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DLN: 93493319093683

OMB No 1545-0047

Form 990

Department of the Treasury

Return of Organization Exempt From Income Tax

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

	venue Service	The organization may have to use a copy of this return to satisfy st		requirements	Inspection			
B Check Addre	k if applicable ess change e change	c Name of organization NATIONAL ASSOCIATION OF REALTORS Doing Business As	D Employer identification number 36-1520690					
Initial Termi	ınated	Number and street (or P O box if mail is not delivered to street address) Room/suit 430 N Michigan Ave	e	E Telephone number (312) 329-8200				
	nded return cation pending	City or town, state or country, and ZIP + 4 Chicago, IL 60611			ts \$ 263,230,298			
T Tay-	exempt status	F Name and address of principal officer DALE STINTON CEO 430 N Michigan Ave Chicago,IL 60611		es? affiliates ind	rn for			
_	·	W REALTOR ORG	H(c) Group	exemption i	number ►			
K Form (of organization	✓ Corporation Trust Association Other ►	L Year of form	nation 1908	M State of legal domicile IL			
	THENAT	scribe the organization's mission or most significant activities TONAL ASSOCIATION OF REALTORS (NAR) PROVIDES A FACILIT GE OF INFORMATION AMONG ITS MEMBERS AND THE PUBLIC IN OPERTY						
2	2 Check th	ıs box ▶ If the organization discontinued its operations or disposed of	f more than 25	% of its net	assets			
Activities &	3 Number	of voting members of the governing body (Part VI, line 1a)		3	857			
		of independent voting members of the governing body (Part VI, line 1b)			_			
<u> </u>		nber of individuals employed in calendar year 2012 (Part V, line 2a) .			-			
`		nber of volunteers (estimate if necessary)		. 6				
		elated business revenue from Part VIII, column (C), line 12		. 7a				
	b Net unre	ated business taxable income from Form 990-T, line 34		. 7t	, ,			
			Prior	Year	Current Year			

	DI	vet unrelated pusifiess taxable income nom Form 990-1, fine 34	· · · · /D	2,293,930
_			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	0	0
Revenue	9	Program service revenue (Part VIII, line 2g)	139,900,617	171,789,472
9	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,840,962	6,098,026
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10,323,662	13,680,712
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	157,065,241	191,568,210
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	285,000	688,500
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines $5-10$)	50,781,222	54,076,041
<u>₹</u>	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25) •		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	119,875,980	133,731,659
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	170,942,202	188,496,200
	19	Revenue less expenses Subtract line 18 from line 12	-13,876,961	3,072,010
Not Assets or Fund Balances			Beginning of Current Year	End of Year
8,48	20	Total assets (Part X, line 16)	258,251,232	284,680,727
A P	21	Total liabilities (Part X, line 26)	88,153,797	103,269,437
žÏ	22	Net assets or fund balances Subtract line 21 from line 20	170,097,435	181,411,290

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

	I.	*****			2013-10-31						
Sign		Signature of officer		Date							
Here	k	DALE STINTON CEO									
		Type or print name and title									
Paid		Print/Type preparer's name Nicole Bencik	Preparer's signature	Date	Check if PTIN P00756915						
Prepare	r	Firm's name F CROWE HORWAT	H LLP		Firm's EIN ►						
Use Onl		Firm's address > 70 West Madison Suite 700 Chicago, IL 6060		Phone no (312) 899-7000							
May the IR	S d	iscuss this return with the prepar	er shown above? (see instructio	ns)							

Part IV	Che	rklist	of Re	auired	Sche	dules
4:11.7.4	CHE	CRIISL	OI NO	uuncu	SCHE	uuics

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
4	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? <i>If</i> "Yes," complete Schedule C, Part II	4		Νο
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
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	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	Yes	
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^7$ If "Yes," complete Schedule G, Part I (see instructions)	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		N o
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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? <i>If</i> "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, 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		No
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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
_		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

91	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 333		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
3	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
1	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
1	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	Yes	
ı	If "Yes," enter the name of the foreign country ▶BD			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
l	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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?	6a		No
)	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).		1	
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	\ <u></u>		
	Thes, indicate the number of forms 5252 filed during the year	-		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
l	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	1		
1	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	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			
	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 Enter the amount of reserves on hand	-		
	Enter the amount of reserves on hand	 ,		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule 0	14h	1	

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

Check if Schedule O contains a response to any question in this Part VI .															ে
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Se	ection 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	857			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	850			
2	Did any officer, director, trustee, or key employee have a family relationship or a business re other officer, director, trustee, or key employee?		2	Yes	
3		under the direct	3		No
4	Did the organization make any significant changes to its governing documents since the prior filed?	·	4		No
5	Did the organization become aware during the year of a significant diversion of the organization	tion's assets?	5		No
6	Did the organization have members or stockholders?		6		No
	Did the organization have members, stockholders, or other persons who had the power to ele		7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) me or persons other than the governing body?	embers, stockholders,	7b		No
8	Did the organization contemporaneously document the meetings held or written actions under year by the following	•			
а	The governing body?		8a	Yes	
b			8b	Yes	
_	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who can	-		105	
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Νo
Se	ection B. Policies (This Section B requests information about policies not require		evenu	ıe Cod	e.)
Se			evenu	ue Cod Yes	e.) No
			evenu 10a		
10a	ection B. Policies (This Section B requests information about policies not require	ed by the Internal Ro		Yes	
10a b	Did the organization have local chapters, branches, or affiliates?	ed by the Internal Ro 	10a	Yes Yes	
10a b 11a	Did the organization have local chapters, branches, or affiliates?	ed by the Internal Records the Control of Such chapters, empt purposes?	10a 10b	Yes Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	ed by the Internal Ro	10a 10b	Yes Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	ed by the Internal Research	10a 10b 11a	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	ed by the Internal Reserved by the Internal Re	10a 10b 11a 12a	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	ed by the Internal Reserved by the Internal Re	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	ed by the Internal Research to the such chapters, empt purposes? Training body before filing The such chapters in	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	ed by the Internal Research of such chapters, empt purposes? rning body before filing 0	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exemples and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exemples are consistent with the organization's exemples are consistent with the organization of the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 bid the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually intererise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policin Schedule O how this was done. Did the organization have a written whistleblower policy? 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 independent persons, comparability data, and contemporaneous substantiation of the delibe	ed by the Internal Research to the following body before filing to the following between the following body before the following by the following by the following by the following body by the following by	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	ed by the Internal Research to the such chapters, empt purposes? Training body before filing Training body body body body body body body body	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	ed by the Internal Research to the such chapters, empt purposes? Training body before filing Training body body body body body body body body	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	ed by the Internal Research of such chapters, empt purposes? Training body before filing O	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exect Has the organization provided a complete copy of this Form 990 to all members of its govern the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 bid the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually intererise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policin Schedule O how this was done. Did the organization have a written whistleblower policy? 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 independent persons, comparability data, and contemporaneous substantiation of the delibe The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar.	ed by the Internal Research of such chapters, empt purposes? Ining body before filing In the such could give In th	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No No

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Vpon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►JOHN PIERPOINT 430 N MICHIGAN AVE Chicago, IL (312) 329-8200

Form	990	(2012)
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

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

	1	T								
(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and	han o	one l both ector	box, an o	officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	` MÍSC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

ROBINSON & COLE LLP ONE BOSTON PLACE BOSTON MA 02108

\$100,000 of compensation from the organization 125

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

(A) Name and Title		(B) A verage hours per week (list any hours	more t	tion (han d n is l	ne l both	box, an d	heck unless officer stee)	i	(E Repor comper from organiza	table sation the tion (W-	(E) Reportable compensation from related organizations (W	- '	(F) Estima mount of compens from t	other ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed l
												-		
												-		
1b	Sub-Total				•			•				-		
Q C	Total from continuation sheet Total (add lines 1b and 1c).	-			•	•	•	•		7,361,268		0		374,223
	Total number of individuals (in							e)w	l ho receive		<u>l</u>	<u> </u>		37 1,223
_	\$100,000 of reportable compe	_					a abov	c,		4 111012 (11				
													Yes	No No
3	Did the organization list any fc	ormer officer, dir	ector o	r trus	tee,	key	emplo	yee,	, or highes	t compen	sated employee			
	on line 1a? If "Yes," complete S	Schedule J for suc	ch indivi	dual	•	•		•			[3		No
4	For any individual listed on line organization and related organ													
	individual				•	•		•				4	Yes	
5	Did any person listed on line 1			-					_	anızatıon	or individual for			
	services rendered to the organ	nization? <i>If "Ye</i> s	," compi	ete S	cnea	uie J	forsu	cn pe	erson .		[5		No_
Se	ection B. Independent Co	ntractors												
1	Complete this table for your fiv	/e highest comp											tav uca::	
	compensation from the organiz	(A)	-	ation	ior	riie c	.arenda	ar ye	ar enaing	WILII OF WI	(B)	on's	tax year (C)
THE N	N 10ST ORGANIZATION 25 ENTERPRISE S	ame and business									cription of services IARKETING & BRANDIN	JG H	Compen 34	sation ,804,757
	ET SMART COMMUNICATIONS LLC 845										DIRECT MAILINGS SE	-		,400,707
	AMSGERARD PRODUCTIONS 420 N WA										NNING AND	\dashv		,370,382
	TO 2000 DANIEL TOLAND DRIVE CHARLE		JU11							MANAGEME		4		240,220

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

1,200,391

LEGAL SERVICES

<u> </u>								Page 9
Part V	<u> </u>	Statement o Check if Schedi	o f Revenue ule O contains a respor	nse to any question	in this Part VIII .			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
gγ	1a	Federated campaigns 1a						
ant	ь	Membership dues 1b						
Contributions, Giffs, Grants and Other Similar Amounts	С	Fundraising eve	ents 1c					
	d	Related organiz	zations 1d					
	e	Government grant						
		_						
	f	similar amounts no	ons, gifts, grants, and 1f ot included above					
	g	Noncash contribution 1a-1f \$	ons included in lines					
ng p	h	Total. Add lines	s 1a-1f		o			
				Business Code				
TI e	2a	MEMBER DUES		900099	156,729,803	156,729,803		
e ve	b	CONVENTIONS	-	900099	7,917,345	7,917,345		
ው ሚ	c	ADVERTISING & SUBSCRIPTIONS		541800	4,392,641	429,749	3,962,892	
Program Serwce Revenue	d			900099	1,695,661	1,695,661	3,302,032	
3g	e	PUBLICATIONS & S		900099	717,293	717,293		
<u>5</u>	f		am service revenue	300033	336,729	336,729	0	0
્રે					,	330,723		
	g 3		s 2a – 2f		171,789,472			
			ome (including dividendar amounts)		3,998,292		1,106,802	2,891,490
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨	0			
	5	Royalties			6,244,419			6,244,419
	6-	Cross rents	(ı) Real 7,517,880	(II) Personal				
	6a b	Gross rents Less rental	3,245,314					
	c	expenses Rental income	4,272,566	0				
		or (loss)			4 272 566		1 005 700	2 176 777
	d	Net rental inco	me or (loss) (i) Securities	(II) O ther	4,272,566		1,095,789	3,176,777
	7a	Gross amount from sales of assets other than inventory	70,516,508	(II) O tilel				
	ь	Less cost or other basis and sales expenses	68,416,773					
	С	Gain or (loss)	2,099,735	0				
	d	Net gain or (los	ss)	 	2,099,734			2,099,734
ıne	8a	Gross income f events (not inc \$	luding					
Other Revenue		of contributions See Part IV, lin	s reported on line 1c) ne 18 a					
her	ь	Less direct ex	penses b					
δ	c		(loss) from fundraising (events 🛌	0			
	9a		rom gaming activities ne 19 a					
	ь	Less direct ex	penses b					
	C		(loss) from gamıng actı [.] 	vities	0			
	10a	Gross sales of returns and allo						
	b	Less cost of goods sold b						
	С		(loss) from sales of inve		0			
	11-	Miscellaneous		Business Code 900003	1,900,000		1,900,000	
	l .	ECOMMERCE	-	533110	277,774		277,774	
	b	INCOME FROM ENTITIES	M CONTROLLED	333110	211,114		2/1,//4	
	С	LIST RENTAL		533110	120,215		120,215	
	d	All other reven	ue		865,738	598,440	267,298	0
	е	Total. Add lines	s 11a-11d	🕨	3,163,727			
	12	Total revenue.	See Instructions	▶	191,568,210	168,425,020	8,730,770	14,412,420
	1				131,300,210	100,423,020		Form 990 (2012)

	IX Statement of Functional Expenses				
ectio	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	The state of the s			
	Check if Schedule O contains a response to any question in this Pa	rt IX			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	688,500			
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	5,104,806			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	38,106,690			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	2,947,008			
9	Other employee benefits	5,307,776			
LO	Payroll taxes	2,609,761			
1	Fees for services (non-employees)				
а	Management				
b	Legal	656,160			
c	Accounting	334,274			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	150,996			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	17,295,031			
.2	Advertising and promotion	39,956,399			
	Office expenses	10,548,359			
<i>3</i> 4	Information technology	10,785,841			
5	Royalties	10,763,641			
		475.445			
6 -	Occupancy	475,445			
.7 .8	Payments of travel or entertainment expenses for any federal, state, or local public officials	9,057,374			
.9	Conferences, conventions, and meetings	7,823,384			
20	Interest	334,202			
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	11,901,457			
3	Insurance	2,286,960			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	PUBLIC POLICY EXPENSES	13,364,908			
b	TAXES	3,662,256			
c	MAINTENANCE & REPAIRS	2,922,239			
d	GIFTS/AWARDS/FLOWERS	753,672			
e	All other expenses	1,422,702			
25	Total functional expenses. Add lines 1 through 24e	188,496,200	0	0	(
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 ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	't X	Balance Sheet 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		1	
	2	Savings and temporary cash investments	15,372,762	2	45,401,973
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	2,234,005	4	2,341,956
S	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		_	
	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		5	0
Se	l _			6	0
Assets	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	4 5 44 500	8	4 440 004
	9 10a	Prepaid expenses and deferred charges	4,541,536	9	4,418,631
	ь	Complete Part VI of Schedule D Less accumulated depreciation		10c	73,878,447
	11	Investments—publicly traded securities	100,352,005	11	89,368,818
	12	Investments—other securities See Part IV, line 11	2,311,598	12	5,501,637
	13	Investments—program-related See Part IV, line 11	47,667,353	13	56,614,817
	14	Intangible assets	4,936,160	14	4,171,070
	15	Other assets See Part IV, line 11	2,553,698	15	2,983,378
	16	Total assets. Add lines 1 through 15 (must equal line 34)	258,251,232	16	284,680,727
	17	Accounts payable and accrued expenses	36,122,313	17	50,778,917
	18	Grants payable		18	
	19	Deferred revenue	33,811,616	19	35,584,326
	20	Tax-exempt bond liabilities	15,000,000	20	15,000,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D	, ,	21	, ,
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
æ		persons Complete Part II of Schedule L		22	0
	23	Secured mortgages and notes payable to unrelated third parties	1,500,000	23	
	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	1,719,868	25	1,906,194
	26	Total liabilities. Add lines 17 through 25	88,153,797	26	103,269,437
ts or Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	170,097,435	27	181,411,290
	28	Temporarily restricted net assets		28	<u> </u>
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ┌ and			
		complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	170,097,435	33	181,411,290
	34	Total liabilities and net assets/fund balances	258,251,232	34	284,680,727

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1 191,568,2		568,210	
2	Total expenses (must equal Part IX, column (A), line 25)	2	2 188,496		196.200	
3	Revenue less expenses Subtract line 2 from line 1		3 3,072,0			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				
5	Net unrealized gains (losses) on investments			170,097,43		
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)	9		4,:	399,380	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))		181,411,290			
Par	t XII 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 Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				No	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revial separate basis, consolidated basis, or both	ewed o	n			
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate				
	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 the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c Yes			Yes		
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın				
3a	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?				No	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits					

ANDREA BUSHNELL DIRECTOR

Software ID: 12000266 **Software Version:** v2012.1.0

EIN: 36-1520690

Name: NATIONAL ASSOCIATION OF REALTORS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (E) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours more than one box, compensation compensation of other per unless person is both from the from related compensation week an officer and a organızatıon (Worganizations (Wfrom the (lıst director/trustee) 2/1099-MISC) 2/1099-MISC) organization and any related Former Individual to or director Office Highest compensated employee hours organızatıons Institutional for employee related organızatıons trustiee below Trustee dotted line) 20 00 GARY THOMAS 0 205,178 PRESIDENT-ELECT 20 00 MAURICE VEISSI 233,750 0 0 PRESIDENT 15 00 Χ 0 0 Х 154,020 IMMEDIATE PAST PRESIDENT 15 00 STEVEN BROWN Х 207,415 0 0 Х FIRST VICE PRESIDENT 15 00 WILLIAM ARMSTRONG Х Χ 168,807 0 0 TREASURER 1 00 A SCHWETHELM 0 0 0 DIRECTOR 1 00 AARON MEYERS 0 0 0 Χ DIRECTOR 1 00 ABBIE HIGASHI Χ 0 0 0 DIRECTOR 1 00 ADORNA CARROLL 0 0 0 Х DIRECTOR ADRIAN ARRIAGA 0 0 Х 0 DIRECTOR 1 00 ADRIENNE WAGNER Х 0 0 0 1 00 AL MANSELL Χ 0 0 0 DIRECTOR 1 00 ALAN LONG Χ 0 0 0 DIRECTOR 1 00 ALAN MEHRWEIN 0 Х 0 DIRECTOR 1 00 0 0 Χ 0 DIRECTOR 1 00 ALEASE BOWLES 0 0 0 Х DIRECTOR 1 00 ALEXANDRA JORGE-RIVERA 0 0 Х 0 DIRECTOR 1 00 ALISON COMBS Χ 0 0 0 DIRECTOR 1 00 ALLAN DECHERT Х 0 0 0 DIRECTOR 1 00 ALLYSON BERNARD 0 0 0 Χ DIRECTOR 1 00 0 0 0 Χ DIRECTOR AMANDA STONE Х 0 0 0 DIRECTOR 1 00 AMY DORSEY 0 0 0 Χ DIRECTOR 1 00 AMY WINKLHOFER Х 0 0 0 DIRECTOR

1 00

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the from related per compensation organization (Wan officer and a organizations (Wweek from the (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Individual to or director Highest compensated employee Institutional hours organizations TICE! for employee related organızatıons trustae below Trustee dotted line) 1 00 ANDREW BARBAR Χ 0 0 0 DIRECTOR 1 00 ANDREW MAHOWALD 0 0 Х 0 **DIRECTOR** 1 00 ANDREW SCHAUS 0 0 0 Х DIRECTOR 1 00 ANGIE KOPKA Х 0 0 0 DIRECTOR 1 00 ANJANETTE FRYE 0 0 0 Х DIRECTOR 1 00 ANN MCDONALD 0 0 0 Х DIRECTOR 1 00 ANN PETTIJOHN 0 0 0 Х DIRECTOR 1 00 ANN THROCKMORTON 0 0 0 DIRECTOR 1 00 ANNA DIMICELI Χ 0 0 DIRECTOR 1 00 ANNE GAULT 0 0 0 Х DIRECTOR 1 00 ANTHONY GODWIN Χ 0 0 0 DIRECTOR 1 00 ANTHONY MACALUSO 0 0 DIRECTOR 1 00 ANTHONY MAURER 0 0 0 Х DIRECTOR 1 00 ANTHONY SCHIPPA 0 Х 0 0 DIRECTOR 1 00 ARLENE DAVIS Х 0 0 0 DIRECTOR 1 00 ARNOLD TESH 0 0 0 Х DIRECTOR 1 00 ART DUEL 0 0 0 Х **DIRECTOR** 1 00 ART GODI Χ 0 0 0 **DIRECTOR** 1 00 AVIS WUKASCH Х 0 0 0 DIRECTOR 1 00 BARBARA KENNON 0 0 0 Х DIRECTOR 1 00 BARBARA LACH Х O 0 0 DIRECTOR 1 00 BARBARA LAYTON Х 0 0 0 DIRECTOR 1 00 BARRY LEHANE 0 0 0 Х DIRECTOR 1 00 BARRY RUTENBERG 0 0 Х 0 DIRECTOR 1 00 BARTON STEVENS 0 0 DIRECTOR

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the from related per compensation organization (Worganizations (Wan officer and a week from the (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual trustaa or director Institutional hours organizations TICE! for employee related organızatıons below Trustee dotted line) 1 00 BELTON JENNINGS Χ 0 0 0 DIRECTOR 1 00 BENJAMIN ANDERSON 0 0 0 Х **DIRECTOR** 1 00 BENJAMIN BLAIR 0 0 0 Х **DIRECTOR** 1 00 BERTON HAMAMOTO Х 0 0 0 DIRECTOR 1 00 BETH FOLEY 0 0 0 Х DIRECTOR 1 00 BETH HANSEN 0 0 0 Х DIRECTOR 1 00 BETH PEERCE 0 0 0 Х DIRECTOR 1 00 BETTE MCTAMNEY 0 0 0 DIRECTOR 1 00 BETTIE MEINEL Χ 0 0 DIRECTOR 1 00 BETTY KISSOCK 0 0 0 Х DIRECTOR 1 00 BILL BROWN Χ 0 0 0 DIRECTOR 1 00 BILL JONES 0 0 Χ DIRECTOR 1 00 BILL MARTIN 0 0 0 Х DIRECTOR 1 00 **BILL PLATTOS** 0 0 Χ 0 DIRECTOR 1 00 BLAINE WALKER Х 0 0 0 DIRECTOR 1 00 **BLANE JOHNSON** 0 0 0 Х DIRECTOR 1 00 BOB FLETCHER 0 0 0 Х DIRECTOR 1 00 BOB FLOSS Χ 0 0 0 **DIRECTOR** 1 00 **BOB HUDGENS** Х 0 0 0 DIRECTOR 1 00 BOB KIMBALL 0 0 0 Х DIRECTOR 1 00 **BOB SNOWDEN** Х O 0 0 DIRECTOR 1 00 **BOB TURNER** Х 0 0 0 DIRECTOR 1 00 BOBBI DECKER 0 0 0 Х DIRECTOR 1 00 BOBBIE NELSON 0 0 Х 0 DIRECTOR 1 00 BONNIE CASPER 0 0 DIRECTOR

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the from related per compensation organization (Worganizations (Wan officer and a week from the (lıst director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Individual to or director Highest compensated employee Institutional hours organizations 쥰 for employee related organızatıons trustee below Trustee dotted line) 1 00 CARLTON LEE MCCLELLAND Χ 0 0 0 DIRECTOR 1 00 CAROL FACCIPONTI 0 0 Х 0 **DIRECTOR** 1 00 CAROL GRIFFITH 0 0 0 Х DIRECTOR 1 00 CAROL HILL Х 0 0 0 DIRECTOR 1 00 CAROL LOTT 0 0 0 Х DIRECTOR 1 00 CAROL MANGAN 0 0 0 Х DIRECTOR 1 00 CAROL PRESUTTI 0 0 0 Х DIRECTOR 1 00 CAROLYN DOZOIS 0 0 0 DIRECTOR 1 00 CATHERINE WHATLEY Χ 0 0 DIRECTOR 1 00 **CATHY WERNER** 0 0 0 Х DIRECTOR 1 00 CHAILLE RALPH Χ 0 0 0 DIRECTOR 1 00 CHARLES BONFIGLIO 0 0 DIRECTOR 1 00 CHARLES KITCHEN 0 0 0 Х DIRECTOR 1 00 CHARLES MCMILLAN 0 Х 0 0 DIRECTOR 1 00 CHARLES OLSON Х 0 0 0 DIRECTOR 1 00 CHARLES OPPLER 0 0 0 Х DIRECTOR 1 00 CHARLES SHOOK 0 0 0 Х DIRECTOR 1 00 CHARLES SHOOK Χ 0 0 0 **DIRECTOR** 1 00 CHARLEY RAY Х 0 0 0 DIRECTOR 1 00 CHARLIE MURPHY 0 0 0 Х DIRECTOR 1 00 CHARLOTTE FISSETTE Х O 0 0 DIRECTOR 1 00 CHARLOTTE SEARS 0 0 0 DIRECTOR 1 00 CHERYL HAMM 0 0 0 Х DIRECTOR 1 00 CHERYL SMITH 0 0 Х 0 DIRECTOR 1 00 CHRIS CARRILLO 0 0 DIRECTOR

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the from related per compensation organization (Wan officer and a organizations (Wweek from the (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual 1 or director Institutional hours organizations 쥰 for employee related organızatıons trustae below Trustee dotted line) 1 00 STEPHANIE RALL Χ 0 0 0 DIRECTOR 1 00 STEPHANIE WALKER 0 0 Х 0 **DIRECTOR** 1 00 STEPHEN ANTONI 0 0 0 Х **DIRECTOR** 1 00 STEPHEN BABBITT Х 0 0 0 DIRECTOR 1 00 STEPHEN CASPER 0 0 0 Х DIRECTOR 1 00 STEPHEN HARDING 0 0 0 Х DIRECTOR 1 00 STEPHEN HOOVER 0 0 0 Х DIRECTOR 1 00 STEPHEN MCWILLIAM 0 0 0 DIRECTOR 1 00 STEPHEN MESZAROS Χ 0 0 DIRECTOR 1 00 0 0 0 Х DIRECTOR 1 00 STEVE CAWTHON Χ 0 0 0 DIRECTOR 1 00 STEVE FRANCKS 0 0 DIRECTOR 1 00 STEVE GODDARD 0 0 0 Х DIRECTOR 1 00 STEVE ROSCO 0 Х 0 0 DIRECTOR 1 00 STEVE WHITE Х 0 0 0 DIRECTOR 1 00 STEVEN ASHER 0 0 0 Х DIRECTOR 1 00 STEVEN BANKS 0 0 0 Х **DIRECTOR** 1 00 STEVEN FISCHER Χ 0 0 0 DIRECTOR 1 00 STEVEN MOREIRA Х 0 0 0 DIRECTOR 1 00 STUART ELSEA 0 0 0 Х DIRECTOR 1 00 SUE FLUCKE Х O 0 0 DIRECTOR 1 00 SUE STINSON-TURNER 0 0 0 DIRECTOR 1 00 SUMMER GREENE 0 0 0 Х DIRECTOR 1 00 SUSAN ARNOLD 0 0 Х 0 DIRECTOR 1 00 SUSAN GOLDY 0 0 DIRECTOR

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the from related per compensation organization (Wan officer and a organizations (Wweek from the (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual 1 or director Institutional hours organizations Ē for employee related organızatıons trustee below Trustee dotted line) 1 00 THOMAS STEVENS Χ 0 0 0 DIRECTOR 1 00 THOMAS WILLIAMS 0 0 Х 0 DIRECTOR 1 00 TIM HARRIS 0 0 0 Х **DIRECTOR** 1 00 TIMOTHY MCFADDEN Х 0 0 0 DIRECTOR 1 00 TINA HARRIS 0 0 0 Х DIRECTOR 1 00 TINA LUCAS 0 0 0 Х DIRECTOR 1 00 TINA LUCAS 0 0 0 Х DIRECTOR 1 00 TODD MENARD 0 0 0 DIRECTOR 1 00 TODD SHIPMAN Χ 0 0 DIRECTOR 1 00 TODD STONESIFER 0 0 0 Х DIRECTOR 1 00 TODD UMBENHAUER Χ 0 0 0 DIRECTOR 1 00 TOM FARLEY 0 0 Χ DIRECTOR 1 00 TOM GRANT 0 0 0 Х DIRECTOR 1 00 TOM RAU 0 Х 0 0 DIRECTOR 1 00 TONY CLARK Х 0 0 0 DIRECTOR 1 00 TRAVIS KESSLER 0 0 0 Х DIRECTOR 1 00 TREASURE FAIRCLOTH 0 0 0 Х DIRECTOR 1 00 TRISHA MCCARTHY Χ 0 0 0 DIRECTOR 1 00 TROY GATELEY Х 0 0 0 DIRECTOR 1 00 TRUDY MOORE 0 0 0 Х DIRECTOR 1 00 VICKI CARPENTER Х O 0 0 DIRECTOR 1 00 VICKI CLEMAN Х 0 0 0 DIRECTOR 1 00 VICKI COX GOLDER 0 0 0 Х DIRECTOR 1 00 VICKI FULLERTON 0 0 Х 0 DIRECTOR 1 00 VICTORIA DORAN 0 0 DIRECTOR

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the from related per compensation organization (Wan officer and a organizations (Wweek from the (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual 1 or director Institutional hours organizations 쥰 for employee related organızatıons trustee below Trustee dotted line) 1 00 VINCENT MALTA Χ 0 0 0 DIRECTOR 1 00 VINH NGUYEN 0 0 Х 0 **DIRECTOR** 1 00 VIRGINIA COOK 0 0 0 Х DIRECTOR 1 00 WALTER KETCHINGS Х 0 0 0 DIRECTOR 1 00 WALTER MC DONALD 0 0 0 Χ DIRECTOR 1 00 WATKINS WILD 0 0 0 Х DIRECTOR 1 00 WAYNE POPLIN 0 0 0 Х DIRECTOR 1 00 WAYNE STROMAN 0 0 0 DIRECTOR 1 00 WENDELL BULLARD Χ 0 0 DIRECTOR 1 00 WENDELL DAVIS 0 0 0 Х DIRECTOR 1 00 WENDY FURTH Χ 0 0 0 DIRECTOR 1 00 WES GRAHAM 0 0 DIRECTOR 1 00 WEST DE YOUNG 0 0 0 Х DIRECTOR 1 00 WILLIAM ARNOLD 0 Х 0 0 DIRECTOR 1 00 WILLIAM BOATMAN Х 0 0 0 DIRECTOR 1 00 WILLIAM CHEE 0 0 0 Х DIRECTOR 1 00 WILLIAM DERMODY 0 0 0 Х DIRECTOR 1 00 WILLIAM FULTON Χ 0 0 0 DIRECTOR 1 00 WILLIAM FURST Х 0 0 0 DIRECTOR 1 00 WILLIAM HANLEY 0 0 0 Х DIRECTOR 1 00 WILLIAM JONES Х O 0 0 DIRECTOR 1 00 WILLIAM LUCKS Х 0 0 0 DIRECTOR 1 00 WILLIAM MILLIKEN 0 0 0 Х DIRECTOR 1 00 WILLIAM MOORE 0 0 Х 0 DIRECTOR 1 00 WILLIAM NELSON 0 0 DIRECTOR

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Indeper	1	actors						I	1	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted		than pers office ctor/	o not n one son i er an /trust	e box is bot nd a stee)	c, oth	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
WILLIAM OVERACRE	line) 1 00	ά· X	Stee	_	_)Safed	_	0	0	0
DIRECTOR	1 00	<u> </u>	<u> </u>	<u> </u>	 	<u> </u>	<u></u> '			
WILLIAM POTEET DIRECTOR		х					'	0	0	0
WILLIAM WEIDACHER DIRECTOR	1 00	х						0	0	0
WINNIE DAVIS DIRECTOR	1 00	х						0	0	0
ZSOLT SZERENCSES DIRECTOR	1 00	х						0	0	0
DALE STINTON CEO	38 00			х				1,476,701	0	34,341
BOB GOLDBERG SVO MARKETING AND BUS DEV	38 00				х			641,893	0	34,341
DOUG HINDERER SVP HUMAN RESOURCES	38 00				x			416,462	0	34,341
FRANK SIBLEY SVP COMMUNICATIONS AND CONV	38 00				х			494,853	0	34,341
JOHN PIERPOINT VP OF FINANCE AND COMPTROLLER	38 00				x		<u> </u>	264,289	0	30,813
LAURENE JANIK SVP GENERAL COUNSEL	38 00				x			597,389	0	34,341
DALE ROSS DIRECTOR	38 00					х	<u> </u>	621,070	0	34,341
JERRY GIOVANIELLO SVP GOVT AFFAIRS	38 00					х		525,708	0	34,341
LAWRENCE YUN SVP CHIEF ECONOMIST	38 00					Х		428,549	0	34,341
MARK LESSWING SVP CHIEF TECH OFFICER	38 00					х		422,970	0	34,341
WALT WITEK SVP COMMUNITY & POL AFFAIRS	38 00					x		460,685	0	34,341

DLN: 93493319093683

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** NATIONAL ASSOCIATION OF REALTORS 36-1520690 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours 0 Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 4a Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? ☐ Yes 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter directly delivered to a 0 separate political organization If none, enter -0-(1) NAR FUND 430 N MICHIGAN 26-1725187 0 5,550,336 CHICAGO, IL 60611 (2) NAR CONGRESSIONAL FUND 1.609.776 430 N MICHIGAN 27-3388377 0 CHICAGO, IL 60611

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

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

_		(a)	(b)	
ror e activ	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	O ther 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)?				
Ь	If "Yes," enter the amount of any tax incurred under section 4912	•			
С	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?	1 1	l		

Part III-A 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		No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		No

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	1	156,/29,803
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).		
а	Current year	2a	35,884,187
b	Carryover from last year	2b	0
С	Total	2c	35,884,187
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	36,693,832
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	-809,645

Part IV 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 (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

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

DLN: 93493319093683

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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

Supplemental Financial Statements

Open to Public

	me of the organization TIONAL ASSOCIATION OF REALTORS	Employer identification number					
			36-1520690				
Pε	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		inds or Accounts. Complete if the				
	organization answered res to form 550	(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year						
2	Aggregate contributions to (during year)						
3	Aggregate grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	-	or advised Yes No				
6	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the beneficonferring impermissible private benefit?	_					
Pa	rt II Conservation Easements. Complete if	the organization answered "Yes" to	Form 990, Part IV, line 7.				
1 2	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Preservation of an Preservation of a c	historically important land area ertified historic structure ne form of a conservation				
_	easement on the last day of the tax year	_					
			Held at the End of the Year				
а	Total number of conservation easements		2a				
b	Total acreage restricted by conservation easements		2b				
C	Number of conservation easements on a certified histo	oric structure included in (a)	2c				
d	Number of conservation easements included in (c) acc historic structure listed in the National Register	quired after 8/17/06, and not on a	2d				
3	Number of conservation easements modified, transferr	red, released, extinguished, or terminate	d by the organization during				
	the tax year ▶						
4	Number of states where property subject to conservat	ion easement is located ►					
5	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	ling of violations, and Yes No				
6	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation easem	ents during the year				
	Amount of expenses incurred in monitoring, inspecting	a and enforcing conservation easements	during the year				
7	► \$	g, and emoterng conservation casements	during the year				
В	Does each conservation easement reported on line 2(a and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	tion 170(h)(4)(B)(i)				
9	In Part XIII, describe how the organization reports coil balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemed	e footnote to the organization's financial					
Pai	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures, o	or Other Similar Assets.				
1a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	l 16 (ASC 958), not to report in its reven ets held for public exhibition, education, o	or research in furtherance of public				
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ets held for public exhibition, education, o					
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$				
	(ii) Assets included in Form 990, Part X		► \$				
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS						
а	Revenues included in Form 990, Part VIII, line 1		► \$				
	•						

b Assets included in Form 990, Part X

Part	•••• Organizations Maintaining Co	<u>llections of Art</u>	t, His	<u>stori</u>	<u>cal Tı</u>	reasures, o	<u>r Othe</u>	<u>r Similar As</u>	sets (co	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other recor	ds, c	heck	any of	the following th	at are a	sıgnıfıcant use	of its	
а	Public exhibition		d	Γ	Loan	or exchange pi	rograms	i		
b	Scholarly research		e	Γ	Othe	r				
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ain ho	w the	y furthe	er the organiza	tion's ex	kempt purpose	ın	
5	During the year, did the organization solicit	or receive donations	sofa	rt, hıs	torical	treasures or o	thersin			
	assets to be sold to raise funds rather than t		•						┌ Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						ered "Y	es" to Form 9)90, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	ediary	y for c	ontribi	utions or other	assets	not	┌ Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follo	wing t	able					
								An	nount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1 f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 217	?					│ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expl	anatı	on has	been provided	ın Part i	XIII		Γ
Pa	rt V Endowment Funds. Complete									
		(a)Current year	(b)Prior	year	b (c)Two years	back (d)	Three years back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions						_			
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
_	and programs						+			
т	Administrative expenses						_			
g	End of year balance					())				
2	Provide the estimated percentage of the curi	ent year end balan	ce (III	ne 1g	, colum	in (a)) held as				
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment ►									
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c shows	uld equal 100%								
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	that	are hel	d and administ	ered for	the		
	organization by (i) unrelated organizations			_				3a(Yes	No
	(ii) related organizations							3a(
b	If "Yes" to 3a(II), are the related organization						٠	31		
4	Describe in Part XIII the intended uses of th	ie organization's en	down	nent f	unds					
Par	t VI Land, Buildings, and Equipme	nt. See Form 99	90, Pa							
	Description of property				Cost or			(c) Accumulated depreciation	(d) Bo	ook value
1a	Land					18,	,370,207		1	18,370,207
b	Buildings					46	,038,332	13,104,76	4 3	32,933,568
c	Leasehold improvements					40,	,847,582	29,773,08	6 1	1,074,496
d I	Equipment					63,	,475,214	52,935,54	2 1	10,539,672
							960,504			960,504
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part .	X, colu	umn (B), line	10(c).)		🛌	7	73,878,447

Investments—Other Securities. See		
(a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)	 	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Table (California (b) annot a surf Farm 2000 Bart V and (B) bart 200		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(A) TANKET DE ALTERE MET MET MET MET MET MET MET MET MET ME		
(1) INVST - REALTORS INFO NETWORK	7,869,220	С
(2) INVST - COUNCIL FOR SPECIALIZED REALTOR EDUCATION	16 272 655	С
	16,373,655	
(3) INVST - REALTORS RELIEF FDN	2,189,662	C
(4) INVST - SENTRILOCK, LLC	12,133,096	С
(5) INVST - SENTRILOCK FINANCE	1,056,830	С
(6) INVST - SECOND CENTURY VENTURES	9,255,807	С
(7) INVST - REAL PROPERTY RESOURCE	7,736,547	С
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	56,614,817	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip		(b) Book value
		(b) Book value
(a) Descrip	ption	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	otion	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	otion	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	.)	

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities 2b		
c	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)	_	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Part	Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
FIN 48 (ASC 740) footnote	Schedule D, Part X, Line 2	THE ASSOCIATION AND ITS CONSOLIDATED AND COMBINED ENTITIES FOLLOW GUIDANCE ISSUED BY THE FASB WITH RESPECT TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES A TAX POSITION IS RECOGNIZED AS A BENEFIT ONLY IF IT IS "MORE LIKELY THAN NOT" THAT THE TAX POSITION WOULD BE SUSTAINED IN A TAX EXAMINATION, WITH A TAX EXAMINATION BEING PRESUMED TO OCCUR THE AMOUNT RECOGNIZED IS THE LARGEST AMOUNT OF TAX BENEFIT THAT IS GREATER THAN 50% LIKELY OF BEING REALIZED ON EXAMINATION FOR TAX POSITIONS NOT MEETING THE "MORE LIKELY THAN NOT" TEST, NO TAX BENEFIT IS RECORDED THE ASSOCIATION RECOGNIZES INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST AND INCOME TAX EXPENSE, RESPECTIVELY THE ASSOCIATION HAS NO AMOUNTS ACCRUED FOR INTEREST OR PENALTIES AS OF DECEMBER 31, 2012 AND 2011

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"Yes" to Form 990, Part IV, line 14b.

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

DLN: 93493319093683

Internal Revenue Service Na

SCHEDULE F

Department of the Treasury

(Form 990)

Open to Public

Inspection

Name of the organization	Employer identification number
NATIONAL ASSOCIATION OF REALTORS	
	36-1520690
Part I General Information on Activities Outside the United States. Complet	e if the organization answered

For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award ✓ No

For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside

3	Activites per Region (The follow			<u> </u>	1	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0		ATTENDANCE AT THE EXPO REAL INTL PROPERTY TRADE FAIR TO SHARE INTL REAL ESTATE INFORMATION AND EXPERIENCES	42,700
	EAST ASIA AND THE PACIFIC	0	0		ATTENDANCE AT THE MLIT MEETINGS IN JAPAN TO SHARE REAL ESTATE EXPERIENCES AND INFORMTION	33,700
	EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0		ATTENDANCE AT THE FNAIM CONGRESS MEETING TO SUPPORT REAL ESTATE TRADE AND SHARE REAL ESTATE INFORMATION AND EXPERIENCES	27,900
	SOUTH AMERICA	0	0	PROGRAM SERVICES	ATTENDANCE AT THE COFCI BOARD MEETINGS IN SUPPORT OF INTERNATIONAL REAL ESTATE TRADE	27,300
	EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0		ATTENDANCE AT THE POLISH REAL ESTATE FEDERATION MEETING TO SUPPORT INTERNATIONAL REAL ESTATE TRADE KEYNOTE ADDRESS WAS GIVEN BY NAR TREASURER	15,100
	NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	PROGRAM SERVICES	ATTENDANCE AT THE CREA IN CANADA TO SHARE REAL ESTATE INFORMATION AND EXPERIENCES	14,800
	NORTH AMERICA (CANADA & MEXICO ONLY)	0	0		ATTENDANCE AT THE CREA ANNUAL MEETINGS BY NAR LEADERSHIP TO CONTINUE RELATIONSHIP BUILDING AND SHARING OF REAL ESTATE INFORMATION AND EXPERIENCES	13,100
	EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0		REPRESENTATION AT THE FIABCI WORLD CONGRESS MEETINGS TO SUPPORT INTERNATIONAL REAL ESTATE TRADE	12,000
	EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	I .	ATTENDANCE AT THE DANISH REAL ESTAE ASSN 100 ANNIVERSERY CELEBRATION IN SUPPORT OF INTERNATIONAL PROPERTY TRADE AND SHARING OF REAL ESTATE INFORMATION	11,200
	CENTRAL AMERICA AND THE CARIBBEAN	0	0		ATTENDANCE AT THE PAREB MEETINGS IN TAIWAN AS A RELATIONSHIP BUILDING INITIATIVE IN SUPPORT OF INTERNATIONAL RE TRADE AND SHARING OF INFORMATION	10,200
	CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS	PASSIVE INVESTMENTS	4,138,557
	NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	INVESTMENTS	PASSIVE INVESTMENTS	753,683
	Sub-total Total from continuation sheets to Part I					
	: Totals (add lines 3a and 3b)	0	C			5,100,240

Part I	Grants Part IV,	and Other As line 15, for any	sistance to Organ y recipient who rece	izations or Entiti Ived more than \$5,	es Outside the Ur 000. Part II can be	nited States. Comp duplicated if addition	olete if the organizational space is needed	tion answered "Yes' l.	' to Form 990,
	Name of anization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
_									
_									
_									
_									
_									
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2 Er ta	iter total nu x-exempt b	mber of recipie y the IRS, or fo	ent organizations list or which the grantee	ed above that are in or counsel has pro	recognized as charit ovided a section 501	ties by the foreign c 1(c)(3) equivalency	ountry, recognized letter	as 	
3 Er	nter total nu	mber of other	organizations or ent	cities					
								Schedule F	(Form 990) 2012

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

Part III can be duplicated if additional space is needed.

Fait III call be	t duplicated if addition	Jilai space is ii	eeueu.	1	I	T	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	-	-	-				ula E (Earma 000) 2012

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	굣	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	ত	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	⊽	Yes	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	<u> </u>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	V	Yes	Г	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	<u>~</u>	Νo

Schedule F (Form 990) 2012

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

as applicable. Also	confidere this part to provide any	additional information (see instructions).
I dentifier	ReturnReference	Explanation
Method used to account for expenditures on organization's financial statements	Schedule F, Part I, Line 3	CENTRAL AMERICA AND THE CARIBBEAN CASH EAST ASIA AND THE PACIFIC CASH EUROPE (INCLUDING ICELAND AND GREENLAND) CASH NORTH AMERICA (CANADA & MEXICO ONLY) CASH SOUTH AMERICA CASH
Method used to account for expenditures on organization's financial statements	Schedule F, Part I, Line 3	CENTRAL AMERICA AND THE CARIBBEAN CASH EAST ASIA AND THE PACIFIC CASH EUROPE (INCLUDING ICELAND AND GREENLAND) CASH NORTH AMERICA (CANADA & MEXICO ONLY) CASH SOUTH AMERICA CASH
		Schedule F (Form 990) 2012

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Schedule I (Form 990)

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

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

► Attach to Form 990

OMB No 1545-0047

2012

DLN: 93493319093683

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
NATIONAL ASSOCIATION OF REALTORS

Employer identification number

36-1520690

Does the organization mai the selection criteria used	I to award the grants	orassistance?	. .		for the grants or a	ssistance, and	
2 Describe in Part IV the or	<u> </u>				Complete if the	and an analysis	ad "Vac" to
				the United States. (). Part II can be duplic			ed "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) REALTORS RELIEF FOUNDATION 430 N MICHIGAN AVE CHICAGO,IL 60611	36-4468109	501(C)3	500,000	0 NA		NA	HOUSING RELIEF
(2) HABITAT FOR HUMANITY GREATER ORLANDO AREA 1925 TRAYLOR BLVD ORLANDO,FL 32804	59-2789167	501(C)3	50,000	O NA		NA	HOUSING ASSISTANCE
(3) NEWTON ROTARY SANDY SCHOOL FUND C/O NEWTON SAVINS BANK 39 MAIN STREET NEWTON, CT 06470			50,000	O NA		NA	COMMUNITY SUPPORT
(4) NEWTON YOUTH & FAM SERVICES 15 BERKSHIRE RD SANDY HOOK,CT 06482	06-1082115	501(C)3	50,000	O NA		NA	FAMILY/COMMUNITY SUPPORT
(5) NEIGHBORHOOD WORKS AMERICA 1325 G ST NW STE 800 WASHINGTON, DC 20005	52-1148078	501(C)3	25,000	0 NA		NA	HOUSING& COMMUNITY SUPPORT

Enter total number of other organizations listed in the line 1 table.

rt III	Grants and Other Assistance to Individuals in the United States	Complete if the organization answered "Yes" to Form 990, Page 1	art IV, line 22.
	Part III can be duplicated if additional space is needed.	·	

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

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
Procedures for monitoring use of grant funds		GRANTS ARE MADE TO ORGANIZATIONS TO SUPPORT THEIR VARIOUS EXEMPT ACTIVITIES ANY FUNDS DONATED FOR SPECIFIC PROJECTS ARE MONITORED ON AN AS NEEDED BASIS TO ENSURE THAT FUNDS ARE USED FOR THEIR INTENDED PURPOSE

Schedule I (Form 990) 2012

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DLN: 93493319093683

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer identification number Name of the organization NATIONAL ASSOCIATION OF REALTORS 36-1520690 Part T Questions Regarding Compensation

	Questions regarding compensation		Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the follo 990, Part VII, Section A, line 1a Complete Part III to provide any relev		103	110
	▼ First-class or charter travel	wance or residence for personal use		
	▼ Travel for companions ▼ Payments for companions	r business use of personal residence		
	▼ Tax idemnification and gross-up payments ▼ Health or so	cial club dues or initiation fees		
	☐ Discretionary spending account ☐ Personal se	rvices (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a w reimbursement or provision of all of the expenses described above? If "N		Yes	
2	Did the organization require substantiation prior to reimbursing or allowing directors, trustees, and the CEO/Executive Director, regarding the items	- · · · · · · · · · · · · · · · · · · ·	Yes	
3	Indicate which, if any, of the following the filing organization used to esta organization's CEO/Executive Director Check all that apply Do not che used by a related organization to establish compensation of the CEO/Ex	ck any boxes for methods		
	▼ Compensation committee	loyment contract		
	✓ Independent compensation consultant ✓ Compensation	on survey or study		
	Form 990 of other organizations Approval by	the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, or a related organization	ine 1a with respect to the filing organization		
а	Receive a severance payment or change-of-control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?			
c	Participate in, or receive payment from, an equity-based compensation a	rrangement? 4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9	ı.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the orga compensation contingent on the revenues of	nization pay or accrue any		
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the orga compensation contingent on the net earnings of	nization pay or accrue any		
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the orga payments not described in lines 5 and 6? If "Yes," describe in Part III	nization provide any non-fixed 7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursus subject to the initial contract exception described in Regulations section in Part III			
9	If "Yes" to line 8, did the organization also follow the rebuttable presump			
-	section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MI:	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Also complete this part for any addit	Total Información	
Identifier	Return Reference	Explanation
First-class or charter travel	Schedule J, Part I, Line 1a	INTERESTED PERSONS LISTED ON PART VII, SECTION A, LINE 1A HAVE RECEIVED OR HAVE THE OPTION TO RECEIVE THE BENEFITS IDENTIFIED ON SCHEDULE J, PART I, LINE 1A THESE BENEFITS INCLUDE COMPANION TRAVEL AND TAX INDEMNIFICATION AND GROSS UP PAYMENTS FOR SOME, BENEFITS ALSO INCLUDE FIRST-CLASS AIR TRAVEL, AS WELL AS PAYMENTS FOR HEALTH AND SOCIAL CLUB DUES AS A NATIONAL ASSOCIATION SERVING MORE THAN 1,000,000 MEMBERS, NAR REQUIRES EXTENSIVE TRAVEL FOR INDIVIDUALS HOLDING THE RESPONSIBILITY OF AN OFFICER OF THE BOARD OF DIRECTORS OR A SENIOR VICE PRESIDENT (SVP) THIS TRAVEL REQUIREMENT RANGES FROM 2 TO 6 TRIPS A MONTH AND, IN SOME CASES, IN EXCESS OF 200 DAYS A YEAR PER OFFICER OR SVP NAR REVIEWS ALL BENEFITS PROVIDED TO INTERESTED PERSONS, AND WHERE APPROPRIATE, ADDITIONAL TAXABLE COMPENSATION IS IMPUTED
Travel for companions	Schedule J, Part I, Line 1a	SEE NARRATIVE ABOVE
Tax indemnification and gross-up payments	Schedule J, Part I, Line 1a	SEE NARRATIVE ABOVE
Payments for business use of personal residence	Schedule J, Part I, Line 1a	SEE NARRATIVE ABOVE
Health or social club dues or initiation fees	Schedule J, Part I, Line 1a	SEE NARRATIVE ABOVE
Personal services	Schedule J, Part I, Line 1a	DURING 2012, NAR PAID FOR TAX SERVICES RELATED TO THE PREPARATION OF THE CEO'S PERSONAL INCOME TAX RETURN NAR ALSO PAID FOR TAX OR LEGAL SERVICES FOR CERTAIN SENIOR VICE PRESIDENTS OF THE ORGANIZATION THE RELATED BENEFITS WERE TREATED AS TAXABLE COMPENSATION TO THE RECIPIENTS

Schedule J (Form 990) 2012

Software ID: 12000266
Software Version: v2012.1.0

EIN: 36-1520690

Name: NATIONAL ASSOCIATION OF REALTORS

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees											
(A) Name	ļ	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation reported in prior Form			
		(i) Base Compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other compensation	Compensation	Dellents	(B)(ı)-(D)	990 or Form 990-EZ			
DALE ROSS	(I) (II)	357,526	250,000	13,544 0	25,000	9,341 0	655,411	0			
MAURICE VEISSI	(ı) (ıı)		0	0	0	0	233,750	0			
GARY THOMAS	(1) (11)		0	0	0	0	205,178	0 0			
STEVEN BROWN	(ı) (ıı)		0	0	0	0	207,415	0			
WILLIAM ARMSTRONG	(I) (II)		0	0	0	0	168,807	0			
RONALD PHIPPS	(1) (11)		0	0	0	0	154,020	0			
DALE STINTON	(1) (11)	1,471,157	0	5,544 0	25,000	9,341	1,511,042	0 0			
JOHN PIERPOINT	(1) (11)		46,712	2,853	21,472	9,341	295,102	0 0			
BOB GOLDBERG	(I) (II)	466,455	161,426	14,012	25,000	9,341	676,234	0 0			
DOUG HINDERER	(ı) (ıı)	321,589	80,861	14,012	25,000	9,341	450,803	0 0			
LAURENE JANIK	(ı) (ıı)	449,311	134,066	14,012	25,000	9,341	631,730	0			
FRANK SIBLEY	(ı) (ıı)		92,301	19,068	25,000	9,341	529,194	0			
MARK LESSWING	(ı) (ıı)		64,025	13,403	25,000	9,341	457,311	0			
JERRY GIOVANIELLO	(ı) (ıı)		114,055	23,180	25,000	9,341	560,049	0			
WALT WITEK	(ı) (ıı)	355,650	91,044	13,991	25,000	9,341	495,026	0 0			
LAWRENCE YUN	(ı) (ıı)	344,719	70,595	13,235	25,000	9,341	462,890	0 0			

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

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

► See separate instructions.

DLN: 93493319093683 OMB No 1545-0047

Open to Public **Inspection**

Internal Revenue Service

Department of the Treasury

(Form 990)

	ne of the organization									Emp	oloyer id	lentifica	ation num	ber		
NAT	TIONAL ASSOCIATION OF REA	ALTORS								36-	-15206	90				
P	art I Bond Issues															
<u> </u>	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f	f) Descriptio	n of purpose	(g) De	(g) Defeased be		nenalitor i ''		Pool ncing	
										Yes			No	Yes	No	
A	DISTRICT OF COLUMBIA REVENUE BONDS	00000000	254839G98	12-23-2003	15,00			BUILD A WAS DFFICE		x		x		х		
Pa	Proceeds					-				•	•	·				
 						١		В	<u> </u>		С			D		
1_	A mount of bonds retired						0									
2	A mount of bonds legally defea	ased —————					0									
3	Total proceeds of issue				:	15,000,	_									
4	Gross proceeds in reserve fun					1,500,	000									
5	Capitalized interest from proc					0										
6	Proceeds in refunding escrows						0									
7	Issuance costs from proceeds	s				375,000										
8	Credit enhancement from proc	ceeds					0									
9	Working capital expenditures	from proceeds					0									
10	Capital expenditures from pro	ceeds			13,125,000											
11	O ther spent proceeds				0											
12	Other unspent proceeds						0									
13	Year of substantial completion	n			20	04			•							
					Yes	No		Yes	No	Yes	N	lo	Yes		No	
14	Were the bonds issued as part of a current refunding issue?					Χ										
15	Were the bonds issued as part	t of an advance refur	nding issue?			Х										
16	6 Has the final allocation of proceeds been made?				Х											
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?															
Pa	rt IIII Private Business U	Jse														
								В		Ç			D			
1					Yes	No		Yes	No	Yes	N	lo	Yes	+	No	
1	Was the organization a partne property financed by tax-exen		ra member of an LL	.C, wnich owned		X										

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

financed property?

Sche	dule K (Form 990) 2012									Page 2	
Par	Private Business Use (Continued)										
				A		В		c		D	
	A bl	L	Yes	No	Yes	No	Yes	No	Yes	No	
3a	Are there any management or service contracts that may result in private of bond-financed property?			Х							
If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?				×							
c Are there any research agreements that may result in private business use of bond-financed property?				×							
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper			×							
4	Enter the percentage of financed property used in a private business use be other than a section $501(c)(3)$ organization or a state or local government			0 0000%		%		%		%	
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anothe (c)(3) organization, or a state or local government		0 0000%		%		%	%			
6	Total of lines 4 and 5			0 0000%		%		%		%	
7	Does the bond issue meet the private security or payment test?		Х								
8a	Has there been a sale or disposition of any of the bond financed property to nongovernmental person other than a 501(c)(3) organization since the bor issued?			х							
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or		0 0000%		%		%		%		
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections		х							
9				х							
Par	t IV Arbitrage					<u> </u>		I	<u> </u>	!	
		A			В		С		D		
		Yes	No	Yes	No	Ye	5	No	Yes	No	
1	Has the issuer filed Form 8038-T?		Χ								
2	If "No" to line 1, did the following apply?						<u> </u>	· · · · · · · · · · · · · · · · · · ·			
а	Rebate not due yet?		X								
b	Exception to rebate?		Х								
С	No rebate due?	X									
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed			•				I	Į.		
3	Is the bond issue a variable rate issue?	Х									
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х								
b	Name of provider										
С	Term of hedge		0 0							<u> </u>	
d	Was the hedge superintegrated?		Х								
е	Was a hedge terminated?		Х								

Revenue Bonds No Rebate Due

Pai	rt IV Arbitrage (Continued	1)								,		
	-	•		1	В		С		D			
			Yes	No	Yes	No	Yes	No	Yes	No		
5a	Were gross proceeds invested contract (GIC)?	ın a guaranteed ınvestment		Х								
b	Name of provider											
С	Term of GIC			0 0								
d	d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?			Х								
6	Were any gross proceeds inves period?	ted beyond an available temporary		X								
7	Has the organization established the requirements of section 14	ed written procedures to monitor 8?	X									
Pa	rt V Procedures To Und	ertake Corrective Action										
			#	1	В		С		D			
			Yes	No	Yes	No	Yes	No	Yes	No		
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?											
Pž	art VI Supplemental Inf	formation. Complete this part to	<u>provide additio</u>	nal information	on for respor	ises to ques	tions on Sch	edule K (see	: instructions)		
	Identifier	Return Reference	Explanation									
ISSUER NAME District of Columbia Schedule K, Part IV, Line 2c Ti			THE CALCULATION FOR COMPUTING NO REBATE DUE WAS PERFORMED ON 2/28/09									

Schedule K (Form 990) 2012

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DLN: 93493319093683

Employer identification number

Schedule L

Department of the Treasury

Internal Revenue Service

Total

(Form 990 or 990-EZ)

Name of the organization

Transactions with Interested Persons ► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,

or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. OMB No 1545-0047

2012

Open to Public Inspection

NATIONAL ASSOCIATION	ON OF REALTORS												
							36	-1520	0690				
	s Benefit Tran	•					•						
	e if the organizati									<i>J</i> , line 4	0 b		
1 (a) Name o								tion of transaction			(d) Corrected?		
			person an	d organizatio	n					<u></u>	es	No	
										-+			
										-+			
2 Enter the amo	ount of tax incurre	d by organiza	ition mana	igers or disqu	•	ons during the	,	nders	section ► ⊄				
								•	гэ. Въ. т				
3 Enter the amo	ount of tax, if any,	on line 2, and	ove, reimb	oursea by the	organizatioi	п		•	F \$				
Part III Loar	s to and/or F	rom Inter	ested Po	ersons.									
	lete if the organiz				EZ, Part V,	line 38a, or Foi	rm 990	o, Par	t IV , lın	e 26, or	rıfthe		
·	ızatıon reported a				•	•		•	,	,			
(a) Name of	(b) Relationship	(c) Purpose	Purpose (d) Loan to (e			l (f) Balance	nce (g) In		(h		(i)Wri		
ınterested	with organization	of loan	or from		principal	due	e default?		Appro		agree	ment?	
person			organizat	ion?	amount				by boa				
				From	-		\		commi	1	Ves	T	
	1		I To	I From	1	1	Vac	l No	Voc	l No	I VAC	l No	

Grants or Assistance Benefitting Interested Persons. Part III

Complete if the organization answered "Yes" on Form 990, Part IV, line 27,

\$

oompiete ii ti	ie organización anomerca	100 011101111 330/1410	. 1 1 / 11110 2 / 1	
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of assistance	(d) Type of assistance	(e) Purpose of assistance
			•	

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.					
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) GREG STINTON	FAMILY MEMBER- D STINTON	65,186	NAR EMPLOYEE		No

Part V Supplemental Information

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

Identifier	Return Reference	Explanation

Schedule L (Form 990 or 990-EZ) 2012

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DLN: 93493319093683

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2012

Open to Public Inspection

Name of the organization
National Association of Realtors

Employer identification number
36-1520690

Identifier	Return Reference	Explanation
New program services	Form 990, Part III, Line 2	THE NATIONAL ASSOCIATION OF REALTORS (NAR) HAS FUNDED AN INITIATIVE THAT HAS BEEN DUBBED "MY REALTOR® PARTY" THE INITIATIVE BUILDS ON NAR'S POPULAR REALTOR® PARTY MONIKER, WHICH EMPHASIZES THE BIPARTISAN NATURE OF REALTOR® POLICY AGENDA, AND IS FUNDED THROUGH A DEDICATED \$40 DUES INCREASE. THE INITIATIVE ALSO INCREASES RESOURCES IN NAR'S CAMPAIGN SERVICES, ISSUE ADVOCACY, AND COMMUNITY INVOLVEMENT PROGRAMS WHICH STATE AND LOCAL ASSOCIATIONS CAN TAP TO HELP THEM FIGHT PROPOSED STATUTES, ORDINANCES, ETC. THAT COULD HURT REAL ESTATE. IT PROVIDES A PATH TO LEADERSHIP IN THE KINDS OF COMMUNITY ISSUES THAT HELP SHAPE THE STATE AND LOCAL PUBLIC POLICY ENVIRONMENT. AT THE HEART OF THIS ORGANIZATIONAL CHANGE ARE THREE PROGRAMS. CAMPAIGN SERVICES, ISSUES ADVOCACY, AND INDEPENDENT EXPENDITURES. THE THIRD PROGRAM, INDEPENDENT EXPENDITURES, IS THE ONLY NEW COMPONENT. THIS IS THE PIECE THAT STEMS FROM THE SUPREME COURT'S CITIZENS UNITED DECISION, WHICH PAVED THE WAY FOR ASSOCIATIONS TO SUPPORT OR OPPOSE STATE OR LOCAL CANDIDATES AS THEY SEE FIT. THE EXPENDITURES HAVE TO BE MADE WITHOUT THE KNOWLEDGE OR COOPERATION OF THE CAMPAIGNS

	eturn erence	Explanation
Delegate broad authority to a committee	VI, Ion A, 1a	THE ORGANIZATION'S BOARD DELEGATES AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY TO THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE SHALL CONSIST OF THE PRESIDENT, THE PRESIDENT-ELECT, THE FIRST VICE PRESIDENT, THE TREASURER, THE REGIONAL VICE PRESIDENTS, THE IMMEDIATE PAST PRESIDENT TWICE. PRESIDENT AND LIAISON TO COMMITTES, THE VICE PRESIDENT AND LIAISON TO COMMITTES, THE VICE PRESIDENT AND LIAISON TO GOVERNMENT AFFAIRS, FOUR OTHER PAST PRESIDENTS, TWELVE MEMBERS WHO HAVE NOT SERVED AS PRESIDENT, TWO MEMBERS FROM THE REAL ESTATE SERVICES ADVISORY BOARD, ONE MEMBER BOARD EXECUTIVE OFFICER, AND ONE APPOINTEE OF EACH OF THE INSTITUTES, SOCIETIES AND COUNCILS OF THE NATIONAL ASSOCIATION THE POLITICAL FUNDRAISING CHAIRMAN AND THE MEMBER MOBILIZATION CHAIRMAN SHALL ALSO SERVE AS NON-VOTING MEMBERS OF THE EXECUTIVE COMMITTEE. THE PRESIDENT SHALL APPOINT, EACH YEAR, TWO PAST PRESIDENTS TO SERVE TWO YEAR TERMS, TO SUCCEED THOSE WHOSE TERMS EXPIRE AT THE MEETING OF THE BOARD OF DIRECTORS DURING THE NATIONAL CONVENTION, THE PRESIDENT-ELECT SHALL SUBMIT TO THE BOARD OF DIRECTORS SIX NOMINEES, AT LEAST FOUR OF WHOM ARE DIRECTORS, ONE OF WHOM MAY BE A MEMBER WHO HAS NOT PREVIOUSLY SERVED AS A DIRECTOR, AND ONE OF WHOM MAY BE A MEMBER WHO HAS NOT PREVIOUSLY SERVED AS A DIRECTOR, TO SERVE TWO COMMITTEE THE BOARD OF DIRECTORS SHALL ELECT MEMBERS OF THE EXECUTIVE COMMITTEE. THE BOARD OF DIRECTORS SHALL ELECT MEMBERS OF THE EXECUTIVE COMMITTEE FROM SUCH NOMINATIONS THE EXECUTIVE COMMITTEE SHALL MEET ON THE CALL OF THE PRESIDENT, THE BOARD OF DIRECTORS OR ANY ELEVEN OF ITS MEMBERS. THE PRESIDENT SHALL ACT AS CHAIRMAN OF THE EXECUTIVE COMMITTEE FOR THE WHOTH AS SERVED AS A MEMBER OF THE EXECUTIVE COMMITTEE FOR TERMS AGGREGATING TWENTY (20) YEARS SHALL BE A MEMBER OF THE EXECUTIVE COMMITTEE FOR THE UNLESS SOONER TERMINATED BY RESIDENT, THE BOARD OF DIRECTORS OR THE EXECUTIVE COMMITTEE FOR THE WILL CONSTITUTE A QUORUM A MEMBER WHO HAS SERVED AS A MEMBER OF THE EXECUTIVE COMMITTEE FOR THE FUNDLESS SOONER TERMINATED BY RESIDENT F

ldentifier	Return Reference	Explanation
Family/business relationships amongst interested persons	l '	MAURICE VEISSI - FAMILY RELATIONSHIP, MADELINE VEISSI - FAMILY RELATIONSHIP, ROBERT GOLDBERG - BUSINESS RELATIONSHIP, RICHARD ROSENTHAL - BUSINESS RELATIONSHIP, MARTIN EDWARDS - BUSINESS RELATIONSHIP, DON ASHER - FAMILY RELATIONSHIP, STEVE ASHER - FAMILY RELATIONSHIP, JOSEPH CARNAHAN - FAMILY RELATIONSHIP, THOMAS CARNAHAN - FAMILY RELATIONSHIP, JUNE WIENER - FAMILY RELATIONSHIP, DEANNA WIENER - FAMILY RELATIONSHIP, KOLLEEN KELLEY - FAMILY RELATIONSHIP, PATTY KELLEY - FAMILY RELATIONSHIP, MARIO ARRIAGA - FAMILY RELATIONSHIP

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

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

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

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

ldentifier	Return Reference	Explanation
Process used to establish compensation of top management official	Form 990, Part VI, Section B, Line 15a	NAR RELIES ON A COMPENSATION TEAM TO DETERMINE, REVIEW, AND APPROVE THE COMPENSATION OF THE CEO THE TEAM CONSISTS OF THE FOLLOWING NAR INDEPENDENT BOARD MEMBERS PRESIDENT AND TREASURER ADDITIONALLY, THE COMPENSATION TEAM IS SUPPORTED BY NAR'S SENIOR VICE PRESIDENT OF HUMAN RESOURCES COMPARABILITY DATA IS USED BY THE COMPENSATION TEAM TO HELP DETERMINE COMPENSATION THE MOST RECENT COMPENSATION STUDY WAS CONDUCTED IN DECEMBER OF 2011 ON AN ANNUAL BASIS, THE CEO HAS A PERFORMANCE EVALUATION WHICH IS USED IN PART TO DETERMINE ANY CHANGES IN PAY (EX BONUSES AND MERIT INCREASES) THE DELIBERATIONS AND DECISION MAKING WITH RESPECT TO THE CEO'S COMPENSATION ARE DOCUMENTED ON A TIMELY BASIS BY THE COMPENSATION TEAM THE PROCESS FOR DETERMINING THE COMPENSATION OF THE ORGANIZATION'S CEO WAS LAST UNDERTAKEN IN OF DECEMBER OF 2011 FOR THE 2012 CALENDAR YEAR COMPENSATION

ldentifier	Return Reference	Explanation
PROCESS USED TO DETERMINE COMPENSATION FOR OTHER OFFICERS AND KEY EMPLOYEES	FORM 990, PART VI, LINE 15B	NAR USES AN OUTSIDE COMPENSATION CONSULTANT TO HELP DETERMINE THE COMPENSATION PACKAGES FOR THE ORGANIZATION'S OTHER OFFICERS AND KEY EMPLOYEES ONCE NAR'S INDEPENDENT COMPENSATION CONSULTANT DETERMINES THE FINAL COMPENSATION PACKAGES FOR THE ORGANIZATION'S OTHER OFFICERS AND KEY EMPLOYEES, THEY ARE REVIEWED AND APPROVED BY THE CEO IN SUBSEQUENT YEARS, THE ORGANIZATION WILL USE AN INDEPENDENT CONSULTANT ON AN AS NEEDED BASIS THIS PROCESS WAS LAST UNDERTAKEN IN THE FOURTH QUARTER OF 2011 FOR THE 2012 COMPENSATION PACKAGES FOR THE POSITIONS OF *VP FINANCE & COMPTROLLER, *SVP COMMUNICATIONS, *SVP & GENERAL COUNSEL, *SVP HUMAN RESOURCES & OFFICE SERVICES, *SVP MARKETING & BUSINESS DEVELOPMENT

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

ldentifier	Return Reference	Explanation
Other changes in net assets or fund balances	Form 990 , Part XI, Line 9	LOSS FROM INVESTMENT IN SUBSIDIARIES13172676, CHANGE IN RETIREMENT OBLIGATION938000, DISTRIBUTION TO SENTRILOCK, LLC MEMBERS23447, RPR CAPITAL CONTRIBUTION -18500000, UNREALIZED GAIN ON SWAP AGREEMENTS - 33503,

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2012

DLN: 93493319093683

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization NATIONAL ASSOCIATION OF REALTORS Employer identification number

				36-152069	0		
Part I Identification of Disregarded Entities (C	omplete if the organizatio	n answered "Yes" to	o Form 990, Pa	rt IV, line 33.)			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct contro entity	əllıng	
(1) REALTORS PROPERTY RESOURCE LLC 430 N MICHIGAN CHICAGO, IL 60611 36-1520690	MEMBER SERVICES	IL	526,331	9,784,373	NAR		
Part II Identification of Related Tax-Exempt Or or more related tax-exempt organizations du	rganizations (Complete i	f the organization a	nswered "Yes"	to Form 990, Pa	rt IV, line 34 bed	cause it had	one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	Public charity st (if section 501(c		trolling Sect	(g) tion 512(l) controlle entity?
(1) REALTORS RELIEF FOUNDATION	DISASTER RELIEF	IL	501(C)(3)	7	NAR	Ye	_
430 N MICHIGAN AVE							
CHICAGO, IL 60611							
(2) LEONARD P REAUME MEMORIAL FOUNDATION	EDUCATION	IL	501(C)(3) N/A		NAR	Ye	s
430 N MICHIGAN AVE							
CHICAGO, IL 60611							
(3) CENTER FOR SPECIALIZED REALTOR EDUCATION	MEMBER SERVICES	IL	501(C)(6) N/A		NAR		es
430 N MICHIGAN AVE							
CHICAGO, IL 60611							
(4) REALTORS POLITICAL ACTION COMMITTEE	POLITICAL ACTIVITY	IL	527	N/A	NAR	Ye	es
430 N MICHIGAN AVE							
CHICAGO, IL 60611							
(5) NAR FUND	NON-FED ELECTION	IL	527	N/A	NAR	Ye	25
430 N MICHIGAN AVE	SUPPORT						
CHICAGO, IL 60611							
(6) NAR CONGRESSIONAL FUND	POLITICAL ACTIVITY	IL	527	N/A	NAR	Ye	es
430 N MICHIGAN AVE							
CHICAGO, IL 60611							
(7) REALTOR UNIVERSITY	EDUCATION	IL	501(C)(3)	2	CSRE		No
430 N MICHIGAN							
CHICAGO, IL 60611							

(a) Name, address, and		(b) Primary activity		(d) Direct		(e) dominant	(f) Share of	(g) Share of	(h Disprop	rtionate			ral or	(k) Percentage	
related organiza	tion		domicile (state or foreign country)	controlling entity	ur excl ta	ne(related, nrelated, luded from ax under tions 512- 514)	total incom	e end-of-year assets	allocat	tions?	amount in box 20 of Schedule K-1 (Form 1065)	mana part	ner?	ownership	
									Yes	No		Yes	No		
Part IV Identification of Relate line 34 because it had one									swere	ed "Ye	s" to Form	990,	Part	IV,	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or forei country)	gn	(d) Direct cont entity	trolling	(e) Type of e (C corp, S or trus	entity 6 corp,	(f) Share of total income	of total Share of end-of-		of- Percen	(h) Percentage ownership		(i) Section 512 (b)(13) controlled entity?	
		,,												Yes No	
(1) REALTORS INFORMATION NETWORK INC	REAL ESTATE INFO	71		NAR		C CORPOR	ATION	1,778,570	778,570 7,973,78		3,783 100 000 %		۱	'es	
430 N MICHIGAN AVE CHICAGO, IL 60611 36-3981966		IL.													
(2) SECOND CENTURY VENTURES LLC	REAL ESTATE INFO			NAR		C CORPORA	ATION	527,632		9,335,8	100 00	0 %	Y	'es	
430 N MICHIGAN AVE CHICAGO, IL 60611 26-2041343		IL													
(3) SENTRILOCK FINANCE CORP	REAL ESTATE SERV			NAR		C CORPOR	ATION	9,775		1,064,2	236 100 00	0 %	Y	'es	
430 N MICHIGAN AVE CHICAGO, IL 60611 20-3467306		DE													
(4) SENTRILOCK LLC	REAL ESTATE SERV			NAR		C CORPORA	ATION	15,355,965		9,997,5	593 100 %		Y	'es	
2710 EAST KEMPER ROAD CINCINNATI, OH 45241 20-0070121		ОН													

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No			
1 D	iring the tax year, did the orgranization engage in any of the following transactions with one or more relate	ed organizations lis	sted in Parts II-IV?							
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	Yes				
b	Gift, grant, or capital contribution to related organization(s)				1b	Yes				
c	c Gift, grant, or capital contribution from related organization(s)									
d	Loans or loan guarantees to or for related organization(s)				1d		No			
e	Loans or loan guarantees by related organization(s)				1e		No			
f	f Dividends from related organization(s)									
g	g Sale of assets to related organization(s)									
h	Purchase of assets from related organization(s)				1h		No			
i	Exchange of assets with related organization(s)				1 i		No			
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No			
k	k Lease of facilities, equipment, or other assets from related organization(s)									
ı	Performance of services or membership or fundraising solicitations for related organization(s)									
m	m Performance of services or membership or fundraising solicitations by related organization(s)									
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes				
	Sharing of paid employees with related organization(s)				10	Yes				
р	Reimbursement paid to related organization(s) for expenses				1 p		No			
q	Reimbursement paid by related organization(s) for expenses				1q	Yes				
r	Other transfer of cash or property to related organization(s)				1r	Yes				
s	s Other transfer of cash or property from related organization(s)									
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this	1								
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount ii	nvolved				
ee A	ditional Data Table									

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Part VI 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 re	garding exclu	sion for ce		nent	partnerships				•	,		Ī	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	(d) (e) (f) dominant acome section section selated, organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	amount in managing box 20 partner? f Schedule K-1		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

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Software Version: v2012.1.0

EIN: 36-1520690

Name: NATIONAL ASSOCIATION OF REALTORS

Schedule R (Form 990) 2012

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Part VII Supplemental Information

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

Identifier	Return Reference	Explanation
OTHER	PART V, LINE	THE NATIONAL ASSOCIATION OF REALTORS (NAR) FUND AND THE NAR CONGRESSIONAL FUND HAVE BE SET UP AS SEPARATE SEGREGATED
TRANSFERS	2	FUNDS AS DEFINED IN REG 1 527-2(B) AND IRC 527(F)(3) THE FUNDS ARE TREATED AS INDEPENDENT POLITICAL ORGANIZATIONS NAR
OFCASH		PROMPTLY TRANSFERS MEMBERSHIP DUES DIRECTLY TO EACH FUND, AND ACCORDINGLY, THESE TRANSFERS ARE NOT TREATED AS
		EXPENDITURES FOR EXEMPT FUNCTIONS ADDITIONALLY, POLITICAL CONTRIBUTIONS AND MEMBERSHIP DUES ARE NOT USED TO EARN
		INVESTMENT INCOME

--> Form 990, Schedule R, Part V - Transactions With Related Organizations (b) (a) (c) (d) Name of other organization Transaction Amount Involved Method of determining type(a-s) amount involved NAR FUND R 5,550,336 CASH REALTORS RELIEF FOUNDATION В 500,000 CASH CENTER FOR SPECIALIZED REALTOR EDUCATION Α 133,760 CASH CENTER FOR SPECIALIZED REALTOR EDUCATION L 110,605 CASH 3,266,312 CASH CENTER FOR SPECIALIZED REALTOR EDUCATION S NAR CONGRESSIONAL FUND R 1,609,776 CASH 13,200 CASH REALTORS INFORMATION NETWORK Α REALTORS INFORMATION NETWORK L 264,137 CASH S 856,906 CASH REALTORS INFORMATION NETWORK REALTOR UNIVERSITY Α 67,712 CASH L 40,000 CASH REALTOR UNIVERSITY S 136,583 CASH REALTOR UNIVERSITY 8,800 CASH SECOND CENTURY VENTURES Α SECOND CENTURY VENTURES L 13,637 CASH SECOND CENTURY VENTURES S 401,498 CASH