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Form **990**⁴

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 2011

Department of the Treasury

Open to Public Inspection

inten	nai Revenue Service	- The organization may have to use a copy of this feture to satisfy state report	ing requirements.	<u> </u>
<u>A</u>	For the 2011 calend	lar year, or tax year beginning , 2011, and endin		1
В	Check if applicable	C	1	er Identification Number
	Address change	CALIFORNIA ASSOCIATION OF REALTORS®	95-	4167538
	Name change	ISSUES MOBILIZATION POLITICAL ACTION COM	E Telepho	ne number
	Initial return	525 SOUTH VIRGIL AVENUE	(21:	3) 739-8200
	Terminated	LOS ANGELES, CA 90020		
	Amended return		G Gross re	eceipts \$ 5,230,714.
		F Name and address of principal officer	H(a) Is this a group retur	
	Application pending	SAME AS C ABOVE	H(b) Are all affiliates incl	
	Tour annual status	<u></u>	If 'No,' attach a list	
<u> </u>	Tax-exempt status			. 🛌
<u></u>		W.CAR.ORG	H(c) Group exemption nu	
K	Form of organization	X Corporation Trust Association Other ► L Year of Format	tion 1979 Ms	itate of legal domicile CA
Pa		у		
		be the organization's mission or most significant activities. <u>CALIFORN</u>		
e		<u>IOBILIZATION COMMITTEE'S PRIMARY MISSION IS TO</u>		
an	POLITICA	L_ISSUES_ON_BEHALF_OF_MEMBERS_OF_THE_CALIFORNI	IA ASSOCIATIO	ON_OF_REALTORS®
Activities & Governance				
્રે		ox > if the organization discontinued its operations or disposed of mol	re than 25% of its no	
8		oting members of the governing body (Part VI, line 1a)	•	3 15
es		dependent voting members of the governing body (Part VI, line 1b)		4 15 5 0
ΞΞ		of individuals employed in calendar year 2011 (Part V, line 2a)	•	5 0 6 22
Act		r of volunteers (estimate if necessary) ed business revenue from Part VIII, column (C), line 12		7a 0.
		business taxable income from Form 990-T, line 34		7b 0.
	D Net unrelated	a business taxable income from 1 orni 330-1, line 34	Prior Year	Current Year
	8 Contributions	and grants (Part VIII, line 1h)	1,676,4	
ě		vice revenue (Part VIII, line 2g)	2,070,3	2,121,002.
Ē		ncome (Part VIII, column (A), lines 3, 4, and 7d)	70,0	233,229.
Revenue		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	70,0	233,223.
_		e — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,746,5	556. 2,354,911.
		imilar amounts paid (Part IX, column (A), lines 1-3)		2,301,3121
		I to or for members (Part IX, column (A), line 4)		· · · · · · · · · · · · · · · · · · ·
	· ·			
g	J	er compensation, employee benefits (Part IX, column (A), lines 5-10)		
Expenses		fundraising fees (Part IX, column (A), line 11e)		
k		sing expenses (Part IX, column (D), line 25)		
ű	17 Other expens	ses (Part IX, column (A), lines 11a-RCL (1) 24)VED	1,537,7	773. 1,388,708.
		es. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,537,7	773. 1,388,708.
		s expenses. Subtract line 18 இரு line 12/ 9 டி 2012	208,7	
b 8			Beginning of Currer	
Assets or Balances	20 Total assets	(Part X, line 16)	7,223,8	
8 8	21 Total liabilitie	es (Part X, line 26) OGDEN, UT		0. 0.
2,5	ł	r fund balances. Subtract line 21 from line 20	7,223,8	
D.		re Block	1,223,0	0,000,015.
				
con	der penalties of perjury, I aplete Declaration of prej	declare that I have examined this return, including accompanying schedules and statements, and parefy(other than offices) is based on all information of which preparer has any knowledge	to the best of my knowled	ige and belief, it is true, correct, and
		U Jankhard U.		
c:	Signati	ure of Officer	Date	
Sig He	911	SMILABAL BHOVAT	11	1 1 -
116		or print name and title		118 12
		<u> </u>	 _	DTIN
		preparer's name Preparer's signature Date	Check	If PTIN
Pa		EL W. CANTRILL March March 11-12	self employ	red P00444081
	eparer Firm's nam	**************************************		
Us	se Only Firm's addr	ress - 11755 WILSHIRE BLVD NINTH FL	Firm's EIN	•
		LOS ANGELES, CA 90025	Phone no	(310) 478-4148
Ma	y the IRS discuss th	nis return with the preparer shown above? (see instructions)	· · · · · · · · · · · · · · · · · · ·	Yes X No
			•	

CALIFORNIA ASSOCIATION OF REALTORS®

Form 990 (2011)

95-4167538

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			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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	_	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.	5_	Х	
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
0	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, VII, VIII, IX, or X as applicable.			
á	a 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
ı	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	11 b		Х
(c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		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	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
1	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	11 f		Х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	Х	
	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		<u>X</u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ł	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, 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 (see instructions)	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_		Х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		_X
1	h If 'Voc' to line 202, did the organization attach a copy of its audited financial statements to this return?	20 h		

95-4167538 CALIFORNIA ASSOCIATION OF REALTORS® Page 4 Form **990** (2011) Pant N Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Х 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part 22 X IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts 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 Х 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25 Х 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25 a 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 25b Schedule L. Part I 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 Х 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 Х 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). a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a X b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х 28b Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Х 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule MХ 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 32 Х Schedule N, Part II 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 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Х 34 line 1 Х 35 a 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 35b X of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2

> 38 Х

> > Form 990 (2011)

X

36

37

38

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197

treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI

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

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is

CALIFORNIA ASSOCIATION OF REALTORS® 95-4167538 Form **990** (2011) Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes 0 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-0 ments, filed for the calendar year ending with or within the year covered by this return 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) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account) 4a **b** If 'Yes,' enter the name of the foreign country: **b** 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 Х X 5b **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization X 6a solicit any contributions that were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible: 6b 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 payor? 7a es,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 70 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 contract? 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7**q** h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a 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. a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter. 11 a a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources 11 b against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in fieu of Form 1041? 12a 12b b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a 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. b 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 13b 13c c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X

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

14b

95-4167538 Form 990 (2011) CALIFORNIA ASSOCIATION OF REALTORS® 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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 15 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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. 15 **b** Enter the number of voting members included in line 1a, above, who are independent 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? SEE SCHEDULE O 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors or trustees, or key employees to a management company or other person? SEE SCH O 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Х Did the organization have members or stockholders? SEE SCHEDULE O 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? SEE SCHEDULE O Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Х stockholders, or other persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. Х 8a a The governing body? X b Each committee with authority to act on behalf of the governing body? 8Ь Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O X Section 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 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? 10b 11 a 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b Х to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done

SEE SCHEDULE O Х 12c Х 13 Did the organization have a written whistleblower policy? 13 X 14 14 Did the organization have a written document retention and destruction policy? 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? Х 15a a The organization's CEO, Executive Director, or top management official Х **b** Other officers of key employees of the organization SEE SCHEDULE O 15b If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a taxable entity during the year? b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Another's website Upon request Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to SEE SCHEDULE O the public during the tax year.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization. IQBAL BHOLAT C/O CAR, 525 SOUTH VIRGIL AVENUE LOS ANGELES CA 90020 (213) 739-8200

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Form 990 (2011)

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

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

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

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

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

Check this box if neither the organization	n nor any i	related	d org	ganız	zatio	on con	nper	sated any current offi	cer, director, or truste	e	
(C)											
(A) Name and title	(B) Average hours per week	unies	Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	(describe hours for related organiza tions in Schedule O)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W 2/1099 MISC)	(W 2/1099 MISC)	from the organization and related organizations	
(1) THERESE A. WUNDERLICH											
BOARD CHAIR	0.5	X		X				0.	4,800.	0.	
(2) LES FISHMAN											
BOARD VICECHAIR	0.5	X		X				0.	0.	0.	
(3) RICHARD TEGLEY								_			
BOARD VICECHAIR	0.5	X		Х				0.	1,000.	0.	
_(4)_DON_SCORDINO_								_	_	_	
PAST CHAIR	0.5	X	_					0.	0.	0.	
(5) CAROL BANNER			1								
BOARD MEMBER	0.5	X	<u> </u>		ļ	ļ		0.	0.		
_(6) MARY_CHATTON_BROWN	l	l								_	
BOARD MEMBER	0.5	X	<u> </u>					0.	0.	<u> </u>	
		1,5							1 000	•	
BOARD MEMBER	0.5	X	ļ			-		0.	1,000.	0.	
(8) PAT A. FREDERICKS	2 -	, v							1 000	0	
BOARD MEMBER	0.5	X					_	0.	1,000.	<u> </u>	
(9) MICHAEL GODFREY BOARD MEMBER	0.5	Х						0.	0.	0	
(10) LEANNAH HUNT	0.5		┢				-	0.		0.	
BOARD MEMBER	0.5	x				Ì		0.	0.	0.	
(11) NANCY HUNT	0.5	<u> </u>									
BOARD MEMBER	0.5	X						0.	1,000.	0.	
(12) ALICE MCCAIN	0.5										
BOARD MEMBER	0.5	Х						0.	1,000.	0.	
(13) MICHAEL MERCURIO											
BOARD MEMBER	0.5	Х						0.	0.	0.	
(14) LESLIE MUNGER											
BOARD MEMBER	0.5	X						0.	4,800.	0.	

Part VII. Section A. Officers, Directors, Trus	tees,	Key	En	npl	οуε	es,	an	d Highest Cor	npensated Em	oloyees (cont)
					C)					
(A) Name and title	(B) Average hours per	box, offic	unle: er an	heck ss pe	erson	than is bot or/trus	h an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (describ e hours for related organi zations	or dir	Instit	Officer	Key	Highe	Former	(W 2/1099 MISC)	related organizations (W-2/1099 MISC)	from the organization and related
	hours for	ector	nstitutional	¤	employee	Highest compensated employee	er			organizations
	related organi	inuste	il trustee		yee	mpen				
	Sch O)		tee			sated				
AS CANTULA HOOD					 					
(15) CYNTHIA WOOD BOARD MEMBER	0.5	x	!			İ		0.	0.	0.
(16) PAULA COSENZA	1				1					
NON-VOTING	0.5	X			<u> </u>			0.	0.	0.
(17) PATRICIA DOUGLAS	0 5	l "						0.	0.	
NON-VOTING (18) LYNN HEINTZ	0.5	X			<u> </u>	┼-	-	<u> </u>	0.	0.
NON-VOTING	0.5	X				1		0.	0.	0.
(19) ROSEMARIE MCNAIR									•	
NON-VOTING	0.5	X			ļ <u> </u>	-	_	0.	0.	0.
(20) LISA MUETTERTIES NON-VOTING	0.5	X						0.	0.	0.
(21) CARL SAN MIGUEL	0.5	<u> </u>	-					<u> </u>		<u> </u>
NON-VOTING	0.5	X						0.	1,000.	0.
(22) ANITA THEDE		,,								
NON-VOTING (23)	0.5	Х						0.	0.	0.
(24)										
(25)		<u> </u>		ļ		<u> </u>				
(25)										
1 b Sub-total			•		•		>	0.	15,600.	0.
c Total from continuation sheets to Part VII, Section A	١.						>	0.	0.	0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited	i to tho	se lis	sted	abo	ve)	who	rece	0.	15,600.	1
from the organization • 0	1 (0 (110	3C 113	sieu	abo	,,,,	***110	166		1100,000 of reportat	ne compensation
										Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or trust	tee, l	key (emp	loye	e, o	r hig	phest compensate	d employee	3 X
4 For any individual listed on line 1a, is the sum of rep			~~ ~	ncat	ıon i	and .	otho	r componention fr	o m	
the organization and related organizations greater the	nan \$15	50,00	00?	If 'Y	es' d	comp	olete	Schedule J for	OIII	
such individual5 Did any person listed on line 1a receive or accrue co	mnon	satio	n fra	·m -	.n.,	ınral	atoc	t organization of i	adnudual	4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or	complet	te Sc	hed	ule .	J for	SUC	h pe	erson		5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensate	ad inde	nanc	lent	con	trac	tore	that	received more th	an \$100 000 of	
compensation from the organization. Report compens	nsation	for t	he c	aler	ndar	yea	r en	ding with or within	the organization's	tax year
(A) Name and business addres	s							(B Description		(C) Compensation
Traine and business address								2 2 3 3 1 1 1 1		- 5 5
			_							
						-			+	

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization ► 0

Page 9

rar	T VIII Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) 1 All other contributions, gifts, grants, and				
	similar amounts not included above 1f g Noncash contributions included in lns 1a-1f: \$ h Total. Add lines 1a-1f Business Code	2,121,682.	-		
PROGRAM SERVICE REVENUE	2a b c d				
PROGRAM	e f All other program service revenue g Total. Add lines 2a-2f				
	 Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 	247,507.			247,507.
	(i) Real (ii) Personal 6a Gross rents b Less rental expenses c Rental income or (loss)				
	d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory (i) Securities (ii) Other 2,861,525.				
	b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)	-14,278.			-14,278.
OTHER REVENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		-		
ПО	c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19				
	b Less. direct expenses c Net income or (loss) from gaming activities		E E		
	10a Gross sales of inventory, less returns a land allowances a b Less. cost of goods sold b c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code 11 a b				
	d All other revenue e Total. Add lines 11a-11d	2,354,911.	0.	0.	233,229.

Part X 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 re	sponse to any question	in this Part IX		
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits.				
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
Ŀ	Legal				
c	Accounting				
c	1 Lobbying				
e	Professional fundraising services See Part IV, line 17				·
f	Investment management fees				
ç	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel			-	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				<u></u>
20	Interest				
21	Payments to affiliates	<u>-</u>			
22	Depreciation, depletion, and amortization				
23 24	Insurance Other expenses. Itemize expenses not				
24	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)	1 177 070			
	LOCAL IMPAC CONTRIBUTIONS	1,177,079.	,		
	STATE IMPAC CONTRIBUTIONS	196,098.			
	BANK CHARGES TAXES	15,521.	•		
		10.	-		
	All other expenses	1 200 700	_		
	Total functional expenses Add lines 1 through 24e.	1,388,708.			
26	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 ► X if following SOP 98-2 (ASC 958-720)				

Page 11

		Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		47,672.	1	20,071.
	2	Savings and temporary cash investments		250.	2	251.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, trust and highest compensated employees. Complete Part II of Sci	ees, key employees, hedule L		5	
	6	Receivables from other disqualified persons (as defined under persons described in section 4958(c)(3)(B), and contributing sponsoring organizations of section 501(c)(9) voluntary employerganizations (see instructions)	employers and II		6	
A	7	Notes and loans receivable, net	}	- "	7	
Š	8	Inventories for sale or use			8	
ASSETS	9	Prepaid expenses and deferred charges			9	* ** * *
3	_	· · · · · · · · · · · · · · · · · · ·				
		Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D				
	b	Less. accumulated depreciation 10b		7 000 700	10c	7 065 010
	11	Investments - publicly traded securities		7,038,730.	11	7,965,010.
	12	Investments – other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets		107.040	14	110 041
	15	Other assets. See Part IV, line 11		137,243.	15	113,341.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	_ 	7,223,895.	16	8,098,673.
	17	Accounts payable and accrued expenses	-		17 18	
	18	Grants payable .	}		19	
	19	Deferred revenue			20	
Ļ	20	Tax-exempt bond liabilities	hodulo D	 -	21	
A B I	21	Escrow or custodial account liability Complete Part IV of Sc	i i	<u></u>	21	
L L T	22	Payables to current and former officers, directors, trustees, highest compensated employees, and disqualified persons. Of Schedule L	Complete Part II		22	
- 1	23	Secured mortgages and notes payable to unrelated third par	ties		23	
E S	24				24	
	25	Other liabilities (including federal income tax, payables to rel and other liabilities not included on lines 17-24). Complete P.			25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
Ņ		- · 5 · · · - · · · · · · · · · · · · · · ·	nd complete lines			
Ŧ		27 through 29 and lines 33 and 34.				
Ą	27	Unrestricted net assets		7,223,895.	27	8,098,673.
ASSETS	28	Temporarily restricted net assets	ļ		28	
	29	• •			29	
Q R	ļ	Organizations that do not follow SFAS 117, check here ▶	and complete			
F UZD		lines 30 through 34.				
Ŋ	30	Capital stock or trust principal, or current funds			30	
B	31	Paid-in or capital surplus, or land, building, or equipment fur			31	
A	32	Retained earnings, endowment, accumulated income, or oth	er funds		32	0 000 555
BALAZOMO	33	Total net assets or fund balances		7,223,895.	33	8,098,673.
5	34	Total liabilities and net assets/fund balances		7,223,895.	34	8,098,673.

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Form 990 (2011)

୍ମାନ୍ତ	祝 <u>級</u> Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1 1	2 3	54 (911.
1	Total expenses (must equal Part IX, column (A), line 25)	2			708.
2		3			203.
3	Revenue less expenses. Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			<u> 195.</u>
5	Other changes in net assets or fund balances (explain in Schedule O) SEE SCHEDULE O	5		91,4	<u> 125.</u>
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	8,0	98,	573.
Pa	和知 Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				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.		_		
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	_	X
1	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 review, or compilation of its financial statements and selection of an independent accountant?	e audıt,	2c	Х	
	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 separate basis, consolidated basis, or both.	d on a			
	X Separate basis Consolidated basis Both consolidated and separate basis				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S Audit Act and OMB Circular A-133?	ingle	3a		Х
I	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the requi or audits, explain why in Schedule O and describe any steps taken to undergo such audits	red audıt	3b		
BAA			Form	990	(2011)

•					
Schedule C (Form 990 or 990-EZ) 201	1 CALIFORNIA A	ASSOCIATION OF R	EALTORS®	95-416	
Part U-A Complete if section 501(the organizatior (h)).	is exempt under se	ection 501(c)(3) ar	nd filed Form 5768 (election under
A Check ► If the filing	ng organization belon	gs to an affiliated group (a	and list in Part IV each	affiliated group member	's name,
		share of excess lobbying			
B Check ► I If the filing	ng organization check	ked box A and 'limited con	itrol' provisions apply.		
(The term	Limits on Lobbyi 'expenditures' mear	ng Expenditures is amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditu	res to influence pub	ic opinion (grass roots lot	obying).		
b Total lobbying expenditu					
c Total lobbying expenditu					
d Other exempt purpose e					
e Total exempt purpose e	xpenditures (add line	s 1c and 1d)			_
f Lobbying nontaxable an	nount Enter the amo	unt from the following tab	le ın		
If the amount on line 1e, colu	ımn (a) or (b) is:	he lobbying nontaxable a	mount is.		
Not over \$500,000		20% of the amount on line 1e		, ,	
Over \$500,000 but not over \$1,	000,000	\$100,000 plus 15% of the excess	over \$500,000.		
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess	over \$1,000,000.		
Over \$1,500,000 but not over \$,,,	\$225,000 plus 5% of the excess of			
Over \$17,000,000		\$1.000.000.			
g Grassroots nontaxable a	amount (enter 25% o	f line 1f)			
h Subtract line 1g from lin	-			***	
i Subtract line 1f from line					
j If there is an amount of	her than zero on eith		e organization file For	m 4720 reporting	Yes No
section 4911 tax for this	me organizations tha	4-Year Averaging Period Ut made a section 501(h) els below. See the instructi	ection do not have to	complete all of the five ph 2f.)	
	Lobb	ying Expenditures During	4-Year Averaging Per	iod	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
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))					

Schedule C (Form 990 or 990-EZ) 2011

f Grassroots lobbying expenditures

BAA

Schedule C (Form 990 or 990-EZ) 2011 CALIFORNIA ASSOCIATION OF REALTORS®	95-416/5	538 Pa
Complete if the organization is exempt under section 501(c)(3) and hat (election under section 501(h)).	s NOT filed Forn	n 5768
	(a)	(b)
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description		

The state of the s	(a	<u> </u>	(D)
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amount
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 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?			

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	Х	
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
	0.00000000000000000000000000000000000			

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

1	Dues, assessments and similar amounts from members	<u> </u>	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
	a Current year	2a	
1	b Carryover from last year	2b	
	c Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	0.
5	Taxable amount of lobbying and political expenditures (see instructions)	5	0.
Pa	RIV Supplemental Information		
	1. D.		

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

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form and or and-EZ) ZOTT CALLE ORNIA ASSOCIATION OF REALITORS	93-410/330	Page 4
Part W Supplemental Information (continued)		<u> </u>
	-	
		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 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

CALIFORNIA ASSOCIATION OF REALTORS®

Employer identification number

	SUES MOBILIZATION POLITICAL AC		95-4167538
	Organizations Maintaining Dono		
U	the organization answered 'Yes' t	to Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
_		L	
5	funds are the organization's property, subject t	· ·	∐Yes ∐ No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for the purpose conferring impermissible private bene	s, and donor advisors in writing that grant funds he benefit of the donor or donor advisor, or for a fit?	s can be any other Yes No
Pa	Conservation Easements. Comp	lete if the organization answered 'Yes	to Form 990, Part IV, line 7.
1			
	Preservation of land for public use (e.g., re	_	f an historically important land area
	Protection of natural habitat	Preservation o	of a certified historic structure
	Preservation of open space		
2	· ·	on held a qualified conservation contribution in the	ne form of a conservation easement on the
	•		Held at the End of the Tax Year
á	Total number of conservation easements		2a
ŀ	Total acreage restricted by conservation easer	ments	2b
	Number of conservation easements on a certifi	ied historic structure included in (a)	2c
ď	Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, and not on a historic	2 d
3	•	transferred, released, extinguished, or terminate	ed by the organization during the
4	Number of states where property subject to co	nservation easement is located ►	
_			— Uma of wolations
5	and enforcement of the conservation easemen		∐ Yes ☐ No
6	Staff and volunteer hours devoted to monitorin	g, inspecting, and enforcing conservation easen	nents during the year
7	Amount of expenses incurred in monitoring, in: ▶ \$	specting, and enforcing conservation easements	s during the year
8	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of section	∐ Yes ☐ No
9	In Part XIV, describe how the organization rep include, if applicable, the text of the footnote to conservation easements.	orts conservation easements in its revenue and the organization's financial statements that de-	expense statement, and balance sheet, and scribes the organization's accounting for
Pa	Organizations Maintaining Colle	ections of Art, Historical Treasures, o wered 'Yes' to Form 990, Part IV, line	r Other Similar Assets. 8.
1 8	alf the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finan	s held for public exhibition, education, or researc	ue statement and balance sheet works of th in furtherance of public service, provide,
I	If the organization elected, as permitted under historical treasures, or other similar assets hel following amounts relating to these items.	SFAS 116 (ASC 958), to report in its revenue sid for public exhibition, education, or research in	tatement and balance sheet works of art, furtherance of public service, provide the
	(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 an amounts required to be reported under SFAS	rt, historical treasures, or other similar assets for 116 (ASC 958) relating to these items.	r financial gain, provide the following
á	a Revenues included in Form 990, Part VIII, line	1	▶ \$
	Assets included in Form 990. Part X		►\$

3 Using the organization's acquisition items (check all that apply).	on, accession, and	other records, chec	ck any of the following t	hat are a significant use	e of its collection	on
a Public exhibition		d Loan o	r exchange programs			
b Scholarly research		e Other				
c Preservation for future genera	ations					
4 Provide a description of the organ Part XIV.		s and explain how t	they further the organiz	ation's exempt purpose	ın	
5 During the year, did the organizate assets to be sold to raise funds re	ion solicit or receivather than to be ma	e donations of art, iintained as part of	historical treasures, or the organization's colle	other similar ction?	Yes	No
Part W Escrow and Custodia line 9, or reported an	I Arrangement amount on For	s. Complete if t m 990, Part X,	he organization ar line 21.	swered 'Yes' to Fo	orm 990, Pa	irt IV,
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, or o	ther intermediary fo	or contributions or othe	r assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and co	mplete the following	g table.			
					Amount	
c Beginning balance				1 c		
d Additions during the year				1d		
e Distributions during the year				1e		
f Ending balance						
2a Did the organization include an ai	mount on Form 990	, Part X, line 21?			Yes	No
b If 'Yes,' explain the arrangement						
Part V Endowment Funds. Co	omplete if the c	rganization ans				
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four year	s back
1a Beginning of year balance	. 					
b Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for facilities and programs		-				
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage	· ·	_	1g, column (a)) held as	5		
a Board designated or quasi-endow		%				
b Permanent endowment ►	_ %					
c Temporarily restricted endowmen		[%]				
The percentages in lines 2a, 2b,	and 2c should equa	il 100%.				
3a Are there endowment funds not in organization by	n the possession of	the organization th	nat are held and admini	stered for the	Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	ļ
b If 'Yes' to 3a(II), are the related of	rganizations listed	as required on Sch	edule R?		3b	
4 Describe in Part XIV the intended						
Pard MI Land, Buildings, and						
Description of property	(a) C	ost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	alue ————
1a Land	<u> </u>					
b Buildings	<u> </u>					
c Leasehold improvements	<u> </u>					
d Equipment	<u> </u>					
e Other						
Total. Add lines 1a through 1e. (Column	n (d) must equal F	orm 990, Part X, co	lumn (B), line 10(c).)			0.
BAA				Sched	dule D (Form 99	J U) 2011

Part VIII Investments - Other Securities. See	Form 990, Part X,	line 12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of-year market va	lue
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			-
(E)			
(F) (C)			
(G) (H)			· <u>-</u>
(l)			
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.)			
Part VIII Investments - Program Related. See	Form 990, Part X	line 13. N/A	
(a) Description of investment type	(b) Book value	(c) Method of valuation.	-
		Cost or end-of-year market va	lue
(1)			
(2)			
(3)			*
(4)			
(5)			
(6)			
(7)			
(9)			
(10)			
Total (Column (b) must equal Form 990, Part X, column (B) line 13.)	<u> </u>		
Part X Other Assets. See Form 990, Part X,	line 15. N/A		
(a) Des	scription	(t) Book value
(1)			-
(2)			
(3)			
(4)			
<u>(5)</u>			~ ~~~ ~~~
(6)			
(7)			
(8)			
(9) (10)			
Total. (Column (b) must equal Form 990, Part X, column (B)) line 15.)		
Part X Other Liabilities. See Form 990, Part			
(a) Description of liability			
	I (b) Book value		
(1) Federal income taxes	(b) Book value		
(1) Federal income taxes	(b) Book Value		
(2)	(b) Book value		
(2) (3)	(b) Book value		
(2) (3) (4)	(b) Book value		
(2) (3)	(b) Book Value		
(2) (3) (4) (5)	(b) Book Value		
(2) (3) (4) (5) (6)	(b) Book Value		
(2) (3) (4) (5) (6) (7)	(b) Book Value		
(2) (3) (4) (5) (6) (7) (8)	(b) Book Value		
(2) (3) (4) (5) (6) (7) (8) (9)	(b) Book Value		

2 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)

Sche	dule D (Form 990) 2011 CALIFORNIA ASSOCIATION OF REALTORS®	95-416	7538	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial	Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		2,354	,911.
2	Total expenses (Form 990, Part IX, column (A), line 25)			,708.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	•		,203.
4	Net unrealized gains (losses) on investments			,425.
5	Donated services and use of facilities			,
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV.)	1		
9	Total adjustments (net) Add lines 4 through 8		-91	,425.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	·		,778.
	t XII Reconciliation of Revenue per Audited Financial Statements V			
1	Total revenue, gains, and other support per audited financial statements	1		,486.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	EY %	-	
	Net unrealized gains on investments 2a	-91,425.		
	Donated services and use of facilities 2b			
	Recoveries of prior year grants	The second		
	Other (Describe in Part XIV.)	219		
	Add lines 2a through 2d	2e	-91	,425.
	Subtract line 2e from line 1	3		,911.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1.			,
	Investment expenses not included on Form 990, Part VIII, line 7b	== 1 == 1		
	Other (Describe in Part XIV.)			
	Add lines 4a and 4b	4c		
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,354	.911.
	t XIII Reconciliation of Expenses per Audited Financial Statements With	n Expenses per Return		
1	Total expenses and losses per audited financial statements	1	1,388	,708.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	ें <u>ब</u> ्रा		-
	Donated services and use of facilities 2a	100 m		
t	Prior year adjustments 2b			
	Other losses 2c			
c	Other (Describe in Part XIV.)	-1.2		
	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3	1,388	,708.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 1964 - 19	-	
a	Investment expenses not included on Form 990, Part VIII, line 7b	<u> </u>		
t	Other (Describe in Part XIV.)			
-	Add lines 4a and 4b	4c		
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		1,388	,708.
	t XIV Supplemental Information			
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, I V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d additional information	and 4b. Also complete this pa	rt to provide	
				· — — — -
				. _
•				-

TEEA3304L 05/25/11

Schedule **D** (Form 990) 2011

BAA

Schedule D	(Form 990) 2011	CALIFORNIA	ASSOCIATION OF	REALTORS®		95-4167538	Page 5
Parl XIV	Supplemental	Information (ASSOCIATION OF continued)				
		-					-
					. – – – – – –		
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TEEA3305L 05/25/11

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Schedule **D** (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization CALIFORNIA ASSOCIATION OF REALTORS®	Employer identification number
ISSUES MOBILIZATION POLITICAL ACTION COM	95-4167538
FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICE	RS, DIRECTORS, ETC.
THE CALIFORNIA ASSOCIATION OF REALTORS® ISSUES MOBILIZATION P	OLITICAL ACTION
COMMITTEE (IMPAC) HAS MADE NO AFFIRMATIVE EFFORT TO DETAIL AL	L OF THE RELATIONSHIPS.
WHILE WE ARE UNAWARE OF ANY, THERE IS A POSSIBILITY THAT SOME	FAMILY OR BUSINESS
RELATIONSHIPS MAY EXIST. NO KEY EMPLOYEE HAS REPORTED ANY B	USINESS OR FAMILY
RELATIONSHIP WITH ANY OTHER OFFICER, TRUSTEE OR KEY EMPLOYEE	·
FORM 990, PART VI, LINE 3 - DESCRIPTION OF DELEGATED DUTIES TO MANAGE	EMENT COMPANY
MANAGEMENT OF THIS ORGANIZATION IS PROVIDED BY CALIFORNIA ASSOC	IATION OF REALTORS® AT
NO CHARGE, AS INDICATED ON SCHEDULE R, PART V, LINE 1L. THIS	ORGANIZATION ALSO USES
THE OFFICE SPACE AND EQUIPMENT OF CALIFORNIA ASSOCIATION OF R	EALTORS® FOR NO CHARGE,
AS INDICATED ON SCHEDULE R, PART V, LINE 1M.	·~
FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SH	AREHOLDER
MEMBERSHIP IN CALIFORNIA ASSOCIATION OF REALTORS® ISSUES MOBI	LIZATION POLITICAL
ACTION COMMITTEE ("IMPAC") SHALL BE AVAILABLE TO MEMBERS OF C	ALIFORNIA ASSOCIATION
OF REALTORS®.	
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GO	VERNING BODY
THE GENERAL MEMBERSHIP OF IMPAC SHALL CONSIST OF THOSE MEMBER	S OF CALIFORNIA
ASSOCIATION OF REALTORS® ("C.A.R.") WHO HAVE CONTRIBUTED TO I	MPAC IN THE FORM OF AT
LEAST THE MINIMUM SUGGESTED AMOUNT TO ALL DESIGNATED CAR SPON	SORED FUNDRAISING
PROGRAMS. CANDIDATES TO THE BOARD OF TRUSTEES SHALL BE NOMIN	ATED FROM A COMMITTEE
CONSISTING OF THE CURRENT TRUSTEE CHAIR AND ONE OTHER TRUSTEE	, THE CURRENT C.A.R.
PRESIDENT, PLUS 2 MEMBERS OF THE GENERAL MEMBERSHIP. INDIVID	UALS NOMINATED ARE THEN
VOTED UPON BY THE GENERAL MEMBERSHIP. THE BOARD OF TRUSTEES	SHALL HAVE SUPERVISION
AND CONTROL OVER THE AFFAIRS OF IMPAC.	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 Attach to Form 990. Pee separate instructions.

201

OMB No 1545 0047

CALIFORNIA ASSOCIATION OF REALTORS® ISSUES MOBILIZATION POLITICAL ACTION COM

Employer identification number 95-4167538

(f)
Direct controlling
entity (e) End-of-year assets Pad I Identification of Disregarded Entities (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.) (d) Total income (c)
Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EIN of disregarded entity E

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Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during	Irganizations (Complete if t zations during the tax year.)	(Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had the tax year.)	ı answered 'Ye	s' to Form 990, Pal	t IV, line 34 becau	use it ha	ַם
(a)	(b)	(c) (c)	(b)	(e)	(f)	(g)	7.13
Name, address, and EIN of related organization	Frimary activity	or foreign country)	section	(if section 501(c)(3))	entity	controlled entity?	ontity?
						Yes	<u>چ</u>
(1) CALIFORNIA ASSOCIATION OF REALTORS® 525 SOUTH VIRGIL AVENUE							
	BUSINESS LEAGUE					·	
95-0594790	OF CA REALTORS®	CA	501 (C) (6)		N/A		×
(2) C.A.R. HOUSING AFFORDABILITY FUND	PUBLIC CHARITY						
525 SOUTH VIRGIL AVENUE	MAKING HOUSING						
LOS ANGELES, CA 90020	AFFORDABILITY						
91-2157935	GRANTS	CA	501 (C) (3)	11	N/A		×
(3) C.A.R. EDUCATION FOUNDATION							
	PUBLIC CHARITY					_	
LOS ANGELES, CA 90020	MAKING EDUCATION					-	
20-2696963	GRANTS	CA	501 (C) (3)	11	N/A		×
(4) C.A.R. SCHOLARSHIP FOUNDATION							
1	PUBLIC CHARITY						
LOS_ANGELES, CA_90020	AWARDING						
	SCHOLARSHIPS	CA	501 (C) (3)	7	N/A		×

Schedule **R** (Form 990) 2011

TEEA5001L 09/08/11

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

95-4167538 Schedule R (Form 990) 2011 CALIFORNIA ASSOCIATION OF REALTORS® ISSUES MOBILIZATION POLITICAL ACTION COM

Page 2

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part 111

(a) (b) (c) (d) Nome, address, and EIN of Primary activity Legal Direct	(b) Primary activity	(Segal		(e) Predominant	(f) Share of total	(g) Share of	(h) Dispropor-	(i) Code V-UBI	(Ceneral or	(k) Percentage
related organization		domicile (state or	contr	income (related, unrelated, excluded from fax under	псоте	end-of-year assets	tionate allocations?		managing partner?	ownership
SEE PART VII		country)		sections 512-514)			Yes No	(Form 1065)	Yes No	
(1) REAL ESTATE RISK										
525_ SOUTH_VIRGIL						•				
LOS ANGELES, CA										
26-1779127	INSURANCE	CA	N/A		0.	0.	×	N/A	×	
C2 RE FORMSNET, LLC	:									
18025_15_MILE_RO										
CLINTON TOWNSHIP										
95-4768690	E-FORMS	MI	N/A		0.	0.	×	N/A	×	
(3)										
									_	
Partily Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV,	of Related Orga	nization	s Taxable as a	Corporation or	Trust (Comple	te if the organiz	ation ans	wered 'Yes' to I	Form 990,	Part IV,
Inne 34 because it had one or more related organizations treated as a corporation or trust during the tax year,	e it had one or i	more rela	ated organizatii	ons treated as	a corporation or	trust during the	tax year	.)		

(h) Percentage ownership Ö ö (g) Share of end-of-year assets (f) Share of total income 0 Ö (e)
Type of entity
(C corp, S corp, or trust) CORP C CORP U (d)
Direct
controlling entity N/A N/A (c)
Legal domicile
(state or foreign c CA CA(b) Primary activity SOFTWARE PRODUCTS REALTOR REALTOR SERVICE FOR CAR MLS INC (2) REAL ESTATE BUSINESS TECHNOLOGIESL (a) Name, address, and EIN of related organization (1) REAL ESTATE BUSINESS SERVICES. (3) C.A.R. HOLDING COMPANY, INC. - 525 SOUTH VIRGIL AVENUE 525 SOUTH VIRGIL AVENUE 525 SOUTH VIRGIL AVENUE LOS ANGELES, CA 90020 LOS ANGELES, CA 90020 LOS ANGELES, CA 90020 26-2666727 95-3779066 95-4642567

Schedule R (Form 990) 2011

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NPO MUTUAL

N/A

 $C_{\mathbf{A}}$

MEMBERSHIP

TEEA5002L 05/24/11

Paril Transactions With Related Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34, 35, 35a, or 36.) 95-4167538

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	ŝ
1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s listed in Parts II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			1a	-	×
b Gift, grant, or capital contribution to related organization(s)			1 b		\times
c Gift, grant, or capital contribution from related organization(s)			10		×
d Loans or loan quarantees to or for related organization(s)			-J	×	
- I come a contract to the con			10		×
e Loans of loan guarantees by retated organization(s)			-		< }
f Sale of assets to related organization(s)		,	1.		×
a Purchase of assets from related organization(s)		•	19	_	⋈
			두		×
: constitution co			;		>
Lease of facilities, equipment, of outer assets to related organization(s)	٠				<
Jease of facilities, equipment, or other assets from related organization(s)			1-	×	
k Performance of services or membership or fundraising solicitations for related organization(s)			1k		X
I Performance of services or membership or fundraising solicitations by related organization(s)			11	X	
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			- E	×	
n Sharing of paid employees with related organization(s)	-		Jn	X	
o Reimbursement paid to related organization(s) for expenses			10		×
p Reimbursement paid by related organization(s) for expenses			1p		×
q Other transfer of cash or property to related organization(s)	:		19		×
r Other transfer of cash or property from related organization(s)	ï		11		X
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	overed relationships ar	d transaction threshold	s.	3	
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	l) etermini nvolved	<u> </u>
(1) CALIFORNIA ASSOCIATION OF REALTORS®	Q	113,341.	CONTRACT	₽	1
(2)					
(3)					
(4)					
(9)					
(6)			-		
BAA TEEA5003L 05/24/11		Sche	Schedule R (Form 990) 201	2 (066 1	5

95-4167538

图述机] Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)

(k) Percentage ownership Schedule R (Form 990) 2011 Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships. (i) General or managing partner? ŝ Yes Code V-UBI amount in box 20 of Schedule K-1 Form (1065) Dispropor-tionate allocations? ŝ Ξ Yes (g) Share of end-of-year assets (f) Share of total income (e)
Are all partners section 501(c)(3) organizations? TEEA5004L 05/24/11 ŝ Yes Predominant Ar income (related, unrelated, excluded from tax under section 512-514) (c) Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EIN of entity 1 <u>@</u> E **⊗**| ଷ୍ଟ ୍ର **&** ତ୍ର

BAA TEEA5005L 05/25/11 Schedule R (Form 9	90) 2011
48035	
RE FORMSNET, LLC 95-4768690 18025 15 MILE ROAD CLINTON TOWNSHIP, MI	
ANGELES, CA_90020	
REAL ESTATE RISK SERVICES, LLC 26-1779127 525 SOUTH VIRGIL AVENUE LC) <u>S</u>
PART III - PARTNERSHIP FULL NAME, ADDRESS, FEIN	
(see instructions).	
Part VII Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R	

Page 5

Schedule **R** (Form 990) 2011

CAL 95-4167538 Continuation Page 1 of 1

Schedule R Cont (Form 990) 2011 CALIFORNIA ASSOCIATION OF REALTORS® ISSUES MOBILIZATION POLITICAL 95-4167538

Partill Continuation of Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501 (c)(3))	(F) Direct controlling entity	(G) Sec 512(b)(13) controlled entity? Yes No	entity?
CALIFORNIA REAL ESTATE PAC 525 SOUTH VIRGIL AVENUE 10S ANGELES, CA 90020 65-6485939	POLITICAL ACTION COMMITTEE	C.A.	527		N/A		×
		TEEA5102L 09/08/11			Schedule R Cont (Form 990) 2011	(Form 990) 2011

Continuation Page 1 of 1

95-4167538	
Schedule R Cont (Form 990) 2011 CALIFORNIA ASSOCIATION OF REALTORS® ISSUES MOBILIZATION POLITICAL 95-4167538	Continuation of Identification of Related Organizations Taxable as a Corporation or Trust
Sche	Par

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
CALIFORNIA REAL ESTATE ASSOCIATION, INC. 525 SOUTH VIRGIL AVENUE LOS ANGELES, CA 90020 N/A	NAME PROTECTION	CA.	N/A	C CORP	•0	0.	
C.A.R. C/O CALIFORNIA ASSOC OF REALTORS® 525 SOUTH VIRGIL AVENUE LOS ANGELES, CA 90020	NAME PROTECTION	CA	N/A	C CORP	0.	0.	
		TEEA5104L 08/25/11	8/25/11			Schedule R Cont (Form 990) 2011	n 990) 2011

2011

SCHEDULE O - SUPPLEMENTAL INFORMATION

PAGE 1

CALIFORNIA ASSOCIATION OF REALTORS
ISSUES MOBILIZATION POLITICAL ACTION COM

95-4167538

FORM 990, PART XI, LINE 5 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

NET UNREALIZED GAINS OR LOSSES ON INVESTMENTS

TOTAL $\frac{$}{$}$ $\frac{-91,425}{-91,425}$.

(Rev January 2012)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury

OMB No 1545 1709

File a separate application for each return.

ınternai Revenu	e Service	a separate appli	cation for each return.			
● If you ar	e filing for an Automatic 3-Month Extension	, complete only P	art I and check this box.		► X	
-	e filing for an Additional (Not Automatic) 3-I	•		form).		
	plete Part II unless you have already been g					
corporation i request an e Associated \	ling (e-file). You can electronically file Form required to file Form 990-T), or an additiona extension of time to file any of the forms listed With Certain Personal Benefit Contracts, whing of this form, visit www.irs.gov/efile and of	l (not automatic) ed in Part I or Pai ch must be sent	3-month extension of time You can elected in the exception of Form 8870, Info to the IRS in paper format (see instruction	tronically file Form ormation Return fo	8868 to r Transfers	
	utomatic 3-Month Extension of Ti					
	n required to file Form 990-T and requesting			omplete Part I only	▶	
•	porations (including 1120-C filers), partnersi			an extension of tin	ne to file	
	Name of exempt organization or other filer, see instruc	tions		Employer identificatio		
Type or print File by the	CALIFORNIA ASSOCIATION OF ISSUES MOBILIZATION POLITI	CAL ACTION	СОМ	X 95-41675 Social security in		
due date for filing your		x, see msnuchons		Social security in	umber (33N)	
return See instructions	525 SOUTH VIRGIL AVENUE City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
monded on 5	LOS ANGELES, CA 90020					
Enter the Re	eturn code for the return that this application	is for (file a sepa	arate application for each return)		01	
Application ls For		Return Code	Application Is For		Return Code	
Form 990		01	Form 990-T (corporation)		07	
Form 990-Bl	-	02	Form 1041-A		08	
Form 990-E	7	01	Form 4720		09	
Form 990-PI	=	04	Form 5227		10	
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069		11	
Form 990-T	(trust other than above)	06	Form 8870		12	
Telephon If the org If this is check the exter I reque until The exter 2 If the t	e No (213) 739-8200 ganization does not have an office or place of for a Group Return, enter the organization's is box Inside the group in the grou	of business in the four digit Group oup, check this borroration require pt organization re	Exemption Number (GEN) If ox	this is for the who mes and EINs of a		
	application is for Form 990-BL, 990-PF, 990- undable credits See instructions	T, 4720, or 6069,	enter the tentative tax, less any	3a \$	0.	
	application is for Form 990-PF, 990-T, 4720, ints made. Include any prior year overpayme			3ь \$	0.	
	ce due. Subtract line 3b from line 3a. Include 6 (Electronic Federal Tax Payment System).			3c \$	0.	

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

Form 8868	(Rev 1-2012)				Page 2
• If you	are filing for an Additional (Not Automatic) 3-Mo	nth Extension,	complete only Part II and check this	s box	<u>► X</u>
-	complete Part II if you have already been grant				
• If you	are filing for an Automatic 3-Month Extension, c	omplete only P	art I (on page 1).		
Part II	Additional (Not Automatic) 3-Month E	xtension of	Time. Only file the original	(no copies needed	d).
			Enter filer's	identifying number, se	e instructions
	Name of exempt organization or other filer, see instructions			Employer identification numb	er (EIN) or
Type or print	CALIFORNIA ASSOCIATION OF REALISSUES MOBILIZATION POLITICAL		COM	X 95-4167538	
F ······	Number, street, and room or suite number. If a P.O. box, see			Social security number (SSN)
File by the extended	RBZ LLP				
due date for	11755 WILSHIRE BLVD NINTH FL				
filing the return See instructions	City, town or post office, state, and ZIP code. For a foreign a	address, see instruc	tions		
	LOS ANGELES, CA 90025				
Enter the	Return code for the return that this application is	for (file a sepa	arate application for each return).		01
Application	оп	Return Code	Application Is For		Return Code
Form 990		01	``		
Form 990-	DI	02	Form 1041-A	1010	08
Form 990-		01	Form 4720		09
Form 990-		04	Form 5227		10
	-T (section 401(a) or 408(a) trust)	05	Form 6069		11
	-T (trust other than above)	06	Form 8870		12
Telepi If the If this whole gro	ooks are in care of ► IQBAL_BHOLAT hone No. ► (213) 739-8200 organization does not have an office or place of is for a Group Return, enter the organization's foup, check this box • If it is for part of the extension is for	FAX No. business in the our digit Group	: United States, check this box		. ► ☐ his is for the of all
5 For 6 If th 7 Stat	quest an additional 3-month extension of time uncalendar year 2011, or other tax year beging the tax year entered in line 5 is for less than 12 m. Change in accounting period the in detail why you need the extension TATHER INFORMATION NECESSARY TO	onths, check re	, 20, and ending _ eason Initial return CSPECTFULLY_REQUESTS_AD	DITIONAL TIME	
	ns application is for Form 990-BL, 990-PF, 990-T refundable credits. See instructions.	, 4720, or 6069	, enter the tentative tax, less any	. 8a\$	
pay	nis application is for Form 990-PF, 990-T, 4720, o ments made. Include any prior year overpaymer n Form 8868				
c Bal	ance due. Subtract line 8b from line 8a. Include (IPS (Electronic Federal Tax Payment System). S	your payment w See instructions	with this form, if required, by using	8c \$	
Under penal correct, and Signature	Signature and Ver	ng accompanying so	the completed for Part II of the best of my and to the best of my and the best o		114/12