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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public

Department of the Treasury

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

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2012 calendar year, or tax year beginning , 2012, and ending . 20 C Name of organization WEST HAWAII ASSOCIATION OF REALTORS D Employer identification number B Check if applicable FKA KONA BOARD OF REALTORS 99-0148021 Х Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name chapo 74-5620 PALANI COURT 106 (808) 329-4874 City, town or post office, state, and ZIP code Terminated Amended return KAILUA KONA, HI 96740 G Gross receipts \$ 221,875. Application pending F Name and address of principal officer H(a) Is this a group return for X No Yes H(b) Are all affiliates included? Tax-exempt status X | 501(c) (6) ◀ If "No " attach a list (see instructions) 501(c)(3) 4947(a)(1) or (insert no) Website: NONAREALTORS.COM H(c) Group exemption number L Year of formation 1969 M State of legal domicile HI Form of organization Corporation Trust X Association Other > Summary Briefly describe the organization's mission or most significant activities TO UNIFY & ENHANCE THE COMMON INTERESTS OF, & MAINTAIN & SUPPORT HIGH ETHICAL STANDARDS FOR THE REAL ESTATE BUSINESS IN THE STATE OF HAWAII 2 Check this box ▶ I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 13. Number of independent voting members of the governing body (Part VI, line 1b) 13. 4. Total number of individuals employed in calendar year 2012 (Part V, line 2a) Total number of volunteers (estimate if necessary) 55. 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 b Net unrelated business taxable income from Form 990-T, line 34 . . . Prior Year **Current Year** 140,680. 137,633. Contributions and grants (Part VIII, line 1h) 39,162 32,801. Program service revenue (Part VIII, line 2g) -3,781.10 26,235 34,077. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 206,077. 200,730. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12). 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 14 15 81,626. 79,467. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 147,043. 127,055. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, columni(A) [ine 25) IVED 228,669. 206,522. 19 -22,592-5,792. Revenue less expenses Subtract line 18 from line 12 Ω O **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 127,333. 184,415. 汐 142,150. 205,024. 21 Total liabilities (Part X, line 26) -14,817. -20,609

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.

Sign Signature of officer Association Here -140A Type or print name and title Print/Type preparer's name Check Paid self-employed P00378659 Preparer ► SALLY M TAKAMINE, CPA INC Firm's EIN 99-0325705 Firm's address ▶ 98-351 KOAUKA LOOP #C1102 AIEA,

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

Net assets or fund balances Subtract line 21 from line

Signature Block

Form 990 (2012)

X

Yes

808-942-7717

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21520T 615G 5/31/2013 9:17:55 PM V 12-4.6F KONA REALTORS

Phone no

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For	m 990 (2012)	Page 2
Ρ	Statement of Program Service Accomplishments	
_	Check if Schedule O contains a response to any question in this Part III	
1	Briefly describe the organization's mission: TO UNIFY AND ENHANCE THE COMMON INTERESTS OF, AND MAINTAIN AND	
	SUPPORT HIGH ETHICAL STANDARDS FOR, THE REAL ESTATE BUSINESS IN THE	
	STATE OF HAWAII	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measur expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to of the total expenses, and revenue, if any, for each program service reported.	
4a	(Code) (Expenses \$including grants of \$) (Revenue \$)	
	TO PROVIDE INDIVIDUALS IN THE REAL ESTATE INDUSTRY WITH	
	VARIOUS SERVICES THAT AID IN DEALING WITH ISSUES RELATED TO	
	REAL ESTATE TRANSACTIONS	
46	(Code) (Expenses \$ including grants of \$) (Revenue \$)	
40	(Code) (Expenses \$) (Revenue \$)	
-		
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)	
		
<u> 4</u> d	Other program services (Describe in Schedule O)	
7U	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ►	
JSA	5000	(444.41)

Par	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		- 1	
	complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	Ť		
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
_	· · · · · · · · · · · · · · · · · · ·			
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_	x	
_	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors		ļ	
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If		ł	.,
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	⁹⁴ > ₄ -	,	, é ₁ ,
	VII, VIII, IX, or X as applicable	3 24	- A	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	·	11b		Х
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more		Ī	
	· · · · · · · · · · · · · · · · · · ·	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets		i	
	· · · · · · · · · · · · · · · · · · ·	11d		X
e		11e		Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•		11f		Х
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
1 Z a	· · · · · · · · · · · · · · · · · · ·	12a		Х
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
D		12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
		14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	174	+	
b	fundraising, business, investment, and program service activities outside the United States, or aggregate		}	
		14b	1	х
4-	, , , , , , , , , , , , , , , , , , ,	140		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4.5		х
40	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	46	l	х
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			х
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	.		v
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			v
	If "Yes," complete Schedule G, Part III	19		<u> </u>
	· · · · · · · · · · · · · · · · · · ·	20a		<u> </u>
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	Checklist of Required Schedules (continued)		_	
	·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States	İ		
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, 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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
_	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	<u> </u>		
	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		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
-	Schedule L, Part IV	28b		х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
•	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
•	Part I	31	1	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	-		
-	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
•	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	"		
J	or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>x</u>
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	000		
•	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
26		335		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
37				
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	,,		Х
20	Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	20	х	
	19? Note. All Form 990 filers are required to complete Schedule O	38	^	

Par	Check if Schedule O contains a response to any question in this Part V			
	Check is occitedate of contains a response to any question in this care v		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
ь.	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		ļ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			.,
_	account)?	4a		X
b	If "Yes," enter the name of the foreign country.			ĺ
. .	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 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	- 30		<u> </u>
Ju	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		ļ
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	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		<u> </u>
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		ļ
9	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			
а	Initiation fees and capital contributions included on Part VIII, line 12		ļ	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	İ	1	
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders		1	İ
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			j
	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	1	ı	ĺ
	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	ļ		
	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	1		
	Enter the amount of reserves on hand	į		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
ICA.				

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Х Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 13 Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Х 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . X 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets?.... X 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Х the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No X 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," Х Х 13 13 Did the organization have a written whistleblower policy?....... Х 14 Did the organization have a written document retention and destruction policy?......... 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement Х 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 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 Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available Check all that apply. Another's website Upon request Other (explain in Schedule O) Own website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization ▶MURIEL BOOT 75-5995 KUAKINI HWY., STE 221 KAILUA KONA, HI 96740 808 329-3791 JSA Form 990 (2012)

	·							
Part VII	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 Complète 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 employees."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unle	Pos heck ss pe	erson	e than or trust Highest compensated employee	an	(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	_
_(1) KATIE MINKUS	.70										_
PRESIDENT	70	Х	ļ.,	Х	_			0	0		_0
(2) CINDY WILD SECRETARY	.70	x -		-x-				o			_ ∩
(3) KAREN OSTLIE	.70		\vdash	1					1		
TREASURER	-	х		x				0	ol		0
(4) BRIDGET ANDREW DIRECTOR	.70	х						0	0		_ _
(5) SHARON BROWN PORTER DIRECTOR	.70	х				-		0	0	· · · ·	_ _
(6) JAMAICA CANAS	.70		-								_
DIRECTOR	- 	х						0	ol		0
(7) ROMY JACOBSON DIRECTOR	.70	х						0	0		- 0
(8) ROXY VAN BOCKEL DIRECTOR	.70	х						0	0		_ 0
(9) BOB MEYERS VICE PRESIDENT	.70	х		х				0	0		- О
(10)ELLE PHILLIPS PRES ELECT	.70	х		x				0	0		0
(11) DONNA WHITMYER DIRECTOR	.70	х						0	0		- 0
(12) DON WATSON PAST PRESIDENT	.70	х	:					0	0		_ 0
(13) MICHELE MCKINLEY VICE PRESIDENT	.70	х		х				0	0		0
(14)STEPHANIE REED ASSOCIATION EXECUTIVE	45.00			х				0	0		- О

Form 990 (2012)

JSA

Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	plo	yee	es,	and F	ligi	hest Compensat	ed Employ	ees (c	ontinued)	
Name and title	(B) Average hours per week (list any hours for	box,	unles	Pos neck is pe	rson	e than o is both	an	(D) Reportable compensation from the	(E) Reporta compensation relate organizati	on from d	(F) Estimated amount of other compensation	n
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099		from the organization and related organizations	
15) 73003 030730	45.00					ed					<u> </u>	
15) LAURA HARLAK ASSOCIATION EXECUTIVE	45.00			х						d		0
16) LINDA SWANSON	45.00											
ASSOCIATION EXECUTIVE				Х				12,078.		0		0
1b Sub-total					• •	• • •	>	12,078.	-	0		0
c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)							>	12,078.		0		0
Total number of individuals (including but not reportable compensation from the organization)	limited to t	hose	liste				o re	eceived more than	\$100,000	of		
		-								-	Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched											3	X
4 For any individual listed on line 1a, is the organization and related organizations grundividual	eater than	\$15	50,0	003) If	"Yes),"	complete Schedu	le J for	such	4	x
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co	mper	satio	on i	fron	n any	un	related organizati	on or indiv	idual	5	X
Section B. Independent Contractors	es, comple	10 301	1600	<i>10</i> 0	101	Sacri	рег	3011		· · · · · · · · · · · · · · · · · · ·	1 1 1	
Complete this table for your five highest com- compensation from the organization. Report of year.	pensated i compensati	ndepo on fo	ende r the	ent ca	con	tracto dar ye	rs t ar e	that received more ending with or with	than \$100 nin the orga	0,000 c anizatio	of n's tax	
(A) Name and business add	dress							(B) Description of se	ervices	_ ((C) Compensation	
							-					
							士					
							1					
2 Total number of independent contractors (i	ncluding b	ut no	t lim	nite	d to		se I	isted above) who	received			
more than \$100,000 in compensation from th	ie organiza	tion	>			0						

Pai	rt VII	Statement of Revenue Check if Schedule O contains a resp	once to any quest	ion in this Part VIII			
		Crieck if Scriedule O Contains a resp	onse to any quest	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Giffs, Grants and Other Similar Amounts	1a b c d	Federated campaigns	137,283.				
Contribution and Other S	f g	All other contributions, gifts, grants, and similar amounts not included above . Noncash contributions included in lines 1a-1f \$ _ Total. Add lines 1a-1f		137, 633.			
Program Service Revenue	2a b c	EDUCATION	Business Code	32,801.			
Program Se	d e f g	All other program service revenue Total. Add lines 2a-2f		32,801.			
	3 4 5	Investment income (including dividends, into other similar amounts)	▶ proceeds▶	0			
	6a b c	Gross rents	(ii) Personal				
-	d 7a b	Gross amount from sales of assets other than inventory Less cost or other basis	(II) Other	0			
	c d	and sales expenses	3,781. -3,781.	-3,781.			
Other Revenue		events (not including \$ of contributions reported on line 1c) See Part IV, line 18					,
Othe	9a	Net income or (loss) from fundraising events Gross income from gaming activities See Part IV, line 19		6,793.			
	с 10а	Net income or (loss) from gaming activities. Gross sales of inventory, less returns and allowances		0			
	С	Less cost of goods sold ATCH . 2 . Net income or (loss) from sales of inventory. Miscellaneous Revenue SPONSORSHIP INCOME	b 11,764. Business Code	-4,447. 16,091.			
	11a b c d	MEETINGS INCOME ROOM RENTAL INCOME All other revenue		15,380. 140. 120.			
	e 12	Total. Add lines 11a-11d Total revenue. See instructions	▶	31,731. 200,730.			

Part IX Statement of Functional Expenses

Se	ction 501(c)(3) and 501(c)(4) organizations m	ust complete all columi	ns. All other organizat	ions must complete coll	umn (A)
	Check if Schedule O contains a resp	onse to any question ii	n this Part IX		
	not include amounts reported on lines 6b, 7b, , 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 .	d			
2	Grants and other assistance to individuals in				<u> </u>
_	the United States See Part IV, line 22	q			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16	q			
4	Benefits paid to or for members	O			
5	Compensation of current officers, directors,				
	trustees, and key employees	12,078.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	58,086.			
8	Pension plan accruals and contributions (include section				
	401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	O		ļ	
10	Payroll taxes	9,303.			
11	Fees for services (non-employees)				
а	Management	9			
b	Legal	280.	·····		
	Accounting	7,318.	· · · · · · · · · · · · · · · · · · ·		
	Lobbying	9			
	Professional fundraising services See Part IV, line 17	ď			
	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column				
8	(A) amount, list line 11g expenses on Schedule O)	d			
12	Advertising and promotion	1,810.			
13	Office expenses	9,213.			
14	Information technology	700.			
15	Royalties	0			
16	Occupancy	24,578.			
17	Travel	3,674.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	Q			
9	Conferences, conventions, and meetings	16,690.			
20	Interest	o o			
21	Payments to affiliates	504.			
22	Depreciation, depletion, and amortization	11,942.			
23	Insurance	11, 942.			
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)				
	BANK CHARGES	7,051.			
-	DUES & SUBSCRIPTIONS	1,905.			
	EDUCATION EXPENSE	10,737.			
-	LICENSE & FEES	3.			
e	All other expenses _ ATCH _ 3	30,650.			
	Total functional expenses. Add lines 1 through 24e	206,522.			
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)	ٳ			
	101101111111 OUT 30-2 (AGC 330-7201	u		i	

JSA 2E1052 1 000

Pa	art X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Par	tX		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	7,994.	-	O
	2	Savings and temporary cash investments	109,933.	2_	171,233.
	3	Pledges and grants receivable, net	C	3	C
	4	Accounts receivable, net	4,490.	4	-10.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees			
	6	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4059(9)(1)) persons described in century (959(4)(2)(9)) and century (959(4)(2)(9)).	C	5	C
		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.	d	6	l c
ets	7	Notes and loans receivable, net	d	7	C
Assets	8	Inventories for sale or use	Ċ	8	C
٩	9	Inventories for sale or use Prepaid expenses and deferred charges	ď	9	8,332.
	10 a	Land, buildings, and equipment cost or			· · ·
		other basis Complete Part VI of Schedule D 10a 38,057.			
	b	Less accumulated depreciation	4,578.	10c	2,808.
	11	Investments - publicly traded securities		11	0
	12	Investments - other securities See Part IV, line 11		12	0
	13	Investments - program-related See Part IV, line 11	C	13	0
	14	Intangible assets		14	0
	15	Other assets See Part IV, line 11	338.	15	2,052.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	127,333.	16	184,415.
	17	Accounts payable and accrued expenses	63,526.	17	103,974.
	18	Grants payable		18	0
	19	Deferred revenue	75,684.	19	101,050.
	20	Tax-exempt bond liabilities	Q	20	0
es	21	Escrow or custodial account liability Complete Part IV of Schedule D	q	21	0
Liabilities	22	Loans and other payables to current and former officers, directors,			
jab		trustees, key employees, highest compensated employees, and			_
	İ	disqualified persons Complete Part II of Schedule L	- q	22	0
	23	Secured mortgages and notes payable to unrelated third parties	Q	23	0
	24	Unsecured notes and loans payable to unrelated third parties	Q	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X	2 040		
		of Schedule D	2,940.	25	205 024
	26	Total liabilities. Add lines 17 through 25	142,150.	26	205,024.
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶			
an	27	Unrestricted net assets	· · · · · · · · · · · · · · · · · · ·	27	
Ва	28	Temporarily restricted net assets		28	
h	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here X and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds	d	30	0
SS	31	Paid-in or capital surplus, or land, building, or equipment fund	q	31	0
it A	32	Retained earnings, endowment, accumulated income, or other funds [-14,817.	32	-20,609.
Ž	33	Total net assets or fund balances	-14,817.	33	-20,609.
	34	Total liabilities and net assets/fund balances	127,333.	34	184,415.

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2012)

3b

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

▶ See separate instructions.

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

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

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

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

	e organization answered "Yes,' Section 501(c)(4), (5), or (6) org	" to Form 990, Part IV, line 5 (Proxy Taganizations Complete Part III.	ax) or Form 990-EZ, Pa	rt V, line 35c (Proxy Tax), t	hen	
		II ASSOCIATION OF REALTO	ORS	Employer identi	fication number	
	KONA BOARD OF REAL			99-01	48021	
Pai	rt I-A Complete if the c	organization is exempt under s	section 501(c) or i	s a section 527 organ	nization.	
1		organization's direct and indirect p				
2						
3						
Par	t I-B Complete if the o	rganization is exempt under s	ection 501(c)(3).			
1	Enter the amount of any exc	cise tax incurred by the organizatio	n under section 495	5 ▶ \$		
2		cise tax incurred by organization m				
3	If the organization incurred	a section 4955 tax, did it file Form	4720 for this year?		Yes	No
4a b	Was a correction made? If "Yes," describe in Part IV				Yes	No
Par	t I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)(3).	
1		expended by the filing organization				
	•			•		
2		ng organization's funds contributed				
	527 exempt function activities	es		▶ \$		
3		enditures Add lines 1 and 2 En				
	-	· · · · <u>· · · · · · · · · · · · · · · </u>				
4		e Form 1120-POL for this year?			Yes	No
5		and employer identification numb				
		s For each organization listed, en				
		tributions received that were prom				
	as a separate segregated fur	nd or a political action committee ((PAC) If additional s	space is needed, provide	e information in l	Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of p	olitical
		` ′ -	'' = =	filing organization's	contributions rece	eived and
				funds If none, enter -0	promptly and d delivered to a se	
					political organiz	ation. If
					none, enter	-0-
(1)						
(2)						
(3)						
						
(4)		 				
	·····					
5)						
6)		<u> </u>				
		1				

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

Schedule C (Form 990 or 990-EZ) 2012

Grassroots ceiling amount (150% of line 2d, column (e)) f Grassroots lobbying expenditures Schedule C (Form 990 or 990-EZ) 2012

For each "Yes," response to lines 1a through 11 below, provide in Part IV a detailed	(a	1)		(b)	
description of the lobbying activity.	Yes	No		Amoun	t
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		į			
Volunteers?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?					_
d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?					
Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body?			*****		
g Direct contact with legislators, their staffs, government officials, or a legislative body?	-				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total. Add lines 1c through 1i					
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ectio	n	
501(c)(6).					T
1 Were substantially all (90% or more) dues received nondeductible by members?					es l
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		• • •		2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		• • •			
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501					
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"		-			is
answered "Yes."	`	<u>.</u>			
1 Dues, assessments and similar amounts from members			1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo	unts d	of			
political expenses for which the section 527(f) tax was paid).			1		
a. Currenturas			2a		
a Current year			2b		
b Carryover from last year					
b Carryover from last year c Total			2c		
b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	es .		2c 3		
b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion	es of th	e			
b Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible is	es n of th	e g	3		
b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible I and political expenditure next year?	es n of th	e g	3		
b Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible I and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	es n of th	e g	3		
b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible I and political expenditure next year?	es n of th obbyin	e g	4 5	led group	
b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible I and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 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	es n of th obbyin	e g	4 5	ted group	
b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible I and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 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	esn of thobbyin	e g	3 4 5	ted group	
b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible I and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 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 ist), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information	esn of thobbyin	e g	3 4 5	ted group	
b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible I and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 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 ist), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information	esn of thobbyin	e g	3 4 5	ted group	

Schedule C (Form 990 or 990-EZ) 2012

Page 4

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury

▶ 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.

Open to Public Inspection

Internal Revenue Service

	e of the organization WEST HAWAII ASSOCIATI(A KONA BOARD OF REALTORS	ON OF REALTORS		1 '	ployer identification number 99–0148021
	rt I Organizations Maintaining Donor Adv	ised Funds or Other	r Similar Funds or		
υa	organizations maintaining bonor Adv		Sillillar Fullus Of	ACCC	dins. Complete il tile
-		(a) Donor adv	nsed funds		b) Funds and other accounts
1	Total number at end of year	(4)			-,
2	Aggregate contributions to (during year)				
3					
4	Aggregate grants from (during year)				
	Aggregate value at end of year			d	
5	Did the organization inform all donors and donor	-			
	funds are the organization's property, subject to the	-	-		
6	Did the organization inform all grantees, donors, an		• •		
	only for charitable purposes and not for the benefit				
Da	conferring impermissible private benefit? rt II Conservation Easements. Complete if				
1	rt II Conservation Easements. Complete if Purpose(s) of conservation easements held by the			91111 9	90, Part IV, line 7.
•		= '			
	Preservation of land for public use (e.g., recre	eation or education)			istorically important land area
	Protection of natural habitat		Preservation of	ra ce	rtified historic structure
_	Preservation of open space	-14(.e-4		41 6 -	
2	Complete lines 2a through 2d if the organization his easement on the last day of the tax year	eia a qualifiea conserv	ation contribution in	tne ro	orm or a conservation
	easement on the last day of the tax year		F	l. û	Held at the End of the Tax Year
_	Total aumhor of accounts		}-		Tield at the Elia of die fax fear
a	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easements			2b	
C	Number of conservation easements on a certified			2c	<u>-</u> -
d	Number of conservation easements included in (c)			.	
•	historic structure listed in the National Register				
3	Number of conservation easements modified, tran	sterred, released, ext	inguisned, or termina	itea b	y the organization during the
	tax year >			-	-
4	Number of states where property subject to conse				
5	Does the organization have a written policy regard	= :	= -	_	
	violations, and enforcement of the conservation ea				
6	Staff and volunteer hours devoted to monitoring, in	ispecting, and enforci	ng conservation ease	ement	s during the year
_	>				
7	Amount of expenses incurred in monitoring, inspec	iting, and enforcing co	nservation easemen	ts dur	ring the year
_	> \$. 6(1) -1			70/11/11/01
8	Does each conservation easement reported on line	e 2(d) above satisfy tr	ne requirements of sec	ction 1	/U(n)(4)(B)
_	(i) and section 170(h)(4)(B)(ii)?				Yes I No
9	In Part XIII, describe how the organization reports				
	balance sheet, and include, if applicable, the text organization's accounting for conservation easeme		nganization's financia	ai Stat	ements that describes the
Dэ	rt III Organizations Maintaining Collections		reasures or Other	Simi	lar Accete
, a	Complete if the organization answered			O	iai Assets.
4-					o statement and balance about
1a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the form	ar assets held for pu	blic exhibition, educ	evenu ation.	ie statement and balance sneet . or research in furtherance of
	public service, provide, in Part XIII, the text of the fo	ootnote to its financial	statements that desc	cribes	these items
b	If the organization elected, as permitted under \$				
	works of art, historical treasures, or other similar		blic exhibition, educ	ation,	or research in furtherance of
	public service, provide the following amounts relati	_			. .
	(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 ai				for financial gain, provide the
	following amounts required to be reported under S	FAS 116 (ASC 958) re	elating to these items		
a	Revenues included in Form 990, Part VIII, line 1.				\$
b	Assets included in Form 990, Part X		<i></i> .		· · · • • •

Sche	dule D (Form 990) 2012		_								P	age 2
Pa	t Organizations Maintair	ing Col	lections of	of Art, Hi	storical	Treasur	es, or	Other Sim	ilar Ass	ets (co	ntınu	ed)
3	Using the organization's acquisiticollection items (check all that app	on, acces	ssion, and	other reco	rds, chec	k any of	the foll	owing that	are a sigi	nificant	use o	of its
а	Public exhibition			d [Loan	or excha	nge prog	rams				
b	Scholarly research			e 🗀								
С	Preservation for future gene	erations		_	_							
4	Provide a description of the orga	nızatıon's	collection	s and expl	ain how	they furt	her the	organization	's exemp	t purpo	se in	Part
	XIII.								·			
5	During the year, did the organization	on solicit	or receive	donations o	of art, hist	orical tre	asures,	or other sımı	lar			
	assets to be sold to raise funds rat									Yes		No
Pa	t IV Escrow and Custodial line 9, or reported an am					ganizatio	on answ	vered "Yes'	' to Forn	n 990,	Part	IV,
1a	Is the organization an agent, truste	ee, custod	lian or othe	er intermed	ary for co	ontributio	ns or ot	her assets no	ot			
	included on Form 990, Part X?								[Yes		No
b	If "Yes," explain the arrangement is	n Part XIII	and comp	lete the fol	lowing tab	ole _					,	
								P	\mount			
C	Beginning balance					_				•		
đ	Additions during the year											
е	Distributions during the year					1						
f	Ending balance											
2a	Did the organization include an am	ount on I	Form 990,	Part X, line	217				L	Yes		No
	If "Yes," explain the arrangement in											
Par	t V Endowment Funds. Cor					, 						
4	Deciman of uses halous	(a) Cu	rrent year	(b) Pro	or year	(c) Two	years back	(d) Three	years back	(e) Fou	r years l	back
	Beginning of year balance Contributions			<u> </u>				-				
	Net investment earnings, gains,											
C	and losses											
ч	Grants or scholarships			_								
	Other expenditures for facilities											
-	and programs			İ								
f	Administrative expenses		_			· · · · · -		-				-
	End of year balance					 		.		<u> </u>		
2	Provide the estimated percentage		rent year o	nd balance	lino 1a	column /	'all bold	200				
- a	Board designated or quasi-endowr				time ig,	Column	a)) Helu	as				
	Permanent endowment ▶											
	Temporarily restricted endowment		%									
	The percentages in lines 2a, 2b, ar			00%								
3a	Are there endowment funds not in		•		ation that	are held	and adr	ninistered for	the			
	organization by:			J						ſ	Yes	No
	(i) unrelated organizations	. 								3a(i)		
	(ii) related organizations									3a(ii)		
b	If "Yes" to 3a(II), are the related org									3b		
4	Describe in Part XIII the intended u	ses of the	e organizat	ion's endov	vment fur	nds				L		
Par	t VI Land, Buildings, and Equ	ipment.	See Forr	m 990, Pa	rt X, line	10.			•			
	Description of property		(a) Cost or	other basis stment)	(b) Cost o	or other basi ther)		Accumulated epreciation	(d	l) Book va	lue	
1a	Land											
b	Buildings											
C	Leasehold improvements			2,516.				43.			2,4	
d	Equipment	[34,016.				33,681			3	35.
	Other			1,525.				1,525.				
Tota	I. Add lines 1a through 1e (Column	(d) must	equal Form	n 990, Part	X, column	i (B), line	10(c)).	<u></u> ▶			2,8	08.
									Cabadi	ula D (Ea	0001	2042

_			
Р	'n	8	

Part VII	Investments - Other Securities. Se	o Form 000 Port Y Jir	12		Page 3
Part VII	(a) Description of security or category	(b) Book value	T 12	(c) Method of valua	
	(including name of security)		—	Cost or end-of-year mark	ket value
	al derivatives		 		
	r-held equity interests		+		
(3) Other			+-		
(B)			1		
(C)			1		
(D)					
(E)					
(F)			 		
(G)			-		
(H)			+-		
(I)	in (b) must equal Form 990, Part X, col (B) line 12)	>	+		
	Investments - Program Related. Se		1 1e 13		
. wit	(a) Description of investment type	(b) Book value	T	(c) Method of valua	tion
		(-,		Cost or end-of-year mark	ket value
(1)					
(2)					
(3)			 		
(4)					
(5) (6)			 		
(7)			+		
(8)			 		
(9)					
(10)					
	n (b) must equal Form 990, Part X, col (B) line 13)	>	<u> </u>		· · · · · ·
Part IX	Other Assets. See Form 990, Part				T
(1)		(a) Description			(b) Book value
(2)			-		-
(3)					
(4)					
(5)					
(6)					
(7)				<u> </u>	
(8)					
(9) (10)	 				
	umn (b) must equal Form 990, Part X, col (
Part X	Other Liabilities. See Form 990, Pa				
1.	(a) Description of liability	(b) Book valu	ıe		
(1) Feder	ral income taxes				
(2)					i.
(3)					
(4)				,	
(5)					
<u>(6)</u> (7)					
(9)					
(10)					
(11)					
Total. (Colun	nn (b) must equal Form 990, Part X, col. (B) line	25) ▶			
	ASC 740) Footnote In Part XIII, provide the to				
liability for ui	ncertain tax positions under FIN 48 (ASC 740)	Check here if the text of the	footnot	ie has been provided in Part XIII	<u></u>

Schedule D (Form 990) 2012 Page **4** Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990. Part VIII, line 12: a .Net unrealized gains on investments b Donated services and use of facilities 2b 2c d Other (Describe in Part XIII.) e Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII) 4b c Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Part XII Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line Donated services and use of facilities **b** Prior year adjustments 2b c Other losses 2c Other (Describe in Part XIII) 2d Add lines 2a through 2d Subtract line 2e from line 1 . . 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 4c Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18. Part XIII 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

Part XIII Supplemental Information (continued)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization

WEST HAWAII ASSOCIATION OF REALTORS

FKA KONA BOARD OF REALTORS

Employer identification number 99-0148021

FORM 990, PART VI, 15A & 15B THE BOARD OF DIRECTORS DETERMINES COMPENSATION & REVIEWS THE ASSOCIATION THE ASSOCIATION EXECUTIVE REVIEWS THE OFFICE STAFF & REPORTS EXECUTIVE. BACK TO THE DIRECTORS.

ATTACHMENT 1

FORM 990, PART VIII - FUNDRAISING EVENTS

DESCRIPTION	GROSS INCOME	DIRECT EXPENSES	NET INCOME		
VARIOUS EVENTS	9,453.	2,854.	6,599.		
CRUISE	2,940.	2,746.	194.		
TOTALS	12,393.	5,600.	6,793.		

	ATTACHMENT 2
FORM 990, PART VIII - GROSS SALES AND COST-OF GOODS SOLD -	
GROSS SALES LESS RETURNS AND ALLOWANCES	7,317.
INVENTORY AT BEGINNING OF YEAR	••
PURCHASES	11,764.
SALARIES AND WAGES	••
OTHER COSTS	
SUBTOTAL	11,764.
MINUS ENDING INVENTORY	••
COST OF GOODS SOLD	11,764.

ATTACHMENT 3

Schedule O (Form 990 or 990-EZ) 2012 Name of the organization WEST HAWAII ASSOCIATI FKA KONA BOARD OF REALTORS	ON OF REALTORS	S	Employer identifica	
FORM 990, PART IX - OTHER EXPENSES		<u> </u>	ATTACHMENT 3	(CONT'D)
DESCRIPTION	(A) TOTAL EXPENSES	(B) PROGRAM SERVICE EXP.	(C) MANAGEMENT AND GENERAI	(D) FUNDRAISING EXPENSES
REPAIRS & MAINTENANCE	1,009.			
TAXES - GENERAL EXCISE	874.			
UTILITIES	7,418.			
MEALS & ENTERTAINMENT	36.			
MISCELLANEOUS	504.			
TELEPHONE	6,089.			
EMPLOYEE LEASING	14,720.			
TOTALS	30,650.			
TOTALS	30,030.	ĀTĪ	CACHMENT 4	
FORM 990, PART X - PREPAID EXPENSES A DESCRIPTION			ENDING BOOK VALUE	
FORM 990, PART X - PREPAID EXPENSES A			ENDING BOOK VALUE	332.
FORM 990, PART X - PREPAID EXPENSES A DESCRIPTION			ENDING BOOK VALUE	_
FORM 990, PART X - PREPAID EXPENSES A DESCRIPTION PREPAID EXPENSES		HARGES .	ENDING BOOK VALUE	332. 3 <u>32.</u>
FORM 990, PART X - PREPAID EXPENSES A DESCRIPTION PREPAID EXPENSES TOTALS FORM 990, PART X - DEFERRED REVENUE		HARGES .	ENDING BOOK VALUE 8,3	332.
FORM 990, PART X - PREPAID EXPENSES A DESCRIPTION PREPAID EXPENSES TOTALS		HARGES .	ENDING BOOK VALUE 8,3 8,3 ATTACHMENT 5	332.

Schedule O (Form 990 or 990-EZ) 2012 Page 2 Name of the organization WEST HAWAII ASSOCIATION OF REALTORS Employer identification number FKA KONA BOARD OF REALTORS 99-0148021 ATTACHMENT 5 (CONT'D) FORM 990, PART X - DEFERRED REVENUE **ENDING**

DESCRIPTION BOOK VALUE

> TOTALS 101,050.

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions.

OMB No 1545-0172

Attachment Sequence No Identifying number

Department of the Treasury Internal Revenue Service Name(s) shown on return

Attach to your tax return.

99-0148021 WEST HAWAII ASSOCIATION OF REALTORS Business or activity to which this form relates GENERAL DEPRECIATION Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) 1 1 Total cost of section 179 property placed in service (see instructions)...... 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If marned filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost Listed property. Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12 . . . Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 504 Other depreciation (including ACRS) . . . MACRS Depreciation (Do not include listed property) (See instructions) Section A MACRS deductions for assets placed in service in tax years beginning before 2012 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here. Section B - Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery placed in service (business/investment use (a) Classification of property (e) Convention (f) Method (a) Depreciation deduction period only - see instructions) 19a 3-year property b - 5-year property 7-year property d 10-year property e 15-year property f 20-year property g 25-year property S/L 25 vrs ММ S/L 27 5 yrs h Residential rental 27 5 yrs мм S/I property 39 yrs MM S/L i Nonresidential real MM property Section C - Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs S/I c 40-year S/L Part IV Summary (See instructions.) Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 504 and on the appropriate lines of your return Partnerships and S corporations - see instructions 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.

	. 4660 (0040)											99	0148	3021	
		Property (Include			certain	othe	r vehic	cles,	certain	comp	outers,	and	prope	rty us	Page 2 sed fo
	entertaini Note: For	ment, recreation, or any vehicle for when the answer of th	nich you are	usin	g the s	tandar	d mileag Section (ge rai	te or dec	ducting	lease	expense	e, com _l	olete o	nly 24a
		A - Depreciation an								imits for	passer	nger au	tomobile	es)	
24a		ence to support the bus				T 1	-		24b If "\					Yes	No
	(a)	(b)	(c)		(d)		(e)		(f)	(9	g)	((h)		(i)
	Type of property (list vehicles first)	Date placed in service	Business/ investment use percentage	Cost	t or other b		isis for depri usiness/inve use only	estment	Recovery period		hod/ ention		eciation uction		d section 3 cost
25	•	on allowance for qua e than 50% in a qualific						_			. 25				
26		e than 50% in a qualifie				5110) 1 1		 -	· · · · · ·	• • • •	. 25	L		L	
			9	6					1						
			9	6											
			9	6											
27	Property used 50%	or less in a qualified be	,	, .											
			9/			_				S/L -				1	
			9	+		_		_		S/L -				-	
	Add on sunts in an	luma (b) luma 05 Abar	9	1		- 04			L	S/L -	T 00			ł	
28 29	Add amounts in co	olumn (h), lines 25 thro olumn (i), line 26. Ente	r here and on h	nere a	and on III Dade 1	ie ∠i, pa	ige i				. 28	L	. 29	 	
<u> </u>	7.100 00000	, d	Section				-			· · · · ·		<u>····</u>	. 1 23	<u> </u>	
Con	nplete this section f	for vehicles used by a								related	person	If you p	provided	vehicle	s to you
emp	oloyees, first answer	the questions in Section	on C to see if yo	ou me	et an exc	eption t	o comple	ting th	ns section	for those	vehicle	es			
					(a)	1	(b)		(c)		1)		(e)	1	(f)
30		vestment miles driv clude commuting miles		Ven	nide 1	Vel	nicle 2	Ve	ehicle 3	Vehi	cle 4	Veh	iide 5	Ver	nicle 6
31	Total commuting a	miles driven during the	e year L					<u> </u>						<u> </u>	····
32		rsonal (noncommuti	٠,			İ									
33		n during the year								-	-				
			1		1		1	<u> </u>	- 	<u> </u>			T		
34		e available for per rs?		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35	Was the vehicle	e used primarilý by	a more				-					-	-		1
	than 5% owner or r	elated person?			ļ							Ļ	<u> </u>		<u> </u>
36	_	nicle available for													
	S	Section C - Question	ons for Emp	oloye	rs Who	Prov	ide Veh	nicles	for Use	by The	eir Em	ployee	∍s		
	wer these questi	ons to determine if s or related persons	you meet ar	exce										vho ar	e not
		a written policy	statement th	at p									g, by	Yes	No
38	Do you maintain	a written policy state	ement that p	rohibit	s persor	nal use	of vehic	cles, e	except cor	nmuting,	, by yo	ur empl	-		
39		s for vehicles used by o e of vehicles by employe													
		more than five v				s, obta	ain info	 rmatio	n from	 your e	 mplovee	 s abou	t the		
-		and retain the informa													1
41	Do you meet the	requirements concern	ing qualified	autom	obile de	monstr	ation use	? (See	e instruction	ons) .					
Pa	rt VI Amortiza				,		2707 1310							<u></u>	
			(b)		1						(е)			
	(a Description		Date amortiz	ation	Am	(c) nortizable	amount	Ì	(d) Code se	ction	Amorti: perio		Amortiza	(f) ation for t	his vear
			begins	4							percer				
42	Amortization of co	osts that begins durin	g your 2012	tax y	ear (see	instruc	uons)								
								\dashv				-+			
43	Amortization of cos	sts that began before y	our 2012 tax y	ear								43			
		s in column (f) See th		•	ere to rep	ort .						44			
164													Fo	m 456	2 (2012

WEST HAWAII ASSOCIATION OF REALTORS

Description of Property

GENERAL DEPRECIATION

KONA REALTORS

PAGE 31

*Assets Retired JSA 2X9024 1 000

Current-year amortization Current-year depreciation Current-year 179 expense ACRS CRS class class 7.000 7.000 5.000 7.000 7.000 7.000 39.000 7.000 7.000 5.000 5.000 5.000 5.000 5.000 5.000 39.000 5.000 5.000 5.000 Ife Me-thod Conv Life Accumulated Accumulated amortization amortization Code SL SL 750. SL SI 275. SL 65. SL 245. SL 160. SL 231. SL 353. SL 427. SL 2,385. SL 2,529. SI 341. SL Beginning Ending Accumulated depreciation depreciation 186. 310. 415. 152. 1,458. 189. 186. 310. 160. 231. 353. 427. 750. 415. 1,458. 152. 940. 275. 245. 189. 1,171. 2,529. 341. 65. 2,385. 310. 415. 1,458. 275. 245. 160. 231. 353. 427. 750. 189. 2,529. 152. 65. 3,820. 2,385. depreciation 2,072. 348. Basis for Basis Reduction 179 exp reduction in basis 100.000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 160. 100.000 231. 100.000 100.000 100.000 100.001 100.000 100.000 2,385. 100.000 2,529. 100.000 348. 100.000 Bus % Unadjusted Cost or basis 275. 245. 353. 427. 310. 415. 152. 65. 750. 189. 186. 2,072. 1,458. 3,820. Cost or basis Date placed in service 06/01/1988 12/01/1989 01/01/1991 04/30/1996 06/24/1996 08/01/1992 02/05/1993 04/15/1994 12/11/1994 02/11/1994 06/14/1994 04/09/1998 08/11/1999 08/11/1999 01/04/2000 03/20/2001 18/31/1997 01/19/2001 01/28/2002 Date placed in service Subtotals Less Retired Assets Asset description Asset description LEASEHOLD IMPROVEM LEASEHOLD IMPROVEM **AMORTIZATION** DEPRECIATION Less: Retired Assets Listed Property SURGE PROTECTOR TELE INSTRUMENT 2 OAK BOOKCASE PAPER SHREDDER TOTALS. . . . FILE CABINETS HIGH SPEED P PHONE SYSTEM POSTAL SCALE MAIL MACHINE ELECTRIC PUN TELE HEADSET DESK/CHAIRS TOTALS. . PROJECTOR Subtotals 3-DRAWER COMPUTER TV CART PRINTER

4

99-0148021

WEST HAWALL ASSOCIATION OF REALTORS

LAPTOP

9:12:10 PM

5/31/2013 21520T 615G

V 12-4.6F

KONA REALTORS

127. 113. 35. 130 50. 43 504 504 Current-year depreciation Current-year amortization Current-year 179 expense ACRS CRS class class 3.000 3.000 36.000 3.000 5.000 5.000 5.000 99.000 5.000 5.000 5.000 3.000 5.000 Lfe Ę ŝ thod bod Accumulated Accumulated amortization amortization Code SL SL \mathbf{SI} SL SI $\mathbf{S}\mathbf{I}$ SL 1,699. SL SL 7,833. SL 500. SL 307. SL Beginning Ending
Accumulated Accumulated
depreciation depreciation 9,900. 430. 43. 1,146. 84. 2,591. 146. 99. 35,249. 35,249. 7,833. 1,146. 9,900. 5,000. 2,461. 395. 450. 180. 146. 34,745. 84. 93. 1,586. 7,111. 34,745. 7,833. 635. 5,000. 2,516. 38,057. 9,900. 2,591. 1,699. 430. 38,057. depreciation 1,146. 146. 500. 84. 99 10,892. Basis for Basis Reduction 179 exp reduction in basis 100.000 100.000 100.000 100.000 100.000 100.000 2,591. 100.000 99. 100.000 1,699. 100.000 100.000 100.000 100.000 100.000 Bus % Unadjusted Cost or basis 84. 146. 430. 500. 635. 5,000. 7,833. 2,516. 9,900. 1,146. 10,892. 38,057. 38,057 Cost or basis 11/07/2006 Date placed in 5/01/2003 06/10/1999 01/01/1994 04/27/1998 04/11/2007 11/2007 06/12/2007 7/24/2007 08/02/2010 05/01/2012 05/11/2007 7/11/2007 Date placed in service Subtotals ess Retired Assets Subtotals Asset description Description of Property Asset description GENERAL DEPRECIATION LEASEHOLD IMPROVEM **AMORTIZATION** DEPRECIATION FURNITUREGEIXTURE Less Retired Assets WEBSITE SOFTWARE WINDOWS SOFTWARE Listed Property EPSON PROJECTOR TOTALS. . . . PC ANYWHERE LEASE COST EQUI PMENT EQUIPMENT EQUI PMENT **EQUIPMENT** TOTALS. WEBSITE

PAGE 32

(Rev January 2013)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

internal Revenu				pplication for each return.		Щ			
• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box									
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)									
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868									
Electronic fi	ling (e-file).	You can electronically file Form	8868 if yo	u need a 3-month auto	omatic extension of tin	ne to	o file ((6 mon	ths for
		o file Form 990-T), or an addition							
		ension of time to file any of the							
		ssociated With Certain Persona							
		details on the electronic filing of the				ıntie:	s & No	onprofit.	<u>s</u>
		Month Extension of Time. Or							
A corporatio	n required t	o file Form 990-T and requesting	an automa	atıc 6-month extension	- check this box and co	mple	ete		_
Part I only .		. .						>	-
All other cor	porations (i	ncluding 1120-C filers), partnersh	ıps, REMIC	Cs, and trusts must use	Form 7004 to request a	n ex	tensio	n of tım	e
to file incom	e tax returns	<u> </u>			Enter filer's identify	ing n	umber,	see instr	nuctions
	Name of ex	empt organization or other filer, see in	structions		Employer identification r	numb	er (EIN	ا) or	
Type or	WEST HA	WAII ASSOCIATION OF RE	ALTORS						
print	FKA KON	A BOARD OF REALTORS			99-01480	21			
File by the	Number, sti	reet, and room or suite no. If a P.O. bo	x, see instru	ctions	Social security number (SSN			
due date for filing your	74-5620) PALANI COURT				,			
return See		or post office, state, and ZIP code For	a foreign ad	dress, see instructions	<u> </u>				
instructions	1 1	KONA, HI 96740	•						
Enter the Re		or the return that this application	s for (file a	a separate application for	or each return)		•••	L	0 1
				·····					
Application			Return	Application				Re	turn
ls For			Code	Is For				C(ode
Form 990 or	Form 990-l	Z	01	Form 990-T (corporat	tion)			7	
Form 990-Bl			02	Form 1041-A					80
Form 4720-	(individual)		03	Form 4720				c	9
Form 990-PF	•		04	Form 5227				1	10
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069				1	11
Form 990-T	(trust other	than above)	06	Form 8870				1	12
				-	-				
 The books 	s are in the	care of ► MURIEL BOOT							
Talanhaas	. Na. N	200 220-2701		-AVN 000 220	1766				
		308 329-3791	_	FAX No ▶ 808 329				_	
		es not have an office or place of b						P	ـــا ٬
		eturn, enter the organization's fou	-		· ———	т		this is	
				irt of the group, check t	this box	ш	and a	attach	
		EINs of all members the extensi							
•		atic 3-month (6 months for a corp		•	•				
until		08/15_, 20_13, to file the e	exempt org	janization return for the	e organization named a	yoqr	e The	extensi	ion is
	-	n's return for.							
		ar 20 <u>12</u> or							
▶∐	tax year beg	ginning	, 20	, and ending	 ,	, 20			
					<u> </u>				
	•	red in line 1 is for less than 12 mi	onths, chec	k reason: [] Initial re	eturn 💹 Fınal retui	rn			
[] CI	nange in ac	counting period							
	·						,		
		is for Form 990-BL, 990-PF, 99	0-T, 4720	, or 6069, enter the	tentative tax, less any		1.		
		lits See instructions				3a	\$		
		ıs for Form 990-PF, 990-T,		•		1			
estimat	ed tax paym	ents made. Include any prior year	overpaym	ent allowed as a credit	•	3b	\$		
c Balance	due. Subtr	act line 3b from line 3a Include y	our paym	ent with this form, if re	quired, by using EFTPS	; [
(Electro	nic Federal	Tax Payment System) See instruc	tions			3с	\$		
Caution. If you	are going to	make an electronic fund withdrawal	with this Fo	orm 8868, see Form 8453-	EO and Form 8879-EO fo	or pa	yment	ınstruct	ions
For Privacy A	t and Paper	work Reduction Act Notice, see Instru	uctions.			Fon	m 886	8 (Rev	1-2013)