, WA 30201		H(a) Is this a group re	eturn		
	pendin	F Name and address of principal officer:MATTHEW WAHLQUIST SAME AS C ABOVE	-	for affiliates? H(b) Are all affiliates inc	Yes X No		
ΙT	ax·exe	mpt status:	or 527	1	list. (see instructions)		
		WWW.SCCAR.COM	<u>.,</u>	H(c) Group exemption			
		organization Corporation Trust X Association Other	L Year		State of legal domicile WA		
		Summary	12 1041	011011111111111111111111111111111111111	- Ctate of legal dominone		
		Briefly describe the organization's mission or most significant activities: OUR I	MISSIO	N IS TO EFF	ECT AND		
Activities & Governance		PROMOTE PROGRAMS AND SERVICES WHICH ENHAL			ITIES TO		
naı	_	Check this box If the organization discontinued its operations or dispose					
vei	l	lumber of voting members of the governing body (Part VI, line 1a)	sea or more	3	23		
G		Number of independent voting members of the governing body (Part VI, line 1b)		4	23		
s &		otal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	6		
itie		otal number of volunteers (estimate if necessary)		6	0		
tiv	1	otal number of volunteers (estimate if necessary) otal unrelated business revenue from Part VIII, column (C), line 12		7a	307.		
Ă		let unrelated business taxable income from Form 990-T, line 34		7a 7b	0.		
	01	det differated business taxable income from Form 990-1, illie 34	·	Prior Year			
	8 (Contributions and grants (Part VIII. line 1b)		304,056.	Current Year 260,081.		
Jue	[Contributions and grants (Part VIII, line 1h)	-	117,920.	109,924.		
Revenue	l	Program service revenue (Part VIII, line 2g)		554.	766.		
Re	l	nvestment income (Part VIII, column (A), lines 3, 4, and RECEIVED	<u>, </u>	-20,317.	6,586.		
		, , , , , , , , , , , , , , , , , , , ,		402,213.	377,357.		
				29,693.	1,932.		
	1	n i i	\$}	29,093.	1,932.		
	14 [Benefits paid to or for members (Part IX, column (A), line 4). Salaries, other compensation, employee benefits (Part IX).	-∤	211,113.	217,969.		
Expenses			.	211,113.	217,909.		
en	l	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.	<u> </u>		
EX	l	otal fundraising expenses (Part IX, column (D), line 25)	<u> </u>	100 120 114 4			
	l	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	108,139. 348,945.	114,464. 334,365.		
	i	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	53,268.	42,992.		
- 8		Revenue less expenses. Subtract line 18 from line 12					
Net Assets or Fund Balances	20 7	intel consts (Post V. Iran 16)	Ве	ginning of Current Year 969,564.	End of Year 954,566.		
Bal	20 7	otal assets (Part X, line 16)	-	328,768.	270,778.		
ng(21 7	otal liabilities (Part X, line 26)	-	640,796.	683,788.		
	22 rt	let assets or fund balances Subtract line 21 from line 20 Signature Block		040,790.	003,700.		
		ies of perjury, I declare that I have examined this return, including accompanying schedules, and complete. Declaration of preparer (other than officer) is based on all information of wh			y knowledge and beliet, it is		
ue,	Correct	and complete Declaration of preparer (other mail officer) is based off all information of will	non preparer	lias ally kilowledge	7. /		
o:		Signature of officer		Date	4/12		
Sigr		MATTHEW WAHLQUIST, EXECUTIVE DIRECTOR		Date			
Her	e	Type or print name and title					
			<u> </u>	Date Check	PTIN		
Dave		Print/Type preparer's name A DITION NO MA TICON	~ 1.	0,00,410	-		
Paid	- h	MATTHEW R. MATSON CHILINAN LIB CRACE	5 CM 10	8/08/12 self-employe			
	arer	Firm's name PETERSON SULLIVAN LLP, CPA'S		Firm's EIN	91-0605875		
use	Only	Firm's address 601 UNION ST, STE 2300			06000000		
		SEATTLE, WA 98101-2345		Phone no 2	063827777		
May	the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No		

4e Total program service expenses ▶

132002 02-09-12

(Expenses \$

Form **990** (2011)

including grants of \$

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		۱.,	
_	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	١.		_V
7	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,	_		_v
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	_		v
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	8		X
•	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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X	'0		
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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		Х
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	_		.,
	Schedule D, Parts XI, XII, and XIII	12a		X
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.		v
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
	Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	140		-^-
-	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		Х
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		Х
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		Х
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		Х
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	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u> _
	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	990 (2011)

91-6032407 Page 4

Part IV Checklist of Required Schedules (continued)

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 17 If "Yes," complete Schedule I, Part I and III 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 27 If "Yes," complete Schedule I, Part I and III 23 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 27 If "Yes," to Part IX Is active the Schedule II, Part II and III 24 Did the organization have a tax-exempt bond sause with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 25 Did the organization mentals an escribe part of tax-exempt bonds? 26 Did the organization mentals an escribe part of tax-exempt bonds? 27 Did the organization mentals an escribe part of the assistance to an office of tax-exempt bonds? 28 Did the organization mentals an escribe part of the assistance to an office of the organization and \$100 (c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not be a reported or any of the organization's port forms 990 or 990 £20 If "Yes," complete Schedule I, Part II and that the transaction has not not be a current or former officer, director, trustee, key employee, or disqualified person or unput such as a proper 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 I, Part II and 19 Tyes," complete Schedule I, Part II and 19 Tyes, "complete Schedule II, Part II and 19 Tyes," complete Schedule II, Part II and 19 Tyes," complete Schedule II, Part II and 19 Tyes," compl		1	T	Yes	No
United States on Part IX. Column (A), line 17 If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5.000 of grants and other assistance to midviduals in the United States on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III and the organization answer "Yes" to Part IXI, Section A, line 3, 4; or 5 about compensation of the organization answer "Yes" to Part IXI, Section A, line 3, 4; or 5 about compensation of the organization and former offices, director, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I. 22 X 23 Dot the organization have at ax-exempt bond assue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I. "No", go to here 25 24b Dot the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception" 25b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception? 25c Did the organization and as ear "on behalf of" issuer for bonds outstanding escrive at any time during the year? 25d Did the organization and as as an "on behalf of" issuer for bonds outstanding as the time during the year? 25d Section 501(e)(3) and 501(e)(4) organizations. Did the organization engage 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 900 or 990-E27 if "Yes," complete Schedule I. Part II 25d Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior prior forms 900 or 990-E27 if "Yes," complete Schedule I. Part IV is a trust of former officer, director, trustee, key employee, highly compensated employee, or disqualified person of a	21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			'''
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 21 ft "Yes," complete Schedule I, Part I and III! 23 Did the organization answer Yes* to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule Is the year, that was essued after December 31, 2002? If "Yes," answer fines 24b through 24d and complete Schedule Is If It is a session of the year, that was essued after December 31, 2002? If "Yes," answer fines 24b through 24d and complete Schedule Is If It is a session of the year, that was essued after December 31, 2002? If "Yes," answer fines 24b through 24d and complete Schedule Is If It is a session of the year, that was essued after December 31, 2002? If "Yes," answer fines 24b through 24d and complete Schedule Is If It is a session of the year, that was essued after December 31, 2002? If "Yes," answer fines 24b through 24d and complete Schedule Is If It is a session of the year is a session of the organization and the session of the organization and the session of the organization and the property of the organization and the property of the organization and the property of the organization and that the transaction with a disqualified person during the year? If "Yes," complete Schedule Is Part II and that the transaction with the organization's property of year, and that the transaction with the organization's property of year, and that the transaction with the organization's property of year, and that the transaction with the organization's property of year, and that the transaction with the organization's property of year, and that the transaction with the organization's property of year, and that the transaction with the organization's property of year. If year, is complete Schedule Is Part IV			21		x
column (A), line 27 II *Yes," complete Schedule I, Parts I and III 2 3 Did the organization answer "Yes" to Part VIII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I and task day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II. The International Compensation in the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II. The International Compensation in the last day of the organization in west arry proceeds of tax-exempt bonds beyond a temporary period exception? 4 Did the organization minetal an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 5 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 I, Part II 5 Is the organization aware that it engaged in an excess benefit transaction with a disqualified person of uring the year? If "Yes," complete Schedule I, Part II 5 Was a lean 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 I, Part II 5 Did the organization aparty to a business transaction with one of the following parties (see Schedule I, Part II) 5 Did the organization aparty to a business transaction with one of the following parties (see Schedule I, Part II) 6 A nemity of which a current or former officer, director, trustee, or key employee or a family member of a current or former officer, director, trustee, or key employee or a family member of a current or former officer, director, trustee, or key employee or a family member of a current or former officer, director,	22				l
23 Did the organization answer Yes' to Part VII, Section A, Inin 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 I shad day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", to to line 25 D Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds. D Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds. D Did the organization and the same of the organization and the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds. D D d the organization and the year? If "Yes," complete Schedule I, Part II and that the transaction has not be year? If "Yes," complete Schedule I, Part II and that the transaction has not or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person during the year? If "Yes," complete Schedule I, Part II and the organization provide a grant or other assistance to an officer, director, trustee, key employee, bushly compensated employee, or disqualified person during the year. 25		,	22		Х
and former officers, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J D D the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penced exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penced exception? Did the organization may be a second other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d	23			i	
Schedule J 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 5 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 6 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 7 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? 8 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization provide a grant or organization's tax year? If "Yes," complete Schedule L, Part IV 9 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, highly compensated employee, or disqualried person outstanding as of the end of the organization space to organization the organization provide a grant or other assistance to an officer, director, trustee, or the yengles Schedule L, Part IV 9 Did the organization rec					
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Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 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 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	33				
If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34		sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 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 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 X	34	·		i	
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 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 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 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 X			34		
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? If "Yes," complete Schedule R, Part V, line 2 36 J 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 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 X			35a		X
Section 501 (c) (3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 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 X	b				v
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 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 X			35b		X
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X	36	• • • • • • • • • • • • • • • • • • • •	1		
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X	27		36		-
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 X	31		27	•	y
Note. All Form 990 filers are required to complete Schedule O	38		31		<u> </u>
	~		38	x	
					2011)

Form 990 (2011) OF REALTORS

Part V Statements Regarding Other IRS Filings and Tax Compliance 91-6032407

r ca	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	1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 1			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming			1
	(gambling) winnings to prize winners?		1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)		,	,,,,
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3а	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		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.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action?	5b		_ X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he organization solicit			
	any contributions that were not tax deductible?		6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contribu-	tions or gifts			
_	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 se	rvices provided to the payor?	7a		
	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 w	roo rooutrod	7b		
٠	to file Form 8282?	as required	7c		
d	If "Yes," Indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e	1	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file F		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz	-	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D	i			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			7	
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?		9ь		
10	Section 501(c)(7) organizations. Enter:	1 1			
	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	10b			
11	Section 501(c)(12) organizations. Enter:	المما		1	
	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	446			
12a	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b	100	1	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	126	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120			
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
_	Note. See the instructions for additional information the organization must report on Schedule O				
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	136			
С	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O	14b		
			Form	990 (2011)

132005 01-23-12

OF REALTORS

91-6032407

Form 990 (2011) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 23										
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.										
b	Enter the number of voting members included in line 1a, above, who are independent 23										
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		Х							
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		Х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х							
6											
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
	more members of the governing body?	7a	X								
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
	persons other than the governing body?	7b	Х								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following										
а	The governing body?	8a	X								
b	Each committee with authority to act on behalf of the governing body?	8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х							
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		X							
ь	b 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?										
	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?										
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X								
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			.,							
40	In Schedule O how this was done	12c	v	<u> </u>							
13	Did the organization have a written whistleblower policy?	13	X								
14	Did the organization have a written document retention and destruction policy?	14	Х								
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?	4-	v								
	The organization's CEO, Executive Director, or top management official	15a	Х	X							
D	Other officers or key employees of the organization	15b									
16-	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	•	Х							
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	10a									
-	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	:								
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ►WA										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le								
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website Another's website X Upon request										
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	l finan	cial								
	statements available to the public during the tax year										
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizat	ion 🕨									
	JULIE NELSON - 425-339-1388										
48888°	3201 BROADWAY, SUITE E, EVERETT, WA 98201										
132008 01-23-	12	Form	990 (2011)							

Form 990 (2011) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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 (Ď), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

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

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

(A)	(B)			((C)		1000	(D)	(E)	(F)	
Name and Title	Average		not c		more	than		Reportable	Reportable	Estimated	
	hours per week		, unle cer an					compensation from	compensation from related	amount of other	
	(describe	टु						the	organizations	compensation	
	hours for	or director				Β		organization	(W·2/1099·MISC)	from the	
	related	<u>88</u>	onal trustee		a o	Sans		(W-2/1099-MISC)		organization	
	organizations in Schedule	声	tonat		aloke	5 8				and related	
	O)	Individual	Instituto	∰ G∰Ge	Кеу етріоуее	Highest compensated employee	Former			organizations	
(1) PETER PATERNO											
PRESIDENT	4.00	X		X				0.	0.	0.	
(2) JERRY MARTIN					Ì						
VICE PRESIDENT	2.00	X		X		L	L	0.	0.	0.	
(3) BRUCE MCKINNON											
SECRETARY	2.00	X		X				0.	0.	0.	
(4) DEBBIE MATTESON											
VP GOVERNMENT AFFAIR	2.00	X		X				0.	0.	0.	
(5) SUE HOUNSHELL				1							
VP PROFESSIONAL STANDARD	2.00	X		Х		<u>L</u> .	L	0.	0.	0.	
(6) O.J. MARSTON											
VP COMMUNICATIONS	2.00	X		X				0.	0.	0.	
(7) DAVE MILES						ŀ					
DIRECTOR	1.00	X						0.	0.	0.	
(8) PAUL CHRYSLER											
DIRECTOR	1.00	X		<u> </u>			_	0.	0.	0.	
(9) SANDY EASTLY									_	_	
DIRECTOR	1.00	X				ļ		0.	0.	0.	
(10) DONNA WRIGHT									_	_	
DIRECTOR	1.00	X					<u> </u>	0.	0.	0.	
(11) SHARON HARRISS	1	۱								•	
DIRECTOR	1.00	X				1	<u> </u>	0.	0.	0.	
(12) CHRISTIAN LAMOUREUX	1	١,,									
DIRECTOR	1.00	Х	_			<u> </u>	<u> </u>	0.	0.	0.	
(13) JAN HITE	1 00	١,,					}			•	
DIRECTOR	1.00	X	<u> </u>			_		0.	0.	0.	
(14) JEFF SAX	1 00	,,								•	
DIRECTOR	1.00	Х		_				0.	0.	0.	
(15) STEVE SNIDER	1 00	٠,								•	
DIRECTOR	1.00	X				<u> </u>		0.	0.	0.	
(16) GLENDA KRULL	1 00	v								•	
DIRECTOR	1.00	X	-	-		-	<u> </u>	0.	0.	0.	
(17) JENNIFER RICHARDSON	1 00	v						_		•	
DIRECTOR	1.00	I A	l		L	<u> </u>		0.	0.	0.	
132007 01-23-12										Form 990 (2011)	

Page 8

Section A. Unicers, Directors	, Trustees, Key E	mple	oyee	es, a	nd l	High	1es	t Compensated Employ	<u>ees (continued)</u>				
. ' (A)	(B)							(D)	(E)			(F)	
Name and title	Average hours per	Position (do not check more than one box, unless person is both an						Reportable	Reportable			stimat	
	week		c, unle						compensatio from related	- 1	ar	nount other	
	(describe	ctor						the	organizations	- 1	соп	pens	
	hours for	or director	92			ated		organization	(W-2/1099-MIS	iC)	f	rom th	ne
	related organizations	28	truste		R	Dems		(W·2/1099-MISC)		ſ		aniza	
	in Schedule	-	lgonal	_	olor	S SCO	_			1		d rela anızat	
	O)	Individual	Institution	Officer	Key employee	Highest compens employee	Æ						
(18) DAVE DUNCAN													
DIRECTOR	1.00	X	ـــ			<u> </u>	-	0.		0.			0.
(19) JEFF SIEVERS DIRECTOR	1.00	X						0.		0.	l		٥
(20) LESLIE LABARGE	1.00	┿	-	<u> </u>	\vdash		┢	0.				 -	0.
DIRECTOR	1.00	X						0.		0.			0.
(21) MIGUEL LUGAN	-	1											
DIRECTOR	1.00	Х		<u>L</u> _	<u> </u>			0.		0.			0.
(22) GARY WRIGHT				1									
DIRECTOR	1.00	X	_		<u> </u>	_	<u> </u>	0.		0.			0.
(23) MATTHEW WAHLQUIST	40.00	J	ŀ	U		1		72 100				, -	C 0
EXECUTIVE OFFICER/TREASURER	40.00	X	 	Х		\vdash	╀	72,108.	<u>`</u>	0.		4,5	60.
					_								
			<u> </u>										
						Ļ.		70 100		$\overline{}$			
1b Sub-total								72,108.		0.		4,5	60.
c Total from continuation sheets to Part d Total (add lines 1b and 1c)	rt VII, Section A							72,108.		0.		1 5	0. 60.
Total number of individuals (including b	ut not limited to th	nose	liste	ed al	hovi	e) w			000 of reportable			1 , 3	
compensation from the organization	>	.000		Ju u.		o,		CONTROL MOIS MAIN \$100	,ooo or reportable	•			0
								-				Yes	No
3 Did the organization list any former offi	cer, director, or tri	uste	e, ke	y er	nplo	yee	, or	highest compensated e	mployee on				
line 1a? If "Yes," complete Schedule J t											3		X
4 For any individual listed on line 1a, is th									the organization				v
and related organizations greater than \$Did any person listed on line 1a receive									dual for congress	}	4		X
rendered to the organization? If "Yes,"							eia	ted organization or indivi	dual for services		5		X
Section B. Independent Contractors	somprete correct.		<u>0, 0,</u>		50,0	2011				1			
1 Complete this table for your five highes	t compensated in	depe	ende	ent c	onti	racto	ors	that received more than	\$100,000 of com	pensa	ation f	rom	
the organization. Report compensation	for the calendar y	ear	<u>endı</u>	ng v	vith	or w	rthi	n the organization's tax	ear.				
(A) Name and busin	ace address	NIC	ONE					(B) Description of s	onucos	_	ompe		.n
Hame and bosin		140	JIVI	<u>د</u>				Description of s	ervices		ompe	- Sauc	711
	_												
	 -												
												_	
2 Total number of independent contracto	rs (including but n	ot lu	mite	d to	tho	se li	stec	d above) who received m	ore than				
\$100,000 of compensation from the ord	anization >				(<u>)</u>							
											Form	990	(2011)

Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Total revenue Related or Unrelated excluded from exempt function business tax under sections 512, revenue revenue 513, or 514 1 a Federated campaigns 248,334. b Membership dues 1b 11,747. Fundraising events d Related organizations 1d Contributions, and Other Simi Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 9 Noncash contributions included in lines 1a-1f \$ 260,081 h Total. Add lines 1a-1f Business Code Program Service Revenue 2 a GOVT AFFAIRS PROGRAM 900099 104,000. 104,000. 5,924. EDUCATION 900099 5,924. f All other program service revenue ▶ 109,924. Total. Add lines 2a-2f Investment income (including dividends, interest, and 766. 766. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ii) Personal (i) Real 58,676. 6 a Gross rents 57,496. b Less: rental expenses ,180. c Rental income or (loss) 1,180. 307. 873. d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) ▶ d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ ___ 11,747. of contributions reported on line 1c). See <u>9,</u>780 Part IV, line 18 6,119. b Less: direct expenses 3,661 3,661. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 4,054 and allowances 2,669. b Less. cost of goods sold 1,385 1,385. c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** MISCELLANEOUS 900099 360. 360. 11 a All other revenue 360. e Total. Add lines 11a-11d 377, 307. Total revenue. See instructions 357. 109,924 7,045. Form 990 (2011)

Page 10

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).

Check if Schedule O contains a response on the contains and a response on the contains of the contains and the contains and the contains and the contains a response of the contains a	(A)	(B)	(C)	(D)
7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
Grants and other assistance to governments and	1 222			
organizations in the United States See Part IV, line 21	1,932.		<u> </u>	·
2 Grants and other assistance to individuals in				
the United States. See Part IV, line 22			<u> </u>	
Grants and other assistance to governments,				
organizations, and individuals outside the				
United States. See Part IV, lines 15 and 16				
Benefits paid to or for members				
Compensation of current officers, directors,	76 660			
trustees, and key employees	76,668.			
Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and			İ	
persons described in section 4958(c)(3)(B)	100,519.			
Other salaries and wages	100,519.			
Pension plan accruals and contributions (include				
section 401(k) and section 403(b) employer contributions) Other employee benefits	18,031.			
	22,751.			
Payroll taxes	22,731.			
Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying e Professional fundraising services See Part IV, line 17				
f Investment management fees		.		
<u> </u>	8,231.			
g Other Advertising and promotion	0,231.	· ·		
6 Office expenses	19,292.			
Information technology	13/2321			
Royalties			-	
Occupancy	6,272.	····		
Travel	19,577.			
Payments of travel or entertainment expenses	25/0.73	.,		
for any federal, state, or local public officials				
Conferences, conventions, and meetings	2,949.			
Interest	2,386.	, .		
Payments to affiliates				
Depreciation, depletion, and amortization	15,539.			
Insurance	· · ·			
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)				
a MISCELLANEOUS	12,019.			
EQUIPMENT EXPENSE	10,757.			
BANK CHARGES	10,035.			
d CAM/TRIPLE NET EXPENSES	7,407.			
e All other expenses				
Total functional expenses. Add lines 1 through 24e	334,365.			
Joint costs. Complete this line only if the organization				
reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation				
Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2011)

Pa	rt X	Balance Sheet				_
•				(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing .		116,244.	1	26,035.
	2	Savings and temporary cash investments		200,002.	2	295,550.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	11,363.
	5	Receivables from current and former officers, directors, trus	stees, key			
		employees, and highest compensated employees. Complet	e Part II			
		of Schedule L	•		5	
	6	Receivables from other disqualified persons (as defined und	der section	, , , , , , , , , , , , , , , , , , ,		The state of the s
		4958(f)(1)), persons described in section 4958(c)(3)(B), and	contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instructions)			6	
Assets	7	Notes and loans receivable, net			7	
Ass	8	Inventories for sale or use		5,623.	8	4,512.
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D 10a	1,100,208.			
	ь	Less: accumulated depreciation 10b	483,102.	647,695.	10c	617,106.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		969,564.	16	954,566. 7,203.
	17	Accounts payable and accrued expenses		37,744.	17	7,203.
	18	Grants payable	Ĺ		18	
	19	Deferred revenue	Ĺ	112,299.	19	115,917.
	20	Tax-exempt bond liabilities	L		20	
es	21	Escrow or custodial account liability Complete Part IV of Sc	hedule D	····	21	
Liabilities	22	Payables to current and former officers, directors, trustees,	key employees,			
ja de:		highest compensated employees, and disqualified persons.	Complete Part II			
_		of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third pa	arties	178,725.	23	147,658.
	24	Unsecured notes and loans payable to unrelated third partic			24	
	25	Other liabilities (including federal income tax, payables to re				
		parties, and other liabilities not included on lines 17-24). Col	mplete Part X of			
		Schedule D	_	200 760	25	0.70 7.70
	26	Total liabilities. Add lines 17 through 25	=	328,768.	26	270,778.
		Organizations that follow SFAS 117, check here	and complete			
Ses		lines 27 through 29, and lines 33 and 34.		FOC 000		C1E 020
lan	27	Unrestricted net assets	-	586,000.	27	615,839.
Ва	28	Temporarily restricted net assets	_	54,796.	28	67,949.
<u>p</u>	29	Permanently restricted net assets	, — -		29	
ቯ		Organizations that do not follow SFAS 117, check here	▶			
S		complete lines 30 through 34.				
set	30	Capital stock or trust principal, or current funds	_		30	
As	31	Paid in or capital surplus, or land, building, or equipment fur			31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or oti	her funds	(40 700	32	600 700
-	33	Total net assets or fund balances	-	640,796.	33	683,788.
	34	Total liabilities and net assets/fund balances		969,564.	34	954,566.

Form **990** (2011)

	, and the state of						
Form	990 (2011) OF REALTORS	91-603	2407	Pa	ge 12		
Pa	rt XI Reconciliation of Net Assets						
	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	37	7,3	57.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	33	4,3	65.		
3	Revenue less expenses. Subtract line 2 from line 1	3	4	2,9	92.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	64	0,7	96.		
5	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	68	3 , 7	88.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII				\mathbf{X}		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X			
b	Were the organization's financial statements audited by an independent accountant?		2b		X		
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audīt,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.	ľ		,		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a					
	separate basis, consolidated basis, or both.						
	X Separate basis Consolidated basis Both consolidated and separate basis						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle 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 requi	red audit			l		

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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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.

	•		tions: Complete Part III.	• •	ax), or Form 990-EZ,	Part V, line 35c (Proxy I	ax), then
	ne of organization	SNOHOMI	SH COUNTY -		O ASSOCIATI	ON Emp	oyer identification number
-		OF REAL					91-6032407
	art I-A Complet	te if the org	ganization is exem	ipt unde	r section 501(c) c	or is a section 527 o	rganization.
	Droudo o docoriotios	of the event	ration's direct and indire	at malitical	composes cotsution in	Dort IV	
	Political expenditures	_	zation's direct and indire	ect pointear	campaign activities in		0.
	Volunteer hours	•		•		ν Ψ	0.
•	10,0,1,00,1,00,0					•	
P	ert I-B Complet	te if the org	janization is exem	pt unde	r section 501(c)(3	3).	
1	Enter the amount of	any excise tax	incurred by the organiz	ation undei	r section 4955	▶ \$	
2	Enter the amount of	any excise tax	incurred by organization	n managers	s under section 4955	▶ \$	
	-		on 4955 tax, did it file Fo	rm 4720 fo	r this year?		Yes No
	a Was a correction ma						└── Yes └── No
	o If "Yes," describe in I		ranization is aver	nt undo	r coction 501/o)	except section 501(0/3/
	•						
			d by the filing organizati iization's funds contribu		•	•	0.
2	exempt function activ	• •	nzation's lunus contribu	ited to othe	r organizations for sec		1,000.
3	•		s. Add lines 1 and 2. Ent	er here and	on Form 1120-POI	Ψ	
Ū	line 17b	похронацию	5. 7.00 milos 1 and 2. Lin	or noro and	3 011 1 01111 1 120 1 02,	▶ \$	1,000.
4		ation file Form	1120-POL for this year	?		•	1,000. X Yes No
	• •		•		of all section 527 poin	tical organizations to whic	
			• •		•	ition's funds. Also enter th	• •
	contributions receive	ed that were pr	omptly and directly deli-	vered to a s	separate political orgai	nization, such as a separa	te segregated fund or a
	political action comm	nttee (PAC) If	additional space is need	ded, provid	e information in Part IV	/.	
	(a) Name		(b) Address		(c) EIN	(d) Amount paid from	(e) Amount of political
						filing organization's funds. If none, enter -0	contributions received and promptly and directly
						lulius. Il lione, enter -o	delivered to a separate
							political organization.
T.T 7	ASSOCIATIO	N OF	PO BOX 719				If none, enter -0
	ASSOCIATIO	N OF	OLYMPIA, WA	98507	91_1229340	1,000.	. 0.
IXE.	ALIONS FAC		ODINEIR, WA	70307	71-1230340	1,000.	0.
	•						
				_			
	<u>-</u>						
			1			i	1

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

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011					6032407 Page 2
Part II-A Complete if the org		mpt under sectio	n 501(c)(3) and fil	ed Form 5768	
(election under sec					
A Check L if the filing organiza	ition belongs to an aff	filiated group (and list in	n Part IV each affiliated	group member's nar	ne, address, EIN,
	re of excess lobbying	•			
B Check Lifthe filing organiza	tion checked box A a	and "limited control" pro	ovisions apply.		
	ts on Lobbying Expe ditures" means amo	enditures unts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion	(grass roots lobbying)			
b Total lobbying expenditures to infl				 -	
c Total lobbying expenditures (add I	=				
d Other exempt purpose expenditur	•	•	• •		
e Total exempt purpose expenditure		d)			
f Lobbying nontaxable amount. Ent	•	•	h columns		
If the amount on line 1e, column (a) of		obying nontaxable am			
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,00		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,5		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17		00 plus 5% of the exce			
Over \$17,000,000	\$1,000		00 0101 01100010001		
	1 4.,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
g Grassroots nontaxable amount (er	nter 25% of line 1f)	· · ·		······································	
h Subtract line 1g from line 1a. If zer	•				
i Subtract line 1f from line 1c. If zero	•	•			
j If there is an amount other than ze		line 1i, did the organiz	ation file Form 4720		!
reporting section 4911 tax for this		, , , , , ,			Yes No
	4-Year Av	eraging Period Under	Section 501(h)		
(Some organiz		section 501(h) election		lete all of the five	
	lumns below. See th	ne instructions for line	es 2a through 2f on pa	ge 4.)	
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Consequents and the state of					
d Grassroots nontaxable amount	***************************************	<u> </u>		····	
e Grassroots ceiling amount (150% of line 2d, column (e))					
(130 % of life 20, coluini (e))					

Schedule C (Form 990 or 990-EZ) 2011

f Grassroots lobbying expenditures

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

501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? 3 X	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: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e 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? j Total. Add lines 1c through 11 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 filling 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)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c			ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 11 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 under section 4912 c if 'Yes,' enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 tax, did if tile 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). Vere substantially all (80% or more) dues received nondeductible by members? 1	local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1j)? c Media advertisements? d Mailings to members, legislators, or the public? e 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? j Total. Add 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(501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501	c)(5), or so	ection	
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Open to Public Inspection

Name of the organization

SNOHOMISH COUNTY - CAMANO ASSOCIATION OF REALTORS

Employer identification number 91-6032407

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements 2a Held at the End of the Tax Ye 2a 2b 2b 2d 2d 2d 2d 2d 2d	Pa	Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
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b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amount relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items				nice of public service, provide, in Part XIV,
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relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	U			
(i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items			bucation, or research in furtherance of put	olic service, provide the following amounts
(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items		_		> ¢
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items				•
the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	•			l com avanuda
	2			ı gain, provide
b Assets included in Form 990, Part X	_		relating to these items	> •
U ASSELS INCIDUCED IN FORM 990, FAIL ∧		·		•
	U	Assets included in Point 330, Fall A		P D

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 01-23-12

Schedule D (Form 990) 2011

	edule D (Form 990) 2011 OF REAL								32407	
Pa	rt III Organizations Maintaining C	collections of Ar	t, Hist	torical Tr	easures, c	or Othe	r Simila	ar Asse	ts (contine	ued)
3.	Using the organization's acquisition, accessi	on, and other records	s, check	k any of the	following tha	t are a sig	gnificant (use of its	collection i	tems
	(check all that apply):									
а	Public exhibition	d		Loan or exc	hange progra	ems				
b	Scholarly research	e	_ L (Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how th	ney further t	he organizati	on's exem	npt purpo	se in Par	t XIV.	
5	During the year, did the organization solicit o					er simılar	assets		_	
-	to be sold to raise funds rather than to be ma						-		Yes	No_
Pa	rt IV Escrow and Custodial Arran reported an amount on Form 990, Par		te if the	organizatio	n answered	'Yes' to F	orm 990	, Part IV, I	line 9, or	
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for	contribution	s or other as	sets not i	ncluded			
	on Form 990, Part X?				_				Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fol	lowing t	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 Fo	orm 990, Part X, line	21?						Yes	No
b	If "Yes," explain the arrangement in Part XIV.									
Par	rt V Endowment Funds. Complete it	f the organization ans	swered	"Yes" to Fo	rm 990, Part	IV, line 10)			
		(a) Current year	(b) P	rior year	(c) Two year	s back (d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									+1-1
b	Contributions									***************************************
С	Net investment earnings, gains, and losses								,	
đ	Grants or scholarships									******
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	rent year end balance	e (line 1ç	g, column (a	a)) held as:					
	Board designated or quasi-endowment		_%							
	Permanent endowment ►	%								
C	Temporarily restricted endowment ►	%								
	The percentages in lines 2a, 2b, and 2c shou									
3a	Are there endowment funds not in the posse	ssion of the organiza	ition tha	at are held a	nd administe	red for th	e organız	ation	_	
	by:									es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
	If "Yes" to 3a(ii), are the related organizations	•							3b	
4	Describe in Part XIV the intended uses of the						-			
Par	rt VI Land, Buildings, and Equipm				<u>I</u>					
	Description of property	(a) Cost or ot		(b) Cost			cumulate	d	(d) Book v	/alue
		basis (investm	ient)		(other)	depi	reciation		110	615
	Land				9,645.		20 5	1 4		,645.
	Buildings				8,349.		29,5			835.
	Leasehold improvements				9,967.		05,43			,529.
	Equipment				2,247.		48,15	• •	4	,097.
	Other	15 000 D11			20(-).)			_	617	106

Schedule D (Form 990) 2011

(1)	1
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	<u></u>
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1) Federal inco	me taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) m	ust 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 organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Schedule D (Form 990) 2011

SCHEDULE G (Form 990 or 990-EZ)

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 entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

Open To Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

SNOHOMISH COUNTY - CAMANO ASSOCIATION OF REALTORS

Employer identification number

UF REAL	IORS				91-0032	407
Part I Fundraising Activities required to complete this par	Complete if the organization answitt.	ered "	Yes" to	o Form 990, Part IV,	ine 17. Form 990-EZ	filers are not
1 Indicate whether the organization rais	sed funds through any of the follows	no acti	vities	Check all that apply		
		_			•	
				overnment grants		
b Internet and email solicitations	s f Solicita	tion of	gover	nment grants		
c Phone solicitations	g 🔲 Special	fundra	alsing	events		
d In-person solicitations	•		•			
2 a Did the organization have a written of						
key employees listed in Form 990, P	art VII) or entity in connection with p	rofess	ional f	undraising services?	└ Yes	No
b If "Yes," list the ten highest paid ind	ividuals or entities (fundraisers) purs	uant te	o agre	ements under which	the fundraiser is to	be
compensated at least \$5,000 by the	•		•			
		l gin	Did		(v) Amount paid	
(i) Name and address of individual	/5:3 A _ A	fund	Did raiser ustody	(iv) Gross receipts	to (or retained by)	(vi) Amount paid
or entity (fundraiser)	(ii) Activity	or cor	ustody itrol of	from activity	fundraiser	to (or retained by) organization
		contrib	utions?		listed in col. (i)	Organization
-		Yes	No			
		res	140	-		
		-	 			
			1			
			 			<u> </u>
			1			
		<u> </u>	<u> </u>			
						-
		-				
		1				
				i		
		I		,		
				İ		
		1				
Total						
3 List all states in which the organization	on is registered or licensed to solicit	contrib	outions	s or has been notified	it is exempt from re	egistration
or licensing.						
			-			
						
			•			
	<u> </u>					
						
	· 					- -

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

Schedule G (Form 990 or 990-EZ) 2011

Schedule G (Form 990 or 990-EZ) 2011 OF REALTORS

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

9	1-	60	32	40	7	Page 2

		of fundraising event contributions and gi	(a) Event #1 HEF AUCTION	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
m			(event type)	(event type)	(total number)	col. (c))
Revenue			,	, , , , , , , , , , , , , , , , , , , ,		-
Ŗě	1	Gross receipts	21,527.			21,527.
	2	Less. Charitable contributions	11,747.			11,747.
	3	Gross income (line 1 minus line 2)	9,780.			9,780.
	4	Cash prizes .				
Ses	5	Noncash prizes .				
zxpens	6	Rent/facility costs	985.			985.
Direct Expenses	7	Food and beverages	3,248.			3,248.
	8	Entertainment	300.			300.
	9	Other direct expenses .	1,586.			1,586.
	10	Direct expense summary. Add lines 4 throug			•	(6,119)
Da	11 rt	Net income summary. Combine line 3, column		000 Part IV kan 10 au	<u> </u>	3,661.
-	T I	Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered "Yes" to Form	990, Part IV, line 19, or r	eported more than	
		\$13,000 OH FOHH 990-EZ, lifte 6a.		(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col. (c))
€.						
<u>~</u>	1	Gross revenue				
	2	Cash prizes				
nses	_	Oasii prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			☐ Yes %	Yes%	Yes %	
	6	Volunteer labor	☐ No	□ No	☐ No	
	7	Direct expense summary. Add lines 2 throug	h 5 ın column (d)		>	()
	8	Net gaming income summary. Combine line	1, column d, and line 7		>	
9		er the state(s) in which the organization opera		· · · · · · · · · · · · · · · · · · ·		
		he organization licensed to operate gaming ac				☐ Yes ☐ No
b	If "	No," explain				
10a	We	ere any of the organization's gaming licenses re	evoked, suspended or te	rminated during the tax y	/ear?	Yes No
b	If "	Yes," explain				
	_					
2200	2 01	1-23-12			Sabadula G /Fa	rm 990 or 990-EZ) 2011

Schedule G (Form 990 or 990-EZ) 2011 OF REALTORS	91-6032407 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	formed
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity operated in:	
a The organization's facility	13a %
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books	• • • • • • • • • • • • • • • • • • • •
Name	
Address ▶	
15a Does the organization have a contract with a third party from whom the organization receives gaming rev	venue? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	nd 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:	
Name	
Gaming manager compensation ▶ \$	
Description of services provided	
	·
	2. 1110
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 Enter the amount of distributions required under state law to be distributed to other exempt organization	s 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, II	
lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any ad	ditional information (see instructions).
132083 01-23-12	Schedule G (Form 990 or 990-EZ) 2011

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

SNOHOMISH COUNTY - CAMANO ASSOCIATION OF REALTORS

Employer identification number 91-6032407

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CONDUCT THEIR BUSINESS WITH INTEGRITY AND COMPETENCY.
FORM 990, PART VI, SECTION A, LINE 6: WE HAVE TRADE ASSOCIATION MEMBERS
FORM 990, PART VI, SECTION A, LINE 7A: ALL MEMBERS OF SNOHOMISH-CAMANO
ASSOCIATION HAVE ONE VOTE IN BOARD ELECTION.
FORM 990, PART VI, SECTION A, LINE 7B: MEMBERS CAN VOTE ON MATERIAL
CHANGES TO BYLAWS, DISSOLUTION OR MERGER OF THE ASSOCIATION
FORM 990, PART VI, SECTION B, LINE 11: EXECUTIVE COMMITTEE WILL REVIEW AND
ASK QUESTIONS. THIS WILL BE DONE IN OUR BOARD MEETING.
FORM 990, PART VI, SECTION B, LINE 15A: ANNUAL CEO SALARY IS EXAMINED BY BOARD LEADERSHIP. THIS REVIEW INCLUDED COMPARABLE SALARY DATA SUPPLIED BY
NAR.
FORM 990, PART VI, SECTION C, LINE 19: THESE DOCUMENTS ARE AVAILABLE UPON
REQUEST.
FORM 990, PART XII, LINE 2C
THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.