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DLN: 93493229026445

Form 990

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

► Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		<b>2013 ca</b> applicable	C Name of organization MINNESOTA ASSOCIATION OF REALT	· · · · · ·	-30-2014	D Employ	er ident	ification number
	dress c		MINNESOTA ASSOCIATION OF REALI	UNJ		41-60	39154	
— Na	me cha	ange	Doing Business As					
_	ial retu			ail is not delivered to street address) Room,	'suite	E Telephor	ne numbe	:r
	mınate		5750 LINCOLN DRIVE			(612)	12-26	64
		return	City or town, state or province, coun EDINA, MN 55436	try, and ZIP or foreign postal code		, ,		
Ap	olicatio	n pending				<b>G</b> Gross re		
			<b>F</b> Name and address of prin CHRISTOPHER GALLER	cipal officer	H(a)	Is this a group is subordinates?	eturn fo	or □ Yes 🔽 No
			5750 LINCOLN DRIVE			subordinates.		
			EDINA,MN 55436		H(b)	Are all subordin included?	ates	│ Yes │ No
г Та	x-exer	npt status	501(c)(3)  501(c)(6)  (4)	insert no ) 4947(a)(1) or 527			alıst (s	ee instructions)
	ebsit	e:► W	WW MNREALTOR COM		H(c)	Group exemption	on numt	oer <b>⊳</b> -
	m of o	ra a nizatio	n ✓ Corporation ☐ Trust ☐ Association	Othor In		ar of formation 194		ate of legal domicile
		rganizatio	T P Corporation   Trust   Association	T) Other F	Litea	ar or formation 194	MN	ate or legal dofficile
Pa	rt I	Sun	nmary					
			describe the organization's missio	n or most significant activities JRCE FOR REAL ESTATE INFORMA	TION AN	D DDO EECSION	IAI CEI	OVICES
		IU SER	VE AS MEMBERS FIRST RESUL	TRUE FOR REAL ESTATE INFORMA	TION AN	DPROFESSION	IAL SEI	RVICES
ACUVIUES & GOVERNANCE	I			ng body (Part VI, line 1a) of the governing body (Part VI, line 1			3 4	5
	5	Total nu	ımber of ındıvıduals employed ın o	alendar year 2013 (Part V, line 2a)		[	5	1
ទ្				ecessary)			6	350
	I			art VIII, column (C), line 12 om Form 990-T, line 34		-	7a   7b	10,480
	B	Net um	erated business taxable income in	om Form 990-1, me 34	<del></del>	Prior Year	76	Current Year
	8	Conti	ributions and grants (Part VIII, lir	ne 1h)			0	Carrent Tear
E E	9			ne 2g)		2,840,7	77	3,212,665
Ravenue	10		· ·	(A), lines 3, 4, and 7d)		39,8	75	19,539
_	11			lines 5, 6d, 8c, 9c, 10c, and 11e)		172,5	74	54,562
	12		revenue—add lines 8 through 11	(must equal Part VIII, column (A), I	ine	3,053,2	26	3,286,766
	13			IX, column (A), lines 1-3)		37,0	00	253,220
	14			X, column (A), line 4)			0	C
83	15	Salar 5-10		e benefits (Part IX, column (A), line	5	1,435,0	6 5	1,438,052
Expenses	16a			column (A), line 11e)			0	C
ਡੌ	ь	Total f	undraising expenses (Part IX, column (D)	, line 25) ▶ <u>0</u>				
_	17			ines 11a-11d, 11f-24e)		1,747,1		1,544,995
	18			st equal Part IX, column (A), line 25		3,219,1	_	3,236,267
₩ 97	19	Reve	nue less expenses. Subtract line .	18 from line 12		-165,9- inning of Curren		50,499
900 900 900 900 900 900 900 900 900 900						Year	_	End of Year
Net Assets or Fund Balances	20		assets (Part X, line 16)		·	4,970,5		5,009,372
2 E	21		liabilities (Part X, line 26)	ine 21 from line 20	·	4,768,6	_	190,757
	22 11   1		nature Block	line 21 from line 20	•	4,768,6	94	4,818,615
ny k brepa Sigr	nowle arer h	as any k	belief, it is true, correct, and com nowledge *** ature of officer	mined this return, including accompiplete Declaration of preparer (other				
Her	C		ISTOPHER GALLER CHIEF EXECUTIVE OF e or print name and title	FICER				
		1	Print/Type preparer's name	Preparer's signature	Date	I CHECK I II I	PTIN	
Paid	d		JOHN TAUER Firm's name  CLIFTONLARSONALLEN	 		self-employed Firm's EIN > 41-	P002940 0746749	
	pare	er						
Use	On	ılv	Firm's address 🟲 220 SOUTH SIXTH STRE	ET SUITE 300		Phone no (612)	376-450	0

MINNEAPOLIS, MN 55402

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes No

4e Total program service expenses ►

art IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		Νo
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	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	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? <i>If "Yes," complete Schedule D, Part I</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? If "Yes," complete Schedule D, Part II	7		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 😼	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 $IV^{\square}$	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			
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	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		No
	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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	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		No
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 "Yes," complete Schedule G, Part II</i>	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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
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 or other assistance to any domestic organization or government 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 or 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? <i>If "Yes," complete Schedule J.</i>	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 25a	24a		No
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		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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? <i>If "Yes," complete Schedule L, Part III</i>	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		1	
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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? <i>If "Yes," complete Schedule M</i>	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? <i>If "Yes," complete Schedule N, Part II</i>	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		No
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	<b>Section 501(c)(3) organizations.</b> 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		
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	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Par	Statements Regarding Other 1RS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	•	Yes	. l No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   21		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			
•	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			
b	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	
2-		2-	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30	165	
-ru	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	We also a second to the second to be a second to the secon	F-		NI -
	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		Νo
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νο
	organization solicit any contributions that were not tax deductible as charitable contributions?  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).			
	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		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	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		
h	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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Part VI 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.

36	ction A. Governing Body and Hanagement			
			Yes	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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b		
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b	Yes	
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c	Yes Yes Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did 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 interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did 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 interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 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 approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did 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 interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 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 approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did 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 interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 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 approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did 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 interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 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 approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  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 arrangement with a taxable entity during the year?  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	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did 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 interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 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 approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  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 participatine in a joint venture or similar arrangement with a taxable entity during the year?  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?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	

Own website Another's website Upon request Other (explain in Schedule O)

19. Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict

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 ►THOM FOX 5750 LINCOLN DRIVE EDINA, MN 55436 (612) 912-2664

Form 990	(2013)	
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г	a	ч	_	•

#### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII . . . . . .

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, 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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an d r/tru	heck sofficer (stee) Highest compensated	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

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

	(A) Name and Title	(B) Average hours per week (list any hours	more t	han on is	one both	box, an d	heck unless officer stee)	3	(I Repor comper from organiza	table nsation the tion (W-	<b>(E)</b> Reportable compensation from related organizations (W	/-	(F) Estima amount o compens from t	ted f other ation he
		for related organizations below dotted line)	Individual trustie or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		organizati relate organiza	ed
												_		
												+		
												+		
												1		
												+		
												+		
1b	Sub-Total				•			•						
c d	Total from continuation sheet  Total (add lines 1b and 1c) .					٠.	•	•		381,868		0		95,190
2	Total number of individuals (in \$100,000 of reportable compa						d abov	e) w	ho receive	d more th	an			
	\$100,000 of reportable compo	ensation from th	e organ	ızatı	)   F-2									
3	Did the organization list any <b>f</b> o	<b>ormer</b> officer, dii	ector o	r trus	tee	, key	emplo	yee,	, or highes	t compen	sated employee		Yes	No
	on line 1a? If "Yes," complete S	Schedule J for suc	ch indivi	dual	•	•		•				3		No
4	For any individual listed on lin organization and related organ individual													
5	Did any person listed on line 1	a receive or acc	rue cor	npen	• satı	• on fr	om an	• y unr	related org	· · · janization	or individual for	4	Yes	
	services rendered to the organ	nization? <i>If "Yes</i>	," compl	ete S	chea	lule J	forsu	ch pe	erson .			5		No
Se	ection B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization												tax year	
		(A) lame and business						•			(B) cription of services		(C Comper	)
	CA NW 7958 PO BOX 1450 MINNEAPOL		ICTON M	U EE43	) <b>1</b>					HEALTH IN				201,245
INUM	SEN & NYBECK PA 3600 AMERICAN BL	-AD AN 400 DEOOMIN	IM MUTOT	v 5543	, 1					MOOUCIAI I	ON ATTORNEY	$\exists$		183,140
												_		
	Total number of independent co \$100,000 of compensation fror			not	lımıt	ed to	thos	e list	ted above)	who rece	ıved more than			

art V.	***	Check if Schedi	o <b>r Revenue</b> ule O contains a respoi	nse or note to any lir	ne in this Part VIII			
	12				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512-514
ខ្ទ	1a	Federated cam						
ons, Gifts, Grants Similar Amounts	b	Membership du	es <b>1b</b>					
5 <u>ĕ</u>	c	Fundraising eve	ents <b>1c</b>					
£ ₹	d	Related organiz	rations 1d					
5 ≝	e	Government grant	s (contributions) <b>1e</b>					
Sir		_						
<u> </u>	f	similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above					
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contribute	ons included in lines			İ		
Sont and	h	•	s 1a-1f					
ة ت		Total: Add lille:		· · · •				
e l	_		_	Business Code				
Program Serwce Revenue	2a	MEMBERSHIP DUE		900099	2,915,156	2,915,156		
æ	b	EDUCATION/SERV	ICES	900099	161,631	161,631		
ASP	С	SPONSORSHIPS		900099	81,500	81,500		
<u> </u>	d	LEGISLATIVE		900099	32,921	32,921		
Ē	е	MEETINGS		900099	21,457	21,457		
Σ Ε	f	All other progra	am service revenue					
<u>*</u>	g	Total. Add lines	s 2a – 2f		3,212,665			
	3	Investment inc	ome (ıncludıng dıvıden	ds, interest,				50.20
			aramounts)	l l	50,207			50,20
	4		stment of tax-exempt bond	· · · · · · · · · · · · · · · · · · ·	5,854			5,85
	5	Royalties	(1) Pool	(II) Personal	3,034			3,03
	6a	Gross rents	(ı) Real	(II) Personal				
	b	Less rental						
	_	expenses Rental income						
	С	or (loss)						
	d	Net rental inco	me or (loss)	,				
	7a	Gross amount	(ı) Securities	(II) Other				
	74	from sales of assets other than inventory	4,227,662					
	b	Less cost or other basis and	4,258,330					
	c	sales expenses Gaın or (loss)	-30,668					
	d	Net gain or (los			-30,668			-30,66
		Gross income f		· · · · · · · ·	·			·
Other Kevenue		events (not inc \$	 s reported on line 1c)					
<u> </u>	b	Less direct ex	penses b					
5			(loss) from fundraising					
	9a		rom gaming activities ie 19					
	ь	Less direct ex	penses <b>b</b>					
			(loss) from gamıng actı			İ		
		Gross sales of	ınventory, less	-				
		returns and allo		151,986				
	<b>L</b>	Loop cast of	a and sold b	·				
	b	<del>-</del>	oods sold <b>b</b> (loss) from sales of inv	141,506 entory <b>.</b>	10,480		10,480	
}		Miscellaneous		Business Code	10,100		20,100	
-	11a	OTHER INCOM		900099	38,228			38,22
	b	STILK INCOM			·			<u> </u>
	c							
	d	All other reven	ue					
	e		s 11a-11d	🕨				
				_	38,228			
- 1	12	iotai revenue.	See Instructions .	►	3 286 766	3 212 665	10 480	63.62

# Part IX Statement of Functional Expenses

	section 501(c)(3) and 501(c)(4) o	rganizations must complete all columns	All other organizations must complete column (A	()
--	-----------------------------------	--	---	----

Jecti	31 301(c)(3) and 301(c)(4) organizations indst complete an columns An				
	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	ot include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	253,220			
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	385,273			
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	743,934			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	51,726			
9	Other employee benefits	172,819			
10	Payroll taxes	84,300			
11	Fees for services (non-employees)				
а	Management	175,398			
ь	Legal	72,234			
c	Accounting	31,930			
d	Lobbying	82,500			
e	Professional fundraising services See Part IV, line 17	12,555			
f	Investment management fees				
a	Other (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Schedule O)	120,739			
12	Advertising and promotion	54,300			
13	Office expenses	136,092			
14	Information technology	89,067			
15	Royalties				
16	Occupancy	28,809			
17	Travel	215,516			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	125,307			
20	Interest	3,297			-
21	Payments to affiliates				_
22	Depreciation, depletion, and amortization	95,203			-
23	Insurance	16,487			
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	RMLS NEIGHBORHOOD CITY	100,000			
b	LEGAL HELPLINE	91,827			
c	ISSUES MOBIL FUND	46,177			
d					
e	All other expenses	60,112			
25	Total functional expenses. Add lines 1 through 24e	3,236,267			-
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)				

Form 990 (2013)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in t	this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		444,127	1	624,726
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		65,116	4	114,821
4ssets	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees. Complete Paschedule L	art II of		5	
	6	Loans and other receivables from other disqualified persons (a: 4958(f)(1)), persons described in section 4958(c)(3)(B), and and sponsoring organizations of section 501(c)(9) voluntary erorganizations (see instructions) Complete Part II of Schedule	contributing employers mployees' beneficiary		6	
<u>%</u>	7	Notes and loans receivable, net			7	
₹	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		59,670	9	19,958
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1 1			
	ь	Less accumulated depreciation	<b>10b</b> 991,412	624,584	10c	554,121
	11	Investments—publicly traded securities		3,777,058	11	3,695,746
	12	Investments—other securities See Part IV, line 11			12	· · ·
	13	Investments—program-related See Part IV, line 11			13	_
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34).		4,970,555	16	5,009,372
	17	Accounts payable and accrued expenses		152,241		134,473
	18	Grants payable		102,211	18	104,470
	19	Deferred revenue		9,570	19	27,070
	20	Tax-exempt bond liabilities		0,070	20	27,070
	21	Escrow or custodial account liability Complete Part IV of Sche			21	
lities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqualit	ors, trustees,		21	
Liabili		persons Complete Part II of Schedule L			22	
Ï	23	Secured mortgages and notes payable to unrelated third partie		40,050	23	29,214
	24				24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Pa	rt X of Schedule		25	
	]	D		201,861	25	190,757
	26	Total liabilities. Add lines 17 through 25		201,801	26	190,757
ν Φ		lines 27 through 29, and lines 33 and 34.	✓ and complete			
Š	27	Unrestricted net assets		4,768,694	27	4,818,615
<u>≅</u>	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets		29		
Assets of Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	ere ► ┌ and			
ō .a	30	Capital stock or trust principal, or current funds			30	
Ą.	31	Paid-in or capital surplus, or land, building or equipment fund			31	
S S	32	Retained earnings, endowment, accumulated income, or other f			32	
Zet Zet	33	Total net assets or fund balances		4,768,694	33	4,818,615
Ź	34	Total liabilities and net assets/fund balances		4 970 555		5 009 372

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,2	286,766
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,2	236,267
3	Revenue less expenses Subtract line 2 from line 1	3			50,499
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,7	68,694
5	Net unrealized gains (losses) on investments	5			-578
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			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		4,8	318,615
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. ┌
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed 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 sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				1
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of tl	ne <b>2c</b>		No
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
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		3b		

Software ID: **Software Version:** 

**EIN:** 41-6039154

Name: MINNESOTA ASSOCIATION OF REALTORS

Form 990, Part VII - Compensation Compensated Employees, and Inde	of Officers,	Direct	ors,	Tru	ste	es, k	(ey	Employees, Higl	nest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (i nan o n is b	ne b oth ctor/	ox, u an of trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-1413C)	2/1099-14130)	related organizations
RODNEY HELM	1 00	×		х				0	0	0
PRESIDENT LEONARD SARVELA	1 00									
TREASURER	1 00	Х		Х				0	0	0
JOHN SMABY	1 00	х		Х				0	0	0
PRESIDENT-ELECT  JAMES CORMIER	1 00									
PAST-PRESIDENT	1 00	×		Х				0	0	0
JOHN ANDERSON	1 00	х						13,960	0	0
DIRECTOR BRIAN BEERMANN	1 00							,		
DIRECTOR	1 00	х						0	0	o
CONNIE BOSSARD	1 00	х						0	0	0
DIRECTOR BRAD BOYD	1 00									
DIRECTOR	1 00	×						0	0	0
DARYL BRAHAM	1 00								0	
DIRECTOR	1 00	X						0	0	0
CHERYL BRELLENTHIN	1 00	x						0	0	0
DIRECTOR ERIC BROWNLOW	1 00									
DIRECTOR	1 00	Х						0	0	0
JEFFREY BYRD	1 00	×						0	0	o
DIRECTOR MARK CHRISTOPHERSON	1 00									
DIRECTOR	1 00	X						0	0	0
CHRISTINE CULBERT	1 00	х						0	0	0
DIRECTOR JENNIFER CUTTER	1 00									
DIRECTOR	1 00	×						0	0	0
FRAN DAVIS	1 00	х						0	0	0
DIRECTOR ROBERT A DAY	1 00							Ŭ	0	
DIRECTOR	1 00	x						0	0	0
STEVEN DOCK	1 00									
DIRECTOR	1 00	×						0	0	0
CORY EHLERT	1 00	x						0	0	0
DIRECTOR PHETSAMONE EKHOLM	1 00									
DIRECTOR	1 00	Х						0	0	0
PATRICIA FITZPATRICK	1 00	×						0	0	0
DIRECTOR NANCY FLICEK	1 00									
DIRECTOR	1 00	х						0	0	0
TRACIE FOGELSON	1 00	х						0	0	0
DIRECTOR LYNN FOULKE	1 00 1 00									
DIRECTOR	1 00	×						0	0	0
JACKELINE FUNK	1 00	x						0	0	0
DIRECTOR	1 00									<u> </u>

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			( <b>D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the			
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
EMILY GREEN	1 00	x						0	0	0
DIRECTOR DEBRA GREENE	1 00									
DIRECTOR	1 00	X						0	0	0
RUTH ANN HALVORSON	1 00							0	0	0
DIRECTOR	1 00	X						0	0	0
RYAN HANSON	1 00	X						0	0	0
DIRECTOR DAVE HARRIS	1 00 1 00									
DIRECTOR		х						0	0	0
CARI HEIBEL	1 00 1 00									_
DIRECTOR	1 00	X						0	0	0
ALBERT HEPP	1 00	х						0	0	0
DIRECTOR	1 00							Ů	Ů	
JANHETTWER-DUMMER	1 00	x						0	0	0
DIRECTOR SHEILA HOLLEY	1 00 1 00									
DIRECTOR	1 00	Х						0	0	0
MELISSA HOOVER	1 00									0
DIRECTOR	1 00	Х						0	0	0
MICHAEL HUNSTAD	1 00	x						0	0	0
DIRECTOR MAN HUYNH	1 00 1 00									
DIRECTOR		х						0	0	0
LORRAYNE INGRAM	1 00 1 00									
DIRECTOR	1 00	Х						0	0	0
ED KAISER	1 00	x						0	0	0
DIRECTOR	1 00							,		
KEVIN KNUDSEN	1 00	x						0	0	0
DIRECTOR ERIC KODNER	1 00									
DIRECTOR	1 00	х						0	0	0
DAVID LANPHER	1 00	х						0	0	0
DIRECTOR	1 00								0	
JOHNNY LEE	1 00	×						0	0	0
DIRECTOR MARY LINDGREN	1 00 1 00									
DIRECTOR	1 00	х						0	0	0
SHANNON LINDSTROM	1 00									
DIRECTOR	1 00	Х						0	0	0
KAREN LITTLEJOHN	1 00	x						0	0	0
DIRECTOR MICHELLE LYONS	1 00									
DIRECTOR	1 00	x						0	0	0
ERIC MALMBERG	1 00 1 00	-								
DIRECTOR	1 00	X						0	0	0
GREG MASON	1 00	×						0	0	0
DIRECTOR	1 00	<u> </u>						ı .	Ŭ.	
MARK MASON	1 00	x						0	0	0
DIRECTOR	1 00									

(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(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				
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	, , ,	, ,	related organizations
NENE MATEY KEKE	1 00					ř				
DIRECTOR	1 00	Х						0	0	0
DENNIS MATHIS	1 00	х						0	0	0
DIRECTOR ANTHONY MAURER	1 00							_	_	
DIRECTOR	1 00	Х						0	0	0
DAVID MAY	1 00	x						0	0	0
DIRECTOR JANE O'LEARY	1 00									
DIRECTOR	1 00	Х						0	0	0
PATRICK PAULSON	1 00	х						0	0	0
DIRECTOR MICHAEL PELLER	1 00	x						0	0	0
DIRECTOR	1 00							0	0	
TRAVIS PELTIER DIRECTOR	1 00	х						0	0	0
ROBIN PETERSON	1 00	.,								
DIRECTOR	1 00	Х						0	0	0
ANGELO POALETTI	1 00	х						0	0	0
DIRECTOR RUSSELL PORTELE	1 00							_	_	
DIRECTOR	1 00	Х						0	0	0
THOMAS REHMAN	1 00	х						0	0	0
DIRECTOR JOSEPH REIS JR	1 00									
DIRECTOR	1 00	Х						0	0	0
AUDREY RICHARDSON	1 00	x						0	0	0
DIRECTOR DEBRA RICHMOND-JOHNSON	1 00									
DIRECTOR	1 00	Х						0	0	0
DUANE SAUKE	1 00	х						0	0	0
DIRECTOR BRIDGET SCHMIDT	1 00									
DIRECTOR	1 00	х						0	0	0
REBECCA SELLNOW	1 00	х						0	0	0
DIRECTOR TODD SHIPMAN	1 00									
DIRECTOR	1 00	х						0	0	0
TRENTON SIMON	1 00	х						0	0	0
DIRECTOR THOMAS SUPPORTS	1 00							Ů	0	
THOMAS SLUPSKE	1 00	х						0	0	0
DIRECTOR RON SPANGLER	1 00							_	_	
DIRECTOR	1 00	Х						0	0	0
STEPHEN STEWART	1 00	х						0	0	0
DIRECTOR JERRY TEESON	1 00									
DIRECTOR	1 00	Х						0	0	0
GERI THEIS	1 00	×						0	0	0
DIRECTOR	1 00									

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

( <b>A</b> ) Name and Title	(B) A verage hours per week (list any hours	more than one box, unless person is both an officer and a director/trustee)				( <b>D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the		
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
RICHARD TUCKER	1 00	х						0	0	0
DIRECTOR	1 00									
KARLA VAN EMAN	1 00	×						0	0	0
DIRECTOR	1 00	^								
THOMAS VANCE	1 00	х						0	0	0
DIRECTOR	1 00									
CASSANDRA WESLEY	1 00	×						0	0	0
DIRECTOR	1 00									
KANADA YAZBEK	1 00	x						0	0	0
DIRECTOR	1 00									
PATRICIA ZUZEK	1 00	×						0	0	0
DIRECTOR	1 00									
CHRISTOPHER GALLER	60 00	×		Х				176,283	0	35,070
CHIEF EXECUTIVE OFFICER	1 00							·		
SUSAN DIOURY	60 00			х				84,858	0	32,246
SENIOR VICE PRESIDENT	0 00									
LINDA MODLINSKI	60 00			х				106,767	0	27,874
FORMER SENIOR VICE PRESIDENT	0 00									

DLN: 93493229026445

**Employer identification number** 

### OMB No 1545-0047

#### **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

# **Political Campaign and Lobbying Activities**

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. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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

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

- ◆ 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

MTL	NNESOTA ASSOCIATION OF REALFORS			41 6030154		
Par	t I-A Complete if the or	ganization is exempt under	section 501(	41-6039154 c) or is a section 527		on.
1		ganızatıon's dırect and ındırect politi	-	<del>_</del>		
2	Political expenditures	<b>y</b>		<b></b>	\$	80,000
3	Volunteer hours				т	0
		ganization is exempt under	_			
1	,	e tax incurred by the organization un			\$	
2	•	e tax incurred by organization manag		n 4955 ►	\$	
3		section 4955 tax, did it file Form 472	20 for this year?		☐ Yes	_
4a	Was a correction made?				Yes	No
b	If "Yes," describe in Part IV			->	04(-)(0)	
		ganization is exempt under	_		01(c)(3).	
1		ended by the filing organization for se		•	\$	
2	Enter the amount of the filing of exempt function activities	s for section 527	\$	80,000		
3	Total exempt function expendi	20-POI line 17h ►				
		10 1 0 L, IIIIC 17 B	\$	80,000 <b>No</b>		
4 5	Did the filing organization file I	- <b>orm 1120-POL</b> for this year? nd employer identification number (E			✓ Yes	,
	amount of political contribution	For each organization listed, enter thest received that were promptly and of political action committee (PAC) If	lirectly delivered	to a separate political org	anızatıon, such	
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount contribution and promption directly delicated organization enter	s received otly and vered to a political of the political
					-	

Cat No 50084S

Schedule C (Form 990 or 990-EZ) 2013

Sch	hedule C (Form 990 or 990-EZ) 2013					Page <b>2</b>
P	art II-A Complete if the organization	is exempt under	section 501(	c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Donk IV an			a adduses FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		list in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		ol" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l.)		(a) Filing organization's totals	( <b>b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount to	from 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 lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	e excess over \$1,000	,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
		1.6				
_	Grassroots nontaxable amount (enter 25% of lir	•				
	Subtract line 1g from line 1a If zero or less, ent			_		1
	Subtract line 1f from line 1c If zero or less, ente			L		1
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	have to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

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

Grassroots lobbying expenditures

<b></b>		de la la la la la la la la la la la la la	( a	a)	) (b)	
	each res response to lines la through l vity.	11 below, provide in Part IV a detailed description of the lobbying	Yes	No	Amo	unt
1 a		zation attempt to influence foreign, national, state or local influence public opinion on a legislative matter or referendum,				
b	Paid staff or management (include co	ompensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?					
d	Mailings to members, legislators, or	the public?				
е	Publications, or published or broadca	ast statements?				
f	Grants to other organizations for lob	bying purposes?				
g	Direct contact with legislators, their	staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, c	conventions, speeches, lectures, or any similar means?				
i	O ther activities?					
j	Total Add lines 1c through 1i					
2a		e organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax	x incurred under section 4912				
C		x incurred by organization managers under section 4912				
d	If the filing organization incurred a s	ection 4912 tax, did it file Form 4720 for this year?				
Pa	rt III-A Complete if the orga 501(c)(6).	inization is exempt under section 501(c)(4), section 5	501(c)	)(5), o	r secti	ion
				_	Ye	
1		e) dues received nondeductible by members?			1	No
2	- · · · · · · · · · · · · · · · · · · ·	ouse lobbying expenditures of \$2,000 or less?			2	No
3		over lobbying and political expenditures from the prior year?			3	No
Pa		nization is exempt under section 501(c)(4), section 5 ner (a) BOTH Part III-A, lines 1 and 2, are answered " 'Yes."				
1	Dues, assessments and similar amo		1		2,9	99,98
2	Section 162(e) nondeductible lobby expenses for which the section 527(	ing and political expenditures (do not include amounts of political f) tax was paid).			,	
a	Current year		2a			571,32
Ь	Carryover from last year		2b			L93,349
C	Total	6000/ 1/41/41	2c			364,67
3		on 6033(e)(1)(A) notices of nondeductible section 162(e) dues on line 2c exceeds the amount on line 3, what portion of the excess	3		/	765,87
4	does the organization agree to carry political expenditure next year?	4			98,79	
5	Taxable amount of lobbying and polit	tical expenditures (see instructions)	5			
Ρ	art IV Supplemental Inform	nation				
	ovide the descriptions required for Par rt II-B, line 1 Also, complete this part	t l-A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated grou for any additional information	ıp lıst),	Part II	-A, line	2, and
	Return Reference	Explanation				

PARI I-A, LINE I	THE ASSOCIATION MADE A CONTRIBUTION TO MINNESOTA HOMEOWNERS ALLIANCE, INC.,
	A RELATED ORGANIZATION, FOR DIRECT POLITICAL EXPENDITURES
	Schodulo C (Form 900 or 900-E7) 2013

201104410 0 (101111 330 01 330 12) 2013		r age -			
Part IV Supplemental Information	on <i>(continued)</i>				
Return Reference	Explanation				
l					

Schedule D (Form 990) 2013

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

#### DLN: 93493229026445

OMB No 1545-0047

**SCHEDULE D** 

(Form 990)

Department of the Treasury

# **Supplemental Financial Statements**

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

Open to Public

al Revenue Service	uctions is at <u>www.irs.gov/roriii990</u> .	Ins	pection
ame of the organization NNESOTA ASSOCIATION OF REALTORS		Employer identification n	umber
MRESOTA ASSOCIATION OF REALPORS		41-6039154	
art I Organizations Maintaining Donor A		unds or Accounts. Cor	nplete if the
organization answered "Yes" to Form 9		405	
Tabel number at and afterna	(a) Donor advised funds	(b) Funds and other a	eccounts
Total number at end of year			
Aggregate contributions to (during year)  Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor adv	Lucerous writing that the accets held in don	or advised	
funds are the organization's property, subject to the	e organization's exclusive legal control?	۲۰	res ∏No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the be conferring impermissible private benefit?			fes
rt II Conservation Easements. Complete	e if the organization answered "Yes" t	o Form 990, Part IV, line	7.
Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreated Protection of natural habitat  Preservation of open space  Complete lines 2a through 2d if the organization held purpose in the land of the organization held.	ion or education)	n historically important land certified historic structure the form of a conservation	area
easement on the last day of the tax year			
		Held at the End o	f the Year
Total number of conservation easements		2a	
Total acreage restricted by conservation easement		2b	
Number of conservation easements on a certified hi	` '	2c	
Number of conservation easements included in (c) a historic structure listed in the National Register		2d	
Number of conservation easements modified, transf	rerred, released, extinguished, or terminate	ed by the organization during	
Number of states where property subject to conserv	vation easement is located 🛌		
Does the organization have a written policy regarding enforcement of the conservation easements it holds			∕es
Staff and volunteer hours devoted to monitoring, ins	specting, and enforcing conservation easer	ments during the year	
A mount of expenses incurred in monitoring, inspect  \$\blue{1}\$	ting, and enforcing conservation easement	s during the year	
Does each conservation easement reported on line and section 170(h)(4)(B)(II)?	2(d) above satisfy the requirements of sec	ction 170(h)(4)(B)(i)	fes ┌ No
In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	f the footnote to the organization's financia		
Organizations Maintaining Collection Complete if the organization answered	ons of Art, Historical Treasures,	or Other Similar Asse	ts.
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar as service, provide, in Part XIII, the text of the footnot	ssets held for public exhibition, education,	or research in furtherance o	
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar as service, provide the following amounts relating to the	S 116 (ASC 958), to report in its revenue ssets held for public exhibition, education,	statement and balance shee	
(i) Revenues included in Form 990, Part VIII, line	1	<b>-</b> \$	
(ii) Assets included in Form 990, Part X		► \$	
If the organization received or held works of art, his following amounts required to be reported under SFA		or financial gain, provide the	
Revenues included in Form 990, Part VIII, line 1	, , , , , , , , , , , , , , , , , , , ,		
Assets included in Form 990, Part X		<b>►</b> \$	

b Buildings       822,597       474,382       348,215         c Leasehold improvements       34,907       34,907       0         d Equipment       198,329       136,252       62,077         e Other       388,113       345,871       42,242	Part	Organizations Maintaining Collections of Art, His	tor	ica	al Treasu	res, or Ot	the	<u>r Similar Asse</u>	ts (co.	ntınued)
b   Scholarly research   c   Other      Prevetar additional of the organization's collections and explain how they further the organization's exempt purpose in Part XIII	3	- · · · · · · · · · · · · · · · · · · ·	neck	ar	ny of the follo	owing that a	re a	significant use of	ıts	
to Preservation for future generations  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII  5 During the year, did the organization's collection of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	а	Public exhibition d	Γ	I	Loan or exch	nange progra	ams			
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII    During the year, did the organization solicit or neceive denations of art, historical treasures or other cimilar seates to be sold to raise funds rether than to be mointained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.    Is the organization an agent, furtise, custodian or other intermediary for continuous or other assets not included on Form 990, Part X?    Is the organization an agent, furtise, custodian or other intermediary for continuous or other assets not included on Form 990, Part X?    Is the organization and intermediary the continuous of the passes of the following table   If Yes, explain the arrangement in Part XIII and complete the following table   Is the organization include an amount on Form 990, Part X, line 21?    Is the organization include an amount on Form 990, Part X, line 21?   Yes   No	b	Scholarly research <b>e</b>	Γ	(	Other					
Part XIII	C	Preservation for future generations								
sets to be sold to raise funds rather than to be maintained as part of the organization's collection?	4		w the	y	further the o	rganızatıon'	s ex	empt purpose ın		
Secrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.    Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIII and complete the following table   Is   Is   Is   Is   Is   Is   Is   I	5								Voc	⊏ No
This is the regardation an agent, trustee, custom an agent, trustee, custom an agent, trustee, custom an agent, trustee, custom an agent, trustee, custom an agent, trustee, custom an agent, trustee, custom an agent, trustee, custom an agent, trustee, custom and solve are also as a support of the custom and trustee, custom	Par	t IV Escrow and Custodial Arrangements. Complete if	the	0	rganızatıor			<u> </u>		110
Para		Is the organization an agent, trustee, custodian or other intermediary				or other asse	ets r			
Add   Add	h		wina	tal	hle			1	Yes	No
Mathematical paragrams   Mathematical parag		11 Tes, explain the diffully mental and will and complete the follow	wiiig	cui	DIC .			Amou	nt	
Mathematical paragrams   Mathematical parag	c	Beginning balance					1c			
## Ending balance ## If ## In the organization include an amount on Form 990, Part X, line 212	d						1d			
1 bring balance  1 bri	e	Distributions during the year					1e			
2a   Did the organization include an amount on Form 990, Part X, line 21?   Tyes   No	f						1f			
Part   V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.   C   Contributions	2a	-	,			_		Γ,	Yes	
Part   V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.   C   Contributions	b	If "Ves " explain the arrangement in Part XIII Check here if the expl	anat	ıor	hac haan n	rovided in D	art '	YTTT		
	Pai								<u> </u>	
b Contributions									Four ye	ars back
to Net investment earnings, gains, and losses  d Grants or scholarships	1a	Beginning of year balance								
d Grants or scholarships	b	Contributions								
e Other expenditures for facilities and programs	С	Net investment earnings, gains, and losses								
and programs	d	Grants or scholarships								
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as  a Board designated or quasi-endowment ▶  b Permanent endowment ▶  The percentages in lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	e									
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as  Board designated or quasi-endowment ▶  C Temporarily restricted endowment ▶  The percentages in lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	f	Administrative expenses								
Board designated or quasi-endowment ▶  by Permanent endowment ▶  c Temporarily restricted endowment ▶  The percentages in lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by	g	End of year balance								
Temporarily restricted endowment ►  Temporarily restricted endowment F  The percentages in lines 2a, 2b, and 2c should equal 100%  Are there endowment funds not in the possession of the organization that are held and administered for the organization by	2	Provide the estimated percentage of the current year end balance (lin	ne 1g	ı, c	:olumn (a)) h	neld as				
Temporarily restricted endowment here represents ages in lines 2a, 2b, and 2c should equal 100%  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations (ii) related organizations  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line  11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  Buildings  Description of property  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value depreciation  (d) Book value  34,907  34,907  34,907  40  Equipment  Description of groperty  (a) Equipment  Buildings  Buil	а	Board designated or quasi-endowment ►								
The percentages in lines 2a, 2b, and 2c should equal 100%  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations  (ii) related organizations  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  If "Yes" to 3a(ii),	b	Permanent endowment ▶								
Vision   Vision	С	• •								
(i) unrelated organizations	3a	·	that	ar	e held and a	dmınıstered	for	the		
(ii) related organizations								2-/:>	Yes	No
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? 3b    Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property							•			
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  Land  L	ь		Sche	• du	le R?		•			
11a. See Form 990, Part X, line 10.           Ca) Cost or other basis (investment)         (b) Cost or other basis (other)         (c) Accumulated depreciation         (d) Book value           1a         Land         101,587         101,587         101,587           b         Buildings         822,597         474,382         348,215           c         Leasehold improvements         34,907         34,907         30           d         Equipment         198,329         136,252         62,077           e         Other         388,113         345,871         42,242	_					-				
Land	Par		rgai	ΊZ	ation answ	ered 'Yes'	to	Form 990, Part	IV, lır	ie
b Buildings       822,597       474,382       348,215         c Leasehold improvements       34,907       34,907       0         d Equipment       198,329       136,252       62,077         e Other       388,113       345,871       42,242									( <b>d</b> ) Bo	ok value
c Leasehold improvements       34,907       34,907       0         d Equipment       198,329       136,252       62,077         e Other       388,113       345,871       42,242	1a	_and	$\top$			101,	587			101,587
c Leasehold improvements       34,907       34,907       0         d Equipment       198,329       136,252       62,077         e Other       388,113       345,871       42,242	Ь	Buildings				<u> </u>		474,382		
<b>e</b> Other						34,	907	34,907		0
	d i	Equipment				198,	329	136,252		62,077
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)	_e (	Other				388,	113	345,871		42,242
	Tota	I. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, colu	ımn (	'B)	, line 10(c).)			. <u> </u> . <u>▶</u>		554,121

See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)2001. Turus	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>F</b>	
Part VIII Investments—Program Related. C	omplete ıf the organızatı	ion answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.  (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>+</b>	
Part IX Other Assets. Complete if the organization		
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
<b>Part X Other Liabilities.</b> Complete if the organization of the organization of the property	anization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		-
	1	4
	+	-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	<u> </u>	†
Total (Column (b) mast equal form 330, fart A, coll b) mic 23 /		

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue p the organization answered 'Yes' to Form 990, Part IV, line 12a.	er R	<b>eturn</b> Complete if
1	Total revenue, gains, and other support per audited financial statements	1	3,801,102
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		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	755,597
3	Subtract line <b>2e</b> from line <b>1</b>	3	3,045,505
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	<b>4</b> c	241,261
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12 )	5	3,286,766
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1	Total expenses and losses per audited financial statements	1	3,594,717
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	1	
С	Other losses	1	
d	Other (Describe in Part XIII )	1	
e	Add lines <b>2a</b> through <b>2d</b>	2e	599,711
3	Subtract line <b>2e</b> from line <b>1</b>	3	2,995,006
4	Amounts 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 ) 4b 241,261	1	
c	Add lines <b>4a</b> and <b>4b</b>	4c	241,261
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18 )	5	3,236,267
Part	XIII Supplemental Information		

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

Explanation
THE ASSOCIATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE IT HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION OF THE INTERNAL REVENUE CODE AND CONTRIBUTIONS TO THE ASSOCIATION QUALIFY AS A CHARITABLE CONTRIBUTION DEDUCTION FOR DONORS THE ASSOCIATION HAS ADOPTED THE INCOME TAX STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS THIS STANDARD HAS NO IMPACT ON THE ASSOCIATION'S FINANCIAL STATEMENTS FOR THE YEARS ENDING SEPTEMBER 30, 2014 AND 2013 THE ASSOCIATION'S TAX RETURNS ARE SUBJECT TO REVIEW BY FEDERAL AND STATE AUTHORITIES THE ASSOCIATION IS NOT AWARE OF ANY ACTIVITIES THAT WOULD JEOPARDIZE ITS TAX-EXEMPT STATUS THE TAX RETURNS FOR THE YEARS ENDING 2011 TO 2013 ARE OPEN TO EXAMINATION BY FEDERAL AND STATE AUTHORITIES
PAC REVENUE REPORTED ON A SEPARATE RETURN 27,610 HOA REVENUE REPORTED ON A SEPARATE RETURN 478,794 COST OF GOODS SOLD 141,506 NET ASSETS RELEASED FROM RESTRICTIONS 108,264
INTERCOMPANY ELIMINATIONS 241,261
PAC EXPENSES REPORTED ON A SEPARATE RETURN 108,264 HOA EXPENSES REPORTED ON A SEPARATE RETURN 350,094 COST OF GOODS SOLD 141,506 MISCELLANEOUS -153
INTERCOMPANY ELIMINATIONS 241,261

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Return Reference		Explanation

Schedule D (Form 990) 2013

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

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

**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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493229026445

Open to Public **Inspection** 

**Employer identification number** 

MINNESOTA ASSOCIATION (						41-6039154	
Does the organization man the selection criteria used Describe in Part IV the or	intain records to subsite to award the grants	or assistance? res for monitoring the us	e of grant funds in the	United States			▼ Yes   □
		Governments and recipient that receive				organization answered al space is needed.	d "Yes" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount 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) MINNESOTA HOMEOWNERS ALLIANCE INC 5750 LINCOLN DRIVE EDINA,MN 55436	41-4648282	501(C)(4)	205,000	29,261	FMV	DONATED MANAGEMENT SERVICES	PROMOTING SOCIAL WELFARE
2 Enter total number of sect	cion 501(c)(3) and go	overnment organizations	listed in the line 1 tabl	e			0
3 Enter total number of othe	er organizations listed	d in the line 1 table					1

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

(a)Type of grant or assistance	<b>(b)</b> Number recipient:								
Part IV Supplemental Inf	ormation. Provid	le the information requi	red in Part I, line 2, Par	t III, column (b), and any of	ther additional information.				
Return Reference	Explanation								
	IE ASSOCIATION MADE A GRANT FOR PROGRAM RELATED PURPOSES, WHICH WAS APPROVED BY THE EXECUTIVE COMMITTEE THE CTIVITIES ARE CONTROLLED BY THE ASSOCIATION THERE IS NO FORMAL MONITORING REQUIRED								

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DLN: 93493229026445

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** 

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization MINNESOTA ASSOCIATION OF REALTORS

**Employer identification number** 

41-6039154

Pa	rt I Questions Regarding Compensation		·			
					Yes	No
1a	Check the appropriate box(es) if the organization provi 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	$\Gamma$	Housing allowance or residence for personal use			
	Travel for companions	$\sqcap$	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	$\sqcap$	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organism reimbursement or provision of all of the expenses described by the control of the control of the expenses described by the control of the			1b		
2	Did the organization require substantiation prior to rei directors, trustees, officers, including the CEO/Execu			2		
3	Indicate which, if any, of the following the filing organizorganization's CEO/Executive Director Check all that used by a related organization to establish compensation.	t apply	y Do not check any boxes for methods			
	Compensation committee	Γ	Written employment contract			
	Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	rt VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	ymen	t?	4a		No
b	Participate in, or receive payment from, a supplement	al non	qualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-bas	ed co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and prov	ıde th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must	com	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, li compensation contingent on the revenues of					
а	The organization?			5a		
	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, li compensation contingent on the net earnings of	ne 1a	, did the organization 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, li payments not described in lines 5 and 6? If "Yes," des			7		
8	Were any amounts reported in Form 990, Part VII, pa	ıd or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe					
	ın Part III			8		
9	If "Yes" to line 8, did the organization also follow the r section 53 $4958-6(c)$ ?	ebutta	able presumption procedure described in Regulations	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)(I)-(III) 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 (i) Base compensation	'' I incentive I reportable I			<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported as deferred in prior Form 990
(1)CHRISTOPHER GALLER CHIEF EXECUTIVE OFFICER	(i) (ii)	165,323 0	10,000	960 0	10,242	24,828 0	211,353 0	0

Schedule J (Form 990) 2013

### Part III Supplemental Information

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

Return Reference Explanation

Schedule J (Form 990) 2013

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### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

MINNESOTA ASSOCIATION OF REALTORS

# 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.

 Attach to Form 990 or 990-EZ.
 Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

DLN: 93493229026445

**Employer identification number** 

2013

Open to Public Inspection

41-6039154 990 Schedule O, Supplemental Information Return Reference Explanation FORM 990, PART VI, SECTION A, LINE FORM 990, PART VI, SECTION A, LINE THE ASSOCIATION HAS SIX CLASSES OF MEMBERS, WITH EQUAL VOTING RIGHTS REALTOR MEMBER, MEMB ER BOARD/ASSOCIATION, AFFILIATE MEMBER, HONORARY MEMBER, INSTITUTE AFFILIATE, AND **REALTOR EMERITUS** FORM 990, PART VI, SECTION A, LINE EACH MEMBER ASSOCIATION OR BOARD ELECTS UP TO FOUR DIRECTORS TO THE BOARD OF 7A DIRECTORS. DE PENDING ON THE NUMBER OF REALTOR MEMBERS OF THE ASSOCIATION OR BOARD EACH REAL **ESTATE COM** PANY ELECTS UP TO THREE DIRECTORS TO THE BOARD OF DIRECTORS, DEPENDING ON THE NUMBER OF RE ALTOR MEMBERS IN THE COMPANY EACH REAL ESTATE BROKERAGE FRANCHISOR WITH 500 OR MORE REALT OR MEMBERS ELECT ONE DIRECTOR TO THE BOARD OF DIRECTORS FORM 990, PART VI, SECTION A, LINE AMENDMENTS TO THE ASSOCIATION'S BY LAWS AFFECTING THE ADMISSION OR QUALIFICATION OF REALTOR MEMBERS AND INSTITUTE AFFILIATE MEMBERS AND THE USE OF THE TERMS "REALTOR" OR "REALTORS" OR ANY ALTERATION IN THE TERRITORIAL JURISDICTION OF A BOARD ONLY BECOME EFFECTIVE UPON AP PROVAL OF THE BOARD OF DIRECTORS OF THE NATIONAL ASSOCIATION AMENDMENTS TO THE **ASSOCIATIO** N'S ARTICLES OF INCORPORATION REQUIRE A TWO-THIRDS MAJORITY VOTE BY THE MEMBERS FORM 990, PART VI, SECTION B, LINE THE FORM 990 WAS REVIEWED BY THE ASSOCIATION'S DIRECTOR OF OFFICE MANAGEMENT AND CHIEF OPE RATING OFFICER IT WAS THEN PROVIDED ELECTRONICALLY TO ALL BOARD MEMBERS PRIOR TO FILING THE ASSOCIATION'S CONFLICT OF INTEREST POLICY APPLIES TO ALL DIRECTORS. OFFICERS AND FORM 990, PART VI, SECTION B, LINE 12C **EMPLO** YEES EACH PERSON GOVERNED BY THIS POLICY IS REQUIRED TO COMPLETE AN ANNUAL DISCLOSURE FOR M IDENTIFYING ANY RELATIONSHIPS, POSITIONS OR CIRCUMSTANCES IN WHICH THE PERSON IS INVOLVE D THAT THEY BELIEVE COULD CONTRIBUTE TO A CONFLICT OF INTEREST ARISING BEFORE BOARD OR CO MMITTEE ACTION ON A CONTRACT OR TRANSACTION INVOLVING A CONFLICT OF INTEREST, A DIRECTOR O R COMMITTEE MEMBER HAVING A CONFLICT OF INTEREST IS REQUIRED TO DISCLOSE ALL MATERIAL FACT S A PERSON WHO HAS A CONFLICT OF INTEREST MAY NOT PARTICIPATE IN OR BE PERMITTED TO HEAR THE BOARD'S OR COMMITTEE'S DISCUSSION OF THE MATTER EXCEPT TO DISCLOSE MATERIAL **FACTS AND** TO RESPOND TO QUESTIONS SUCH PERSON MAY NOT ATTEMPT TO EXERT THEIR PERSONAL INFLUENCE WIT H RESPECT TO THE MATTER, EITHER AT OR OUTSIDE THE MEETING THE PERSON HAVING A CONFLICT OF INTEREST MAY NOT VOTE ON THE CONTRACT OR TRANSACTION AND MAY NOT BE PRESENT IN THE G ROOM WHEN THE VOTE IS TAKEN, UNLESS THE VOTE IS BY SECRET BALLOT IN THE EVENT IT IS NOT ENTIRELY CLEAR THAT A CONFLICT OF INTEREST EXISTS, THE CHAIR OR THE CHAIR'S DESIGNEE DETE RMINES WHETHER A CONFLICT OF INTEREST EXISTS ALL PROCEEDINGS RELATED TO CONFLICTS OF INTE REST ARE DOCUMENTED IN THE MEETING MINUTES FORM 990, PART VI, SECTION B, LINE THE COMPENSATION OF THE CEO IS DETERMINED BY THE EXECUTIVE COMMITTEE, WHICH SERVES 15A AS THE PERSONNEL COMMITTEE THE ASSOCIATION USES SALARY SURVEYS FOR COMPARABILITY DATA AND DOCUME NTS ALL STEPS IN THE PROCESS THE PROCESS LAST INCLUDED REVIEW AND APPROVAL BY INDEPENDENT PERSONS, COMPARABILITY DATA AND CONTEMPORANEOUS SUBSTANTIATION IN 2013 FOR THE CEO, C GA LLER ALL OTHER COMPENSATION IS DETERMINED BY THE CEO SALARY SURVEYS AND COMPARABILITY DA TA ARE USED TO DETERMINE COMPENSATION FORM 990, PART VI, SECTION C, LINE THE ASSOCIATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMEN

TS ARE AVAILABLE UPON REQUEST THE FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE

ASSOCIAT ION'S WEBSITE

#### DLN: 93493229026445

2013

OMB No 1545-0047

Open to Public . Inspection

**Employer identification number** 

# **Related Organizations and Unrelated Partnerships**

**SCHEDULE R** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

MINNESOTA ASSOCIATION OF REALTORS				. ,			
Part I Identification of Disregarded Entities Com	plete if the organization	answered "Yes" o	n Form 990. Pai	41-603915 t IV. line 33.	4		
(a) Name, address, and EIN (ıf applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d)	(e) End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II  Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during  (a)  Name, address, and EIN of related organization		the organization a  (c)  Legal domicile (state or foreign country)	nswered "Yes" (d) Exempt Code section	(e)	(f) us Direct controlling	Section (13) co	<b>g)</b> n 512(t
(1) MINNESOTA ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE 5750 LINCOLN DRIVE EDINA, MN 55436	POLITICAL & LEGISLATIVE ACTIVITY	MN	527	N/A	MINNESOTA ASSOCIATION OF REALTORS	<b>Yes</b> Yes	No
41-6141740  (2) MINNESOTA HOMEOWNERS ALLIANCE INC  5750 LINCOLN DRIVE	PROMOTING SOCIAL WELFARE	MN	501(C)(4)	N/A	MINNESOTA ASSOCIATION OF REALTORS	Yes	
EDINA, MN 55436 46-4648282						_	<u> </u> 

<b>(a)</b> Name, address, and EIN of related organization		<b>(b)</b> Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	<b>(f)</b> Share of total income	(g) Share of end-of-year assets		prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	<b>j)</b> eral or aging ener?	(k) Percentag ownersh
					J14)			Yes	No	1	Yes	No	
V Identification of Related Org								swere	d "Yes	" on Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)		<b>(d)</b> Direct controllin entity	(e) Type of entit (C corp, S corp, or trust)	y Share of to	total Share			(h) ercentage ownership	(i) Section 512 (b)(13) controlled entity?		!
						<u> </u>			_		Yes		No
									_				+

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Yes

Recept of (1) interest (ii) annuites (iii)  annuite	$\textbf{1} \ During \ the \ tax \ year, \ did \ the \ orgranization \ engage \ in \ any \ of \ the \ following \ transactions \ with \ one \ or \ more$	related organizations lis	sted in Parts II-IV?				,				
Companies   Signatian   Sign	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity										
A	<b>b</b> Gift, grant, or capital contribution to related organization(s)										
Less or loan guarantees by related organization(s)  1	c Gift, grant, or capital contribution from related organization(s)										
solidation of parameter of assets from related organization(s)  g Sale of assets from related organization(s)  p Purchase of assets from related organization(s)  p Purchase of assets with related organization(s)  p Lease of facilities, equipment, or other assets from related organization(s)  p Performance of services or membership or fundraising solicitations for related organization(s)  p Performance of services or membership or fundraising solicitations by related organization(s)  p Performance of services or membership or fundraising solicitations by related organization(s)  p Reimbursement paid to related organization(s)  p Reimbursement paid to related organization(s) for expenses  p Reimbursement paid to related organization(s) for expenses  p Reimbursement paid by related organization(s) for expenses  p Other transfer of cash or property to related organization(s)  p Other transfer of cash or property from related organization(s)  p Other transfer of cash or property from related organization(s)  p Other transfer of cash or property from related organization(s)  p Other transfer of cash or property from related organization(s)  p Other transfer of cash or property from related organization(s)  p Other transfer of cash or property from related organization(s)  Transaction  (b)  (c)  (d)  Method of determining and uninvolved bettermining and uninv	d Loans or loan guarantees to or for related organization(s)										
g Sale of assets to related organization(s)  h Purchase of assets from related organization(s)  i Exchange of assets with related organization(s)  j Lease of facilities, equipment, or other assets from related organization(s)  k Lease of facilities, equipment, or other assets from related organization(s)  l Performance of services or membership or fundraising solicitations for related organization(s)  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)  n Sharing of paid employees with related organization(s)  n No  n Sharing of paid employees with related organization(s)  n No  n Sharing of paid employees with related organization(s)  n No  n Sharing of paid employees with related organization(s) for expenses  n No  n No  n Sharing of paid employees with related organization(s)  n No  n No  n Sharing of paid employees with related organization(s)  n No  n	e Loans or loan guarantees by related organization(s)										
g Sale of assets to related organization(s)  h Purchase of assets from related organization(s)  i Exchange of assets with related organization(s)  j Lease of facilities, equipment, or other assets from related organization(s)  k Lease of facilities, equipment, or other assets from related organization(s)  l Performance of services or membership or fundraising solicitations for related organization(s)  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)  n Sharing of paid employees with related organization(s)  n No  n Sharing of paid employees with related organization(s)  n No  n Sharing of paid employees with related organization(s)  n No  n Sharing of paid employees with related organization(s) for expenses  n No  n No  n Sharing of paid employees with related organization(s)  n No  n No  n Sharing of paid employees with related organization(s)  n No  n											
h Purchase of assets from related organization(s)  i Exchange of assets with related organization(s)  j Lease of facilities, equipment, or other assets to related organization(s)  i Performance of services or membership or fundraising solicitations for related organization(s)  in Performance of services or membership or fundraising solicitations for related organization(s)  in Performance of services or membership or fundraising solicitations by related organization(s)  in Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  in Sharing of paid employees with related organization(s)  in Sharing of paid employees with related organization(s)  in Ves  in	f Dividends from related organization(s)				1f		No				
i Exchange of assets with related organization(s)  j Lease of facilities, equipment, or other assets from related organization(s)  k Lease of facilities, equipment, or other assets from related organization(s)  in Performance of services or membership or fundraising solicitations for related organization(s)  in Performance of services or membership or fundraising solicitations by related organization(s)  in Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  in Sharing of paid employees with related organization(s)  in Sharing of paid employees with related organization(s)  in Performance of services or membership or fundraising solicitations by related organization(s)  in No  in Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  in Ves  in No  in Ves  in No  in Ves  in Ves  in No   g Sale of assets to related organization(s)											
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	(a) Name of related organization	Transaction			ount ir	nvolved					
	1) MINNESOTA HOMEOWNERS ALLIANCE INC	•	234,261	N/A							

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

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships														
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets			(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership	
			314)	Yes	No			Yes	No		Yes	No		
												]		
												$\Box$		
	•													

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Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

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