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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2012

Open to Public States

<u> </u>	For the 2	, 2012, and ending	g		,	
В	Check if app	licable C		D Employe	er Identif	Ication Number
	Addres	change ARKANSAS REALTORS ASSOCIATION	i	23-7	0007	143
	Name	111004 PVPOUMTIM ANIMAN NATIO	ŀ	E Telephor		
	Initial r	ITTUTE DOCK NO 30011				
	\vdash			501-	225-	-2020
	Termin		İ			
	Amend	ed return		G Gross re		
	Applica	Dinding H. Dingo	H(a) Is this a			
		SAME AS C ABOVE	H(b) Are all a If 'No,' a	affiliates inclu	ided?	Yes No
_	Tax-exen	pt status 501(c)(3) X 501(c) (6) (insert no.) 4947(a)(1) or 527	11 NU, 2	illacii a iist. (see insu	ructions)
	Websit		H(c) Group e	xemption nur	mber >	
· <		rganization X Corporation Trust Association Other ► L Year of Formation				gal domicile. AR
		Summary	1723	1111 51	ate of let	gar dofficite. ATT
.r.a	1 Bri	ofly describe the organization's mission or most significant activities. TRADE ASS	COCTADI	CONT. ODG	73 177	TED EOD
	יום ו					
Activities & Governance		ALTORS OPERATING IN THE STATE OF ARKANSAS. THE ASSO	CIVITO	N_WAS_	FOIT	BLISHED TO
뛜		OMOTE THE REAL ESTATE INDUSTRY IN GENERAL AND TO PRO	ATDE E	DOCATI	ONAT	FURICHWENT _
ē		D RISK REDUCTION FOR ITS MEMBERS.				
ğ		eck this box if the organization discontinued its operations or disposed of more				
8		nber of voting members of the governing body (Part VI, line 1a)		• • • •	3 4	43
8		al number of individuals employed in calendar year 2012 (Part V, line 2a)		·· }		43
ğ۱				· }	5 6	9
ਹ		al number of volunteers (estimate if necessary) al unrelated business revenue from Part VIII, column (C), line 12	• • •			2 360
⋖		unrelated business taxable income from Form 990-T, line 34		-	7 a	2,360.
ᅴ	D IVE	unrelated business taxable income from Form 950-1, line 34		· · · ·	70	0.
	0 0-	stubutions and greats (Dort VIII June 16)	Pr	ior Year		Current Year
:		ntributions and grants (Part VIII, line 1h)	<u> </u>	0.4.4		1 004 100
É		gram service revenue (Part VIII, line 2g)	ļ	,244,8		1,334,120.
Pevenue		estment income (Part VIII, column (A), lines 3, 4, and 7d)			06.	694.
-		er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		77,0		219,633.
_		al revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1	, 322, 7	48.	1,554,447.
		ints and similar amounts paid (Part IX, column (A), lines 1-3)				
	14 Be	nefits paid to or for members (Part IX, column (A), line 4)				
	15 Sa	aries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		543,3	98.	546,664.
ŝ		fessional fundraising fees (Part IX, column (A), line 11e).		<u> </u>		
en:			\$ 22. 478 x 18	the tribline	3 . 5 3 1	的现在分词 () () () () () () () () () () () () ()
Expenses		al fundraising expenses (Part IX, column (D), line 25) ▶	15 Elgi	等 经	30.00	
۳	17 Otl	er expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		833,0	02.	786,730.
	18 To	al expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1	, 376, 40	00.	1,333,394.
	19 Re	venue less expenses. Subtract line 18 from line 12	, i	-53,6		221,053.
ances		The second secon	Beginning	of Current		End of Year
alan	20 To	al assets (Part X, line 16)		,150,6		3,386,378.
d Bal			101	374,1		387,288.
E S		 	1031-			
		assets or fund balances. Subtract line 21 from line 20	-b 12	,776,5	68.	2,999,090.
		Signature Block GDEN, U	<u> </u>			
Jnde	r penalties	of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to ation of preparer (other than officer) is based on all information of which preparer has any knowledge	the best of m	y knowledge	and belie	ef, it is true, correct, and
				a 	112	
		Voavaa on. Pous Signature of officer	Date		115	
Sig		Į. ·	Dati	6	•	
łе	re	BARBARA M. BASS	CEO			
_		Type or print name and title				
		Print/Type preparer's name Preparer's signature Date	1	Check	ıf P	PTIN
a	id	MICHAEL G. CRAIG Whall 7-30-	13	self-employe	a F	200014666
	eparer	Firm's name KNAPP, CRAIG & RUGG, P.A.				
	e Only	Firm's address 501 N UNIVERSITY, SUITE 245		Firm's EIN F	71.	0654756
٠	y					0654756
_		LITTLE ROCK, AR 72207		Phone no.	(501	
		discuss this return with the preparer shown above? (see instructions) .	<u></u>	·	- :-	X Yes No
BA	A For Pa	perwork Reduction Act Notice, see the separate instructions.	A0113L 12/1	18/12		Form 990 (2012)

Form 990 (2012) ARKANSAS REALTORS ASSOCIATION	23-7000743	Page 2
Partill, Statement of Program Service Accomplishments	· · · · · · · · · · · · · · · · · · ·	
Check if Schedule O contains a response to any question in this Part III		X
1 Briefly describe the organization's mission:		
TRADE ASSOCIATION ORGANIZED FOR REALTORS OPERATING IN THE STATE	OF ARKANSAS. TI	HE
ASSOCIATION WAS ESTABLISHED TO PROMOTE THE REAL ESTATE INDUSTRY	IN GENERAL AND	
PROVIDE EDUCATIONAL ENRICHMENT AND RISK REDUCTION FOR ITS MEMBER	RS	
	=	
2 Did the organization undertake any significant program services during the year which were not listed on the p	rior	
Form 990 or 990-EZ?	· · · · · Yes	X No
If 'Yes,' describe these new services on Schedule O.		<u>N</u>
3 Did the organization cease conducting, or make significant changes in how it conducts, any program s	ondoor? \(\sqrt{\sq}}}}}}}}\sqrt{\sq}\sq}}}\sqrt{\sq}\signsign{\sqrt{\sq}\sq}}}}\sqrt{\sqrt{\sq}}\sqrt{\sq}\sqrt{\s	V No
If 'Yes,' describe these changes on Schedule O.	services? Yes	X No
——————————————————————————————————————		
4 Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount	rvices, as measured by ex of grants and allocations to	penses.
others, the total expenses, and revenue, if any, for each program service reported.	or grants and anotations to	
4a (Code:) (Expenses \$ 207,885. including grants of \$)	(Revenue \$ 420	,674.)
THE ASSOCIATION HAS PRODUCED STANDARDIZED INDUSTRY FORMS AND SOF		/ 0 / 1 · /
MEMBERSHIP. THE PRIMARY PURPOSE IS RISK (LIABILITY) REDUCTION.	THE FORMS AND	
SOFTWARE ARE AVAILABLE FOR SALE ONLY TO LICENSED REAL ESTATE BRO		
ELECTRONIC FORMS ARE AVAILABLE ONLY TO REALTORS WHO ARE MEMBERS		
PAPER FORMS ARE AVAILABLE TO MEMBERS AND NON-MEMBERS.	OF THE WOOCTAT	
TATER TORMS ARE AVAILABLE TO MEMBERS AND NON MEMBERS.		
	(Revenue \$ <u>100</u>	<u>,177.</u>)
THE ASSOCIATION SPONSORS AN ANNUAL CONVENTION FOR ITS MEMBERS.	THE CONVENTION	
INCLUDES SPEAKERS, EDUCATION SEMINARS, TABLE-TOP EXHIBITS, AND A	A GENERAL EXCHANG	GE OF
IDEAS. APPROXIMATELY 300 PERSONS ATTENDED THE 2012 CONVENTION.		
4c (Code:) (Expenses \$ 103,440. including grants of \$) ((Revenue \$ 108	,784.)
MEMBER PROJECTS PRIMARILY REPRESENTS THE ANNUAL "AWARDS FOR EXCH		WUTCU
RECOGNIZES REALTOR MEMBERS MEETING CERTAIN SALES STANDARDS IN THE		MUICU
APPROXIMATELY 1,800 MEMBER REALTORS WERE RECOGNIZED WITH AWARDS		
MEMBER PROJECTS ALSO INCLUDES THE ASSOCIATION'S ANNUAL SPONSORS		
CAMPAIGN BENEFITTING THE ARKANSAS SPECIAL OLYMPICS. \$42,505 WAS		
OTHER MEMBER PROJECTS INCLUDE PROMOTION AND ADVANCEMENT OF PROFE	SSIONAL STANDARI	DS_AND_
CONTINUING PUBLIC RELATIONS CAMPAIGNS.		
4 d Other program services. (Describe in Schedule O.) SEE SCHEDULE O		
(Expenses \$ 30,237. including grants of \$) (Revenue \$	18,815.)	
4 e Total program service expenses ► 493, 456.		

			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		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		х
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		х
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, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V.	10		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.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a	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	11 b		х
ı	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
	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, and XII.	12a	х	ļ
	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 and XII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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	complete Schedule G, Part III	19		х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	<u> </u>	X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Pa	Checklist of Required Schedules (continued)		_	
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		X
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 J	23		х
24	a 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	24a		x
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
,	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part 1	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest 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
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		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 Schedule L, Part IV	28b		Х
	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	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part 1	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	_ X	
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	b If 'Yes' to line 35a, 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	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

BAA

Form 990 (2012)

Check if Schedule O contains a response to any question in this Part V			. [
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	17 额	(" " " "	-32
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0	1	37
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	¥.	12.8
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-	10 6 35	1 1/2 7	7.7
ments, filed for the calendar year ending with or within the year covered by this return.	9	š.	-,
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.	2b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	2 - 4 10 0	· (7 1
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	. 3a	X	
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule Q</i>	3b	Х	
4 a 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		Х
b If 'Yes,' enter the name of the foreign country: ►	36123	37.7	
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		The state of	1 4 m
5 a 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?	5b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	. 5c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			
solicit any contributions that were not tax deductible as charitable contributions?	. <u>6a</u>		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь		
7 Organizations that may receive deductible contributions under section 170(c).	11/1/2	32	. 2
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			200
services provided to the payor?	. 7a		سنعل
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
Form 8282?	. 7c		,
d If 'Yes,' indicate the number of Forms 8282 filed during the year	1737	(A) 77 . 14	
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?	. <u>7f</u>		<u> </u>
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
Form 1098-C?	. 7h	el le d	3. (.
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	ne 8		1
9 Sponsoring organizations maintaining donor advised funds.	75.57	- -,	1, 13
a Did the organization make any taxable distributions under section 4966?	9a		_ X ''4
b Did the organization make a distribution to a donor, donor advisor, or related person?	9a		
10 Section 501(c)(7) organizations. Enter:	· · · · · · · · · · · · · · · · · · ·	Aug. A.	· 4
a Initiation fees and capital contributions included on Part VIII, line 12	1 To		No.
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		13.	
11 Section 501(c)(12) organizations. Enter:		130	
a Gross income from members or shareholders	44 A	1	1
		*	- 1. N
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	سنكس	<u></u>
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	400	3-7-5-8	1 1
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		3.17	. 2 . 6
a Is the organization licensed to issue qualified health plans in more than one state?.	13a		20-5-4-
Note. See the instructions for additional information the organization must report on Schedule O.	7. 4, 7 ,	12	·2 .
b Enter the amount of reserves the organization is required to maintain by the states in	() F		, -
which the organization is licensed to issue qualified health plans	1.77.4		ا مواهد المارية الم
c Enter the amount of reserves on hand	7 : 37 i		٠. ٨٠٠
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 Q	14b	L	

Rart 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 ... Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year. 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. 1 a **b** Enter the number of voting members included in line 1a, above, who are independent... 2 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? . . . X 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? ... Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? . . .SEE .SCHEDULE 0 6 X 7 a 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...... X 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? . . . 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?... X 8 a X 8 b Is there any officer, director or 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. X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?... 10 a Х 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O X.A. 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 X 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise Х 12b Х 12 c X 13 Did the organization have a written document retention and destruction policy? 14 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? a The organization's CEO, Executive Director, or top management official 15 a 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... 16 a 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? 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization 11224 EXECUTIVE CENTER DRIVE LITTLE ROCK AR BAA TEEA0106L 08/08/12 Form 990 (2012)

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

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

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

- 1 a 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 nor any related organization compensated any current officer, director, or trustee.

		(C)								
(A) Name and Title	(B) Average	Position (do not check more than one box, unless person is both an officer and a director/trustee)			h an	(D) Reportable	(E) Reportable	(F) Estimated		
	hours per week (list		_		_		•	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation
	any hours for related	ਰਾਹੀ	핥	Officer	ey e	퓛호	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organiza- tions below	Individual trustee or director	함	द्य	Key employee	st co	<u> </u>			and related organizations
	dotted line)	trus	al to		yee) Apr				
		ee	institutional trustee			Highest compensated employee				
(1) DANA POWELL	2		H			8				
PRESIDENT		x		Х				^		0
(2) JUDY GERBER	2		Н	Λ				0.	0.	0.
DIRECTOR		x						0.	0.	0
(3) LAURIE RUSHING	2							<u> </u>		0.
DISTRICT V-P		х		Х				0.	0.	0.
(4) KAREN CROWSON	2		М	-					0.	<u> </u>
DIRECTOR	0	x						0.	O.	0.
(5) MELANIE SILVEY	2							<u></u>		<u> </u>
DIRECTOR	0	x						0.	0.	0.
(6) DARLA DOUGLAS	2									
DIRECTOR	0	Х						0.	0.	0.
(7) DWAYNE HATT	2									
DIRECTOR	0	X						0.	0.	0.
(8) KEITH MONTGOMERY	2	1						- "		·
DIRECTOR	0	Х	Ш					0.	0.	0.
_(9) SANDY EBEL	2	↓								
DIRECTOR	0	Х					L	0.	0.	0.
(10) GLEE COSNER	2	ļ								
DIRECTOR	0	Х	Щ					0.	0.	0.
(11) WES FREEMAN	2	ļ								
DIRECTOR	0	Х	Ш		Щ		$oxed{oxed}$	0.	0.	0.
(12) SHERRY BOTTOMS	2	ļ								
DIRECTOR	0	X	_					0.	0.	0.
(13) NANETTE WEMHANER	2	∤ ∣						_		
DIRECTOR	0	X	\vdash				\vdash	0.	0.	0.
14) JACKIE KEENE	2	ł "						_	_	
DIRECTOR	0	X	Ш					0.	0.	0.

The state of the s	(D)	1			_	00,		1		1
•	(B)			(C	-					
(A)	Average hours			(D)	(E)	(F)				
Name and title	per	offi	cer ar	nd a	erson direct	or/trus	n an tee)	compensation from	Reportable compensation from	Estimated amount of other
	(list any hours for related organiza	오글	쿒	읓	6	哥哥	ਨੂ	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
	for	individual trustee or director	nstitutional trustee	Officer	Key employee	Highest co	Former			organization and related
	organiza	ड्र ह	읦	,	g	8 8				organizations
	- tions below	ਨੂ	ੜ		ee	100	İ			
	dotted line)	8	8			Highest compensated employee				
						ء ا	1			
(15) KEITH MONTGOMERY	2									
DIRECTOR	0	Х						0.	0.	0.
(16) WES FREEMAN	_ 2_									
DIRECTOR	0	X						0.	0.	0.
(17) SHERRY BOTTOMS	2_									
DIRECTOR	0	X						0.	0.	0.
(18) NANETTE WEMHANER	2									
DIRECTOR	0	l x						0.	0.	0.
(19) JACKIE KEENE	2							1		
DIRECTOR	7-0-	1 x						0.	0.	0.
(20) RONALD STINCHCOMB	2				<u> </u>	İ				
DISTRICT V-P	7 0	X		Х		ŀ		0.	0.	0.
(21) DEANNA DIAL	2									
DIRECTOR	1-5-	1 x						0.	0.	0.
(22) CINDY MEYERS	2		П							
DIRECTOR	1	X			ļ			0.	0.	0.
(23) WILLIAM LADD	2									
SEC-TREAS	7-0-	X		Х				0.	0.	0.
(24) PAULETTE RICHIE	2		П							
DIRECTOR	0	1 x						0.	0.	0.
(25) VELDA LUEDERS	2		П							
DIRECTOR	7 0	X		ŀ		ŀ		0.	0.	0.
1 b Sub-total			•	•		٠.	•	0.	0.	0.
c Total from continuation sheets to Part VII, Section	n A							253,304.	0.	26,042.
d Total (add lines 1b and 1c)							>	253,304.	0.	26,042.
2 Total number of individuals (including but not limited to	o those I	sted	abo	ve) v	who	recei	ved	more than \$100,00	0 of reportable comp	pensation
from the organization 1										
										Yes No
3 Did the organization list any former officer, director	or or trus	stee,	key	em	ploy	ee, c	or h	ighest compensat	ed employee	
on line 1a? If 'Yes,' compléte Schedule J for such	indıvıdu	al.	• •	٠		•	• • •	• • • • • • • • • • • • • • • • • • • •		. 3 X
4 For any individual listed on line 1a, is the sum of r	eportab	le co	mpe	ensa	tion	and	oth	er compensation	from	"是"
the organization and related organizations greater such individual	than \$1		00?	If 'Y	res'	com	piet	te Schedule J for		. 4 X
			an fr	om	2014		inte	d organization or	industrial	
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	comple'	te S	ched	dule	J fo	r suc	ch p	eu organization or Derson	individual	5 X
Section B. Independent Contractors										
1 Complete this table for your five highest compens	ated ind	eper	iden	t co	ntra	ctors	tha	at received more t	han \$100,000 of	
compensation from the organization. Report compensation	ation for	tne c	alen	oar j	year	enai	ng v			
(A) Name and business addre	:SS							Description		(C) Compensation
								 		
								-		
								 		
2 Total number of independent contractors (including bu	t not lim	ted t	o the)SA 1	listor	d abo	اما	who received more	than	The State of the S
\$100,000 in compensation from the organization		icu l	Juk	اتحور		. 000	•=)	o received more	u au	
\$100,000 in compensation from the organization	U		 -					· · · · · · · · · · · · · · · · · · ·		

Form 990

Continuation Sheet for Form 990

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

ARKANSAS REALTORS ASSOCIATION 23-7000743

[Part VIII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A)	(B)			((;)			(D)	(E)	(F)
Name and Title	Average		tion (chec		hat app		Reportable compensation from	Reportable	Estimated
	hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
SHARLA LAU	2									
DIRECTOR	0	Х						0.	0.	0.
ANDY MEYERS	2									
PAST PRES.	0	Х		X				0.	0.	0.
ANDREW CRAWFORD	2							_		
DIRECTOR MOODE	0	X						0.	0.	<u> </u>
JONATHAN MOORE		.,								_
DIRECTOR WILLIAM OLSON	0	X						0.	0.	0.
PRES. ELECT	$-\frac{2}{0}$	Х		Х						•
CHRIS POLYCHRON	2	^	Н	^			 	0.	0.	0.
DIRECTOR		х		i				0.	0.	0
JEFF PRATT	2		Н							0.
DIRECTOR		Х						0.	0.	0.
DEBBIE RAWLS	2						_	<u> </u>		<u> </u>
DIRECTOR	7-0-	х						0.	0.	0.
MAURICE TAYLOR	2									
DISTRICT V-P	0	X		X				0.	0.	0.
WALTER LOVELESS	2									
DIRECTOR	0	Х	Щ					0.	0.	0.
DAVID_ALPHIN	2					ĺ				
DIRECTOR	0	X	Ш					0.	0.	0.
DENISE CUNNINGHAM		.,								_
DIRECTOR RICHARD WHITE	0 2	Х						0.	0.	0.
DISTRICT V-P		х		x				0.	,	0
KENT DOVER	2			^				0.	0.	0.
DIRECTOR		х						٥.	0.	0.
ANGELLA JOHNSON	2		Н							<u></u>
DIRECTOR	0	х						0.	0.	0.
BRENDA KIRKLEY	2									
DIRECTOR	0	Х						0.	0.	0.
SANDRA KELLEY	2									
DIRECTOR	0	X						0.	0.	0.
DOUGLAS SMITH	2									
DIRECTOR	0	Х						0.	0.	<u> </u>
MARK MARCHAND	50									
C E O	0			Х				113,194.	0.	13,595.
KIM ASHCRAFT	<u>50</u>			_				9.		
C F O	0	<u> </u>	\vdash	Х				73,910.	0.	7,362.
BARBARA M. BASS	<u>50</u>	ŀ		Ţ				66 200		
<u>C O O</u>		L	لـــا	X			Ш	66,200.	0.	5,085.

Form 990 Cont 2012

		Check if Schedule O	contains a re	esponse to any questi	on in this Part VIII.			. , 🗌
	3 . 4. 3 . 4.			38 to 1	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
100円	1 a	Federated campaigns	1	a				
뚫히	b	Membership dues	1	b				St. Jan St.
S Z	С	Fundraising events	1	С				
유퇴	d	Related organizations	1	d	2 12 1 12 12 12 12 12 12 12 12 12 12 12			
훘죑	е	Government grants (contribution	ons) . 1	е	The second secon	17年40日本第二		
美ӹ		All other contributions gifts of	rante and				3,700	
플링	•	All other contributions, gifts, g similar amounts not included	above. 1	f		2	Yalin kaling Parana	Server to the se
CONTRIBUTIONS, GIFTS, GRANT AND OTHER SIMILAR AMOUNTS	g	Noncash contributions include	d in Ins 1a-1f:	\$				
	h	Total. Add lines 1a-1f		•		, , ,		
PROGRAM SERVICE REVENUE				Business Code	250	1 XX 1. 7 X7.3	是是"自己"的"	18 3 4 4 7 8 64
	2 a	MEMBERSHIP DUES &	ASSESSMENT	rs .	1,100,094.	1,100,094.		
띴		MEMBER PROJECTS			108,784.	108,784.		
ጅ∣	С	CONVENTION INCOME			100,177.	100,177.		
몽	d	EDUCATION PROGRAMS			18,815.	18,815.		
氢	e	LEADERSHIP TRAININ			6,250.	6,250.		
8	f	All other program service	ce revenue					
4	g	Total. Add lines 2a-2f.		, ▶	1,334,120.		は いいかん かんだい かんだい	the second of the second
	3	Investment income (inc	luding divide	ends, interest and				
		other similar amounts)		▶	694.			694.
	4	Income from investmen		,			-	
l	5	Royalties				20 052	7 2 -	
		_	(ı) Real	(II) Personal		1 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
- 1		Gross rents	4,1	10.	學是 後 196	生活着,而是近	A CONTRACTOR	
		Less rental expenses					77. "我们是一个	
	-	Rental income or (loss)	4,1		La Carrie de la Carriera	15 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	The same of the sa	
	d	Net rental income or (lo			4,110.			4,110.
l	7 a	Gross amount from sales of	(i) Securitie	s (ii) Other		The second second		THE PARTY OF
		assets other than inventory				17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	b	Less: cost or other basis			And the same of the same of the same		The state of the s	
		and sales expenses .				المناسبة المناسبة المناسبة		12. 5
		Gain or (loss)			Mark State	The rise It is not	The state of the state of	The street was the state
		Net gain or (loss)		· · · · · · ·		te ves all.		Y 1 24 3 3 4
щ	8 a	Gross income from fund	draising ever	nts			国验证法 法。	国际法律
OTHER REVENU		(not including \$ of contributions reporte	d on line 1-		是一个	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	position of the second	學的特殊分別的
즱		•	d on line 10)	'·		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	المرواد المراج المراج والمرج المراج ا	10 m
ER		See Part IV, line 18		. a	The state of the s		1 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Comment of the second
Œ		Less: direct expenses				1. 電子をごかり	with the transfer	1 134 1555
		: Net income or (loss) fro			టిము ఎశ.క. ≥్	7, 4, 4	A STAN A CONTRACTOR OF THE	
	9 a	Gross income from gar See Part IV, line 19 .	ning activitie				The state of the s	The transfer of the transfer o
				· •				
		 Less: direct expenses Net income or (loss) from 		octivities >	With the Control			
					A CE LOS LOS LOS LOS LOS LOS LOS LOS LOS LOS		2,3, 2 34, 3	
	10 a	Gross sales of inventor and allowances.	y, less returr	ns . a 420,674.	Andreas &			
		Less: cost of goods sol		b 207,885.	A Charles			The state of the s
		: Net income or (loss) from			212,789.	212,789.		التعد المعاشد
	۲-	Miscellaneous Rever		Business Code	212, 109.	212, 109.	1450 GT 0	Transfer Confession State
	11 =	ADVERTISING		511120	2,360.	1	2,360.	Section of the Board Section
	, ,	MEMBER SERVICE	ROVAT TV		374.		2,300.	374.
	,		7.7.7.1.1.1	-	5,4.			3/4.
	١ '	All other revenue	 -					
	1	Total. Add lines 11a-11		·	2,734.	The grant was to the reference	Carrier of Carr	Tong - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	12	Total revenue. See ins			1,554,447.	1,546,909.	2,360.	5,178.
						<u>. </u>	. ~, ~ ~ .	<u> </u>

Randix Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX. (D) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Total expenses Program service Fundráising Management and general expenses expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.... Grants and other assistance to individuals in the United States. See Part IV, line 22 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, trustees, and key employees 253,304 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 192,224 Pension plan accruals and contributions (include section 401(k) and section 403(b) 11,205 Other employee benefits.... 52,842. Payroll taxes 37,089. 11 Fees for services (non-employees): a Management **b** Legal 556 c Accounting 8,865 60,000 e Professional fundraising services. See Part IV, line 17. . . f Investment management fees.... ... g Other. (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch 0). . . . 13 13,246 Information technology. . . . 14 Royalties. . Occupancy 16 61,834 17 Travel 155,011 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Payments to affiliates..... 21 Depreciation, depletion, and amortization 69,581 8,902 Insurance. Other expenses, Itemize expenses not covered above (List miscellaneous expenses a CONVENTION 151,894 b member projects 103,440 30,237 c EDUCATION PROGRAMS 26,536 d merchant card & e-commerce fee e All other expenses 96,628 25 Total functional expenses. Add lines 1 through 24e. 333,394 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 ► I if following SOP 98-2 (ASC 958-720).

	<u> </u>	Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	36,565.	1	76,069.
	2	Savings and temporary cash investments	304,288.	2	506,474.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	10,003.	4	9,403.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	A Service Control	5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
AS	7	Notes and loans receivable, net		7	
ASSETS	8	Inventories for sale or use		8	
T	9	Prepaid expenses and deferred charges	71,438.	9	133,573.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,311,477.			
	b	Less: accumulated depreciation 10b 285, 618.	2,093,387.	10 c	2,025,859.
	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	635,000.	15	635,000.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,150,681.	16	3,386,378.
	17	Accounts payable and accrued expenses	10,785.	17	10,647.
	18	Grants payable		18	
	19	Deferred revenue	363,328.	19	376,641.
ŀ	20	Tax-exempt bond liabilities		20	
A	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
1-1-1	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
į	23	Secured mortgages and notes payable to unrelated third parties		23	
s	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26_	Total liabilities. Add lines 17 through 25	374,113.	26	387,288.
N E T		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
Ş	27	Unrestricted net assets	2,776,568.	27	2,999,090.
₹	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
OR Fu		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			,
DZC	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ê	32	Retained earnings, endowment, accumulated income, or other funds		32	
BALAZOEN	33	Total net assets or fund balances	2,776,568.	33	2,999,090.
	34_	Total liabilities and net assets/fund balances	3,150,681.	34	3,386,378.
BA	A				Form 990 (2012)

orm 990 (2012) ARKANSAS REALTORS ASSOCIATION	23-700074	3 Page 12
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	1,554,447.
2 Total expenses (must equal Part IX, column (A), line 25)	2	1,333,394.
3 Revenue less expenses. Subtract line 2 from line 1	3	221,053.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,776,568.
5 Net unrealized gains (losses) on investments	5	
6 Donated services and use of facilities	6	
7 Investment expenses	7	
8 Prior period adjustments	8	
9 Other changes in net assets or fund balances (explain in Schedule O) SEE SCHEDULE Q	. 9	1,469.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		
column (B))	10	2,999,090.
Rart XII Financial Statements and Reporting		
Check if Schedule O contains a response to any question in this Part XII		X
		Yes No
1 Accounting method used to prepare the Form 990: Cash Accrual X Other SEE S	CH. O	
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
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or	r reviewed on a	
separate basis, consolidated basis, or both:		
Separate basis Consolidated basis Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?		2b X
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on	a separate	
basis, consolidated basis, or both:		
X Separate basis Consolidated basis Both consolidated and separate basis		
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of review, or compilation of its financial statements and selection of an independent accountant?	the audit,	. 2c X
If the organization changed either its oversight process or selection process during the tax year, expl in Schedule O.		
3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	Single 	3a X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	uired audit	3 ь
BAA		Form 990 (2012)

BAA

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

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.

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

• 9	Section 501(c)(4), (5), or (6) o	rganizations: Complete Part III.	•		
Name	of organization			Employer identifica	ation number
ARI	KANSAS REALTORS ASS	OCIATION		23-700074	3
Pai	t I A Complete if the o	rganization is exempt under section	on 501(c) or is a s	section 527 organiz	zation.
1	Provide a description of the	organization's direct and indirect political c	ampaign activities in	Part IV.	· · · · · · · · · · · · · · · · · · ·
2	Political expenditures			▶\$	
	Volunteer hours	· · · · · · · · · · · · · · · · · · ·	<u>.</u>	*** * * * * * * * * * * * * * * * * * *	
Pai	B Complete if the or	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	▶\$	
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955		
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 8	a Was a correction made?				Yes No
-	If 'Yes,' describe in Part IV.			•	
Pai	t CC Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	
		pended by the filing organization for section			
2		organization's funds contributed to other organ			
3	Total exempt function expen line 17b	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,		
4	Did the filing organization file	Form 1120-POL for this year?	, ,,,,		Yes X No
5	Enter the names, addresses organization made payments amount of political contribution segregated fund or a political	and employer identification number (EIN) b. For each organization listed, enter the arm is received that were promptly and directly del I action committee (PAC). If additional spa	of all section 527 polimount paid from the fivered to a separate polimer is needed, provide	itical organizations to willing organization's funcilitical organization, such a information in Part IV	hich the filing
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2012

Part II-A Complete if section 501(the organizatio (h)).	n is exempt under se	ction 501(c)(3) and	d filed Form 5768 (e	lection under
A Check ► ☐ if the filin	ig organization belon	gs to an affiliated group (and		ated group member's nam	ne,
		d share of excess lobbying ecked box A and 'limited co			
	Limits on Lobb	vina Expenditures		(a) Filing	(b) Affiliated
	'expenditures' me	ans amounts paid or incur		organizátion's totals	group totals
1 a Total lobbying expendit	•				
		legislative body (direct lobl	oying)		
c Total lobbying expendition d Other exempt purpose		•			
e Total exempt purpose e					
		·			
both columns	nount. Enter the ar	nount from the following ta	ble in		
If the amount on line 1e, col	lumn (a) or (b) is:	The lobbying nontaxable	amount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1		\$100,000 plus 15% of the excess			135% 法合
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess		THE TENTAL AND THE	
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess \$1,000,000.	over \$1,500,000.		
Over \$17,000,000 g Grassroots nontaxable	amount (enter 25%		<u>.</u>	A 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	3. L. L. L. L. L. L. L. L. L. L. L. L. L.
h Subtract line 1g from lin	· ·				
•		s, enter -0			
j If there is an amount other section 4911 tax for this		r line 1h or line 1i, did the org	ganızatıon file Form 472	reporting	. Yes No
		4-Year Averaging Period	Under Section 501(h)	· · · · · · · · · · · · · · · · · · ·	
(Som		at made a section 501(h) e ns below. See the instructi	lection do not have to		
	Lob	bying Expenditures During	4-Year Averaging Per	riod	
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2 a 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)) .					
f Grassroots lobbying expenditures					
BAA				Schedule C (Forn	1 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 ARKANSAS REALTORS ASSOCIATION 23-7000743 Ratell By Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)	(b)
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?	· L _		
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?			
j 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)?			AND MALE TO ANALYSIS
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 50 section 501(c)(6).	1(c)(5)	, or	
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			. 1 X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year? .			З Х
(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'	1(c)(5) Part I	, or s II-A, I	ine 3, is
1 Dues, assessments and similar amounts from members		1	1,100,094.
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	185,988.
b Carryover from last year		2ь	5,908.
c Total		2 c	191,896.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.	•	3	239,190.
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.
PartIV 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, line 2; and Part II-B, line 1. Also, complete this part for any additional information.			

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, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

2012

Open to Public

Name of the organization Employer identification number ARKANSAS REALTORS ASSOCIATION 23-7000743 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) . Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No 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?. No Paili Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, 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. Held at the End of the Tax Year a Total number of conservation easements. 2 a **b** Total acreage restricted by conservation easements 2 b c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not 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, in Part XIII, the text of the footnote to its financial statements that describes these items. 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 amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X... ▶\$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 ...

b Assets included in Form 990, Part X

>\$

Schedule D (Form 990) 2012 ARKANSA:	S REALTORS	ASSOCIATION	N	23-700	0743		Page 2
Part和II Organizations Maintainin							<u>ea)</u>
3. Using the organization's acquisition, accutems (check all that apply):	ession, and other				collectio	n	
a Public exhibition			exchange programs				
b Scholarly research c Preservation for future generation	_	e [] Other		· · · · · · · · · · · · · · · · · · ·			
4 Provide a description of the organization		explain how they f	urther the organization	's exempt purpose in			
Part XIII. 5 During the year, did the organization to be sold to raise funds rather than the solution of the	solicit or receive	donations of art,	historical treasures,	or other similar assets	Yes	Г	No
Part IV Escrow and Custodial Arrange reported an amount on Fo	ments. Comple	te if the organizat	ion answered 'Yes' f	o Form 990, Part IV, IIr			
1 a Is the organization an agent, trustee, on Form 990, Part X?				her assets not included	Yes	Г	No
b If 'Yes,' explain the arrangement in P	art XIII and com	plete the following	g table:				
					Amoun	l	
c Beginning balance				1 c			
d Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance				1f			
2a Did the organization include an amou					Yes	L	No
b If 'Yes,' explain the arrangement in P	art XIII. Check n	iere it the explant	ion has been provide	d in Part XIII.	• • • •	[_
Ran Va Endowment Funds. Comp	olete if the or	ganization and	wered 'Ves' to Fo	orm 990 Part IV lin	20.10		
industrial Lindownient runds. Com	(a) Current	(b) Prior year	(c) Two years	(d) Three years		our year	<u></u>
1 a Beginning of year balance		(B) Holyean	(6))50.0	(a) Three years	+ (6).		-
b Contributions					+		
· · · · · · · · · · · · · · · · · · ·							
c Net investment earnings, gains, and losses					İ		
d Grants or scholarships	· · · · · · · · · · · · · · · · · · ·		-		 		
e Other expenditures for facilities	 				- 		
and programs							
f Administrative expenses							
g End of year balance		<u> </u>	4 4 4 5 7 1				
2 Provide the estimated percentage of	-	end balance (line	1g, column (a)) held	as:			
a Board designated or quasi-endowment	<u> </u>	—— ⁶					
b Permanent endowment		Q.					
c Temporarily restricted endowment ►							
The percentages in lines 2a, 2b, and	•						
3a Are there endowment funds not in the po	ossession of the o	organization that are	e held and administere	d for the	г	Yes	M-
organization by: (i) unrelated organizations					200	res	No
(ii) related organizations			••••		3a(i) 3a(ii)		
b If 'Yes' to 3a(ii), are the related organ					3b		
4 Describe in Part XIII the intended use		-			30		
Rantivis Land, Buildings, and Equ							
Description of property	(a) Cos	st or other basis	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) E	Book va	lue
1a Land	· · · · · ·		<u> </u>	A TOTAL STATE		266	,875.
b Buildings			1,784,500.	160,157.	1		,343.
c Leasehold improvements							
d Equipment							
e Other			260,102.	125,461.		134	,641.
Total. Add lines 1a through 1e (Column (d) must equal Fo	rm 990, Part X. co			2	. 025	

Schedule **D** (Form 990) 2012

BAA

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

2. FIN 48 (ASC 740) Footnote. In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII

(10) (11)

Schedule D (Form 990) 2012 ARKANSAS REALTORS ASSOCIATION	23-7000743	Page 4
Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return	
1 Total revenue, gains, and other support per audited financial statements		,765,882.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	29	
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
CDD Dame	135.	
a Add to an On the control Od	 ;	011 405
Subtract line 2e from line 1		211,435.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3 1	,554,447.
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b		
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 1	,554,447.
PantXIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	
1 Total expenses and losses per audited financial statements	. 1 1	,543,360.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
0	66.	
e Add lines 2a through 2d	2 e	209,966.
3 Subtract line 2e from line 1		,333,394.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1	, 333, 334.
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		,333,394.
PartexIII Supplemental Information		, 000, 001.
	- 1 13 / 1 - 11 - 1	
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Palline 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid	art IV, lines ID and I e any additional info	2b; Part V,
The street in th	c any deamonal line	orriation.
	·	
	· -	
		·-··
BAA	Schedule D (Fo	orm 990) 2012

2012 SCHEDU	ILE D, PART XIII - SUPPLEMENTAL INFORM	AHUNPAGE
	ARKANSAS REALTORS ASSOCIATION	23-700074
SCHEDULE D, PART XI, LIN OTHER REVENUE INCLUDE	IE 2D ED IN F/S BUT NOT INCLUDED ON FORM 990	
ACCRUAL TO CASH CONVERNETTED EXPENSES - COST	RSION	207,885.
SCHEDULE D, PART XII, LIN OTHER EXPENSES AND LO		
ACCRUAL TO CASH CONVERNETTED EXPENSES - COST	RSION	\$ 2,081. 207,885. \$ 209,966.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Employer identification number

OMB No 1545-0047 2012

Openito Public

Department of the Treasury Internal Revenue Service Name of the organization

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.

23-7000743 ARKANSAS REALTORS ASSOCIATION FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION THE ASSOCIATION SPONSORS EDUCATION COURSES FOR THE BENEFIT OF ITS MEMBERSHIP IN ORDER THAT CONTINUING PROFESSIONAL EDUCATION REQUIREMENTS CAN BE MET AND SO THAT ADVANCED DESIGNATIONS CAN BE ACHIEVED. EIGHT EDUCATION COURSES WERE HELD IN 2012. FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC. TWO CURRENT DIRECTORS ARE HUSBAND AND WIFE. TWO CURRENT DIRECTORS ARE FATHER AND SON. FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER CLASSES OF MEMBERSHIP ARE: MEMBER BOARDS, BOARD MEMBERS, REALTOR MEMBERS, AFFILIATE MEMBERS, INSTITUTE AFFILIATE MEMBERS, AND LIFE MEMBERS FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY THE NOMINATING COMMITTEE OF THE BOARD OF DIRECTORS ANNUALLY DETERMINES ITS RECOMMENDATION OF OFFICERS AND DIRECTORS TO GOVERN THE ASSOCIATION. THE REPORT OF THE NOMINATING COMMITTEE IS SUBMITTED TO THE MEMBERSHIP FOR APPROVAL. OF OFFICERS AND DIRECTORS IS HELD AT THE ANNUAL MEMBERSHIP MEETING. THE ASSOCIATION WHO ATTEND THE ANNUAL MEETING ENJOY VOTING RIGHTS. FORM 990, PART VI, LINE 7B - DECISIONS OF GOVERNING BODY APPROVAL BY MEMBERS OR SHAREHOLDERS OTHER THAN AMENDMENTS MANDATED BY POLICY OF THE NATIONAL ASSOCIATION OF REALTORS, AMENDMENT TO THE CONSTITUTION AND BY-LAWS REQUIRES A TWO-THIRDS VOTE OF THE MEMBERSHIP PRESENT AT ANY MEETING OF THE MEMBERSHIP, PROVIDED THAT WRITTEN NOTICE OF THE PROPOSED AMENDMENT HAS BEEN SENT TO EACH MEMBER AT LEAST THIRTY DAYS PRIOR TO SUCH MEETING. FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS A DRAFT COPY OF THE ANNUAL FORM 990 IS REVIEWED BY THE CHIEF EXECUTIVE OFFICER AND CHIEF FINANCIAL OFFICER PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

•	₹
Schedule O (Form 990 or 990-EZ) 2012 Name of the organization	Page 2
ARKANSAS REALTORS ASSOCIATION	Employer Identification number 23-7000743
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS (CON	TINUED)
OF THE ANNUAL FORM 990 AS FILED IS MADE AVAILABLE TO	THE MEMBERS OF THE EXECUTIVE
COMMITTEE.	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND	ENFORCEMENT OF CONFLICTS
A CONFLICT OF INTEREST STATEMENT IS SIGNED ANNUALLY BY	EACH MEMBER OF THE BOARD OF
DIRECTORS AND BY EACH EMPLOYEE OF THE ASSOCIATION.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS P	UBLICLY AVAILABLE
THE ASSOCIATION'S FINANCIAL STATEMENTS, ANNUAL FORM 99	0, AND OTHER DOCUMENTS MEETING
THE CRITERIA FOR DISCLOSURE ARE MADE AVAILABLE TO THE	PUBLIC OR OTHER INTERESTED
PARTIES UPON REQUEST.	
FORM 990, PART XII, LINE 1 - OTHER ACCOUNTING METHOD	
MODIFIED CASH	

SCHEDULE O - SUPPLEMENTAL INFORMATION 2012 **ARKANSAS REALTORS ASSOCIATION**

23-7000743

PAGE 1

FORM 990, PART XI, LINE 9 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

ACCRUAL TO CASH CONVERSION

TOTAL \$

SCHEDULE R (Form 990)

Department of the Treasury internal Revenue Service Name of the organization

ARKANSAS REALTORS ASSOCIATION

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2012

Employer identification number 23-7000743

Part [3] Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.)	lete if the organiza	ation answered 'Yes	' to Form 990,	Part IV, line 33.)		
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity		ile (state country)	(d) Total income En	(e) End-of-year assets	(f) Direct controlling entity
(a)						
(2)						
(3)						
Part II. Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during		(Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had the tax year.)	answered 'Yes	to Form 990, Pa	ırt IV, lıne 34 bec	ause it had
(a) Name, address, and EIN of related organization F	(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	Sec 512(b) controlled e
ADEANCAC :						Yes No
11224 EXECUTIVE CENTER DRIVE 11711E ROCK, AR 72211, AR 72211	CHARITABLE	AR	501 (C) (3)	7	ARKANSAS REALTORS ASSOCIATION	X NO
(2)	·					
(3)	7					
(4)				1		
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	or Form 990.		TEEA5001L 12/28/12		Schedule	Schedule R (Form 990) 2012

Schedule R (Form 990) 2012 ARKANSAS REALTORS ASSOCIATION

23-7000743 P

Partiling 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.)

a Corporation or Trust (Continuated as a corporal (Controlling country) a Corporation or Trust (Controlling country) a Country) a Corporation or Trust (Controlling country)	ions Taxable as a Corporation or Trust (C related organizations treated as a corporal (b) (c) (d) Direct (state or foreign country) entity
(c) (d) Type of entity Share of controlling (C corp. S corp., total income country) entity or trust)	(b) (d) (d) (e) Shirmary activity (state or foreign controlling (C corp., S corp., total country) entity or trust)
a Corporation or Trust (Comple as a corporation or (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	as a Corporation or Trust (Colizations treated as a corporation (c) Legal domicile (state or foreign country) entity
a Corporation of treated as (c) Legal domicile (state or foreign country)	related organizations treated as (b) (c) Frimary activity (state or foreign country)
	ions Taxable as related organiza (b) Primary activity

Page 3

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			Yes	Ş.
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?	sted 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 p	×
c Giff, grant, or capital contribution from related organization(s)			1c	×
			19	×
e I oans or Joan guarantees hy related organization(s)			4	: >
				C TO
f Dividends from related organization(s)			1.	>
			= -	< :
g Sale of assets to related organization(s)		: .	19	×
h Purchase of assets from related organization(s)			1h	×
i Exchange of assets with related organization(s)	:	:		×
j Lease of facilities, equipment, or other assets to related organization(s)	:		- 1	×
k Lease of facilities, equipment, or other assets from related organization(s)	: : : : : : : : : : : : : : : : : : : :	:	- X	×
ted			= ×	
m Performance of services or membership or fundraising solicitations by related organization(s)	:		E	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			- L	×
o Sharing of paid employees with related organization(s)	:	:	10	×
			10	
p Reimbursement paid to related organization(s) for expenses	:	:	1	×
q Reimbursement paid by related organization(s) for expenses			10	×
r Other transfer of cash or property to related organization(s)			1.	×
s Other transfer of cash or property from related organization(s)	: : : : : : : : : : : : : : : : : : : :		15	×
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	ed relationships and tran	saction thresholds		
3	3	(3)	6	1
Name of other organization	Transaction type (a-s)	Amount involved	Method of determining amount involved	guiu
(1)				
(2)				
(f)				
(4)]
(5)				
(9)				
BAA TEEA50031 12/28/12		Schedule	le R (Form 990) 2012	212

Page 4

ARKANSAS REALTORS ASSOCIATION

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Name address, and EIN of entity Primary activity Legal	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e)	1	(f) Share of	(g) Share of	(h) Dispropo	Code V-UBI		al or Pe	(k) Percentage
		(state or foreign country)		section 501(c)(3) organizations?		total income	end-of-year assets	tionate allocations?	(1)	managing partner?	ar?	wnership
	-		from tax under section 512-514)	Yes	2			Yes No	Form (1065)	Yes	S.	
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Schedule R	(Form 990) 2012	Page 5
·	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	
		
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(Rev January 2013)

Application for Extension of Time To File an **Exempt Organization Return**

OMB No 1545-1709

Department of the Treasury Internal Revenue Service File a separate application for each return. • If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box X If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extention on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print ARKANSAS REALTORS ASSOCIATION 23-7000743 Number, street, and room or suite number. If a P.O. box, see instructions Social security number (SSN) File by the due date for 11224 EXECUTIVE CENTER DRIVE filing your return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions LITTLE ROCK, AR 72211 Enter the Return code for the return that this application is for (file a separate application for each return). 01 **Application** Application Is For Return Return Is For Code Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) Form 4720 03 09 Form 990-PF 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 The books are in the care of BARBARA M. BASS Telephone No. ► <u>501-225-2020</u> FAX No. ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, ▶ . If it is for part of the group, check this box and attach a list with the names and EINs of all members check this box ... the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time __, 20 13 _, to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 12 or ____, 20 ___, and ending tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason | Initial return Final return

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.

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions

payments made Include any prior year overpayment allowed as a credit

Change in accounting period

nonrefundable credits. See instructions.

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