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Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

 $\mathsf{Form}\,990$

Department of the Treasury Internal Revenue Service

OMB No 1545-0047 Open to Public

▶ Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990

Inspection

	AF	or the	2014 calendar year, or tax year beginning and endition and endition and endition and enditions.	ng		
	B c	Check if pplicable	C Name of organization HAMPTON ROADS ASSOCIATION FOR COMMERCIAI		D Employer identifi	cation number
		_Address				
		Name change	Doing business as		54-1	648222
	F	Initial return Final		n/suite	E Telephone numbe	er) 481–2494
	_	-dreturn/ termin- ated	City or town, state or province, country, and ZIP or foreign postal code	\neg	G Gross receipts \$	345,711.
		Amende		l	H(a) Is this a group re	·
		Applica tion pending	F Name and address of principal officer:		for subordinates	? Yes X No
		pending	4665 SOUTH BLVD, SUITE B, VIRGINIA BEACH,	_VA	H(b) Are all subordinates i	
	<u> </u>	ax-exe	mpt status: 501(c)(3) X 501(c) (6) ◀ (insert no.) 4947(a)(1) or	527	If "No," attach a	list. (see instructions)
			e: N/A		H(c) Group exemption	
				L Year o	f formation: 1993	State of legal domicile: VA
	LP _a		Summary			
	Activities & Governance	1 6	Briefly describe the organization's mission or most significant activities: TO EDUC COMMERCIAL REAL ESTATE INDUSTRY AND OTHER I	NTE	AND INFORM RESTED PART	THE OF
	r a	J -	Check this box If the organization discontinued its operations or disposed of			
)ve	l	lumber of voting members of the governing body (Part VI, line 1a)		3	35
	Ğ		lumber of independent voting members of the governing body (Part VI, line 1b)		4	35
	88		otal number of individuals employed in calendar year 2014 (Part V, line 2a)		5	0
	ıtie.		otal number of volunteers (estimate if necessary)		6	0
	cti		otal unrelated business revenue from Part VIII, column (O); line 12		7a	0.
	⋖		let unrelated business taxable income from Form 990-T, line 34		7b	0.
<i>(1</i>)			South transport (But VIII Inputs)		Prior Year	Current Year
ECANNED	a	8 0	Contributions and grants (Part VIII, line 1h)	\	114,225.	115,672.
25	n i	9 F	Program service revenue (Part VIII, line 2g)	,	144,584.	156,472.
	Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d		822.	625.
1	œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		62,120.	47,363.
			otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		321,751.	320,132.
AUG		13 G	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		14 E	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
1-4	S	15 S	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,009.	2,143.
င္သ	Expenses	16a P	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
2015	хре	bТ	otal fundraising expenses (Part IX, column (D), line 25)	<u>.</u>		
C7	Ü	17 C	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		304,852.	286,037.
		18 T	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		306,861.	288,180.
		19 F	Revenue less expenses Subtract line 18 from line 12		14,890.	31,952.
	Net Assets or Fund Balances			Beg	inning of Current Year	End of Year
	alar	20 T	otal assets (Part X, line 16)	L.	185,744.	223,180.
	₹As	21 T	otal liabilities (Part X, Jifi e 26)	<u> </u>	28,480.	29,879.
	컐	22 N	let assets or fund balances Subtract line 21 from line 20		157,264.	193,301.
		ırt II	Signature Block		· · · · · · · · · · · · · · · · · · ·	
			ies of perjury, I declare that have examined this return, including accompanying schedules and			y knowledge and belief, it is
	true,	correct,	and complete. Declaration of caparer (pther than officer) is based on all information of which pi	reparer	has any knowledge.	
]	Signature of officer			115
	Sigr				Oate ,	
	Her	e	Type or print name and title	ית ש קק	J - ELECT	
			<u></u>	חו	ate . Check	PTIN
	Paid		Print/Type preparer's name Preparer's signature	ے ا	_ _	
		-	RISE FLENNER Firm's name DIXON HUGHES GOODMAN LLP	<u>~ LS</u>	self-employ	56-0747981
	Prep				Firm's EIN	20-014130T
	use	Only			Dh 7 E	7.624.5100
	-		NORFOLK, VA 23510		[Prione no. / 5	
	Mav	the IRS	S discuss this return with the preparer shown above? (see instructions)			X Yes No

432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions.

REAL ESTATE 54-1648222 Page 2 Form 990 (2014) Part III | Statement of Program Service Accomplishments \mathbf{X} Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: TO EDUCATE AND INFORM THE COMMERCIAL REAL ESTATE INDUSTRY AND OTHER INTERESTED PARTIES OF IMPORTANT TIMELY REAL ESTATE ISSUES. Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a) (Expenses \$ including grants of \$) (Revenue \$ REGULAR LUNCHEON MEETINGS HAVE BEEN HELD TO KEEP MEMBERS CURRENT ON COMMERCIAL REAL ESTATE ISSUES 4h) (Expenses \$ including grants of \$) (Revenue \$ MIX N MINGLE, OYSTER ROAST, GOLF OUTING AND OTHER ACTIVITIES HAVE BEEN HELD TO PROVIDE NETWORKING OPPORTUNITIES FOR THE MEMBERS 4c) (Revenue \$ AWARDS PROGRAMS WERE CONDUCTED TO RECOGNIZE OUTSTANDING ACHIEVEMENT OR CONTRIBUTION TO THE COMMERCIAL REAL ESTATE INDUSTRY Other program services (Describe in Schedule O.)) (Revenue \$ Total program service expenses Form 990 (2014)

432002 11-07-14

Form 990 (2014) Part IV | Checklist of Required Schedules

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HAMPTON ROADS ASSOCIATION FOR COMMERCIAL 54-1648222 Page 3

			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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	1		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			77
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			х
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u> </u>	
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			х
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	\vdash	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	100		х
	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		21
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
40	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	\vdash	X
13	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	174		
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (2014)

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Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		} ,	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	<u> </u> ,	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's cur	rent		_
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		1	
	Schedule J	23		X
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	<u> </u>	X
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 defeat	se	i i	
	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	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	ì		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, a			
	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	ļ	
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 "Ye			7.7
	complete Schedule L, Part II	_26_	-	X
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	ı	1	х
	of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Pat 19		 	X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an		 	 -
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ł	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	 	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			_
00	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33_	l _	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	d		
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	_	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled ent	tity		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	uzation?		
	If "Yes," complete Schedule R, Part V, line 2	36_		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	[
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (2014

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
	1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0	1 1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		j	
e	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		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	_7g		
_	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. Did a donor advised fund maintained by the	_		
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		ĺ	
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	{	
10	Section 501(c)(7) organizations. Enter:		j	
a	Initiation fees and capital contributions included on Part VIII, line 12 Grace receipts, included on Form 200, Part VIII, line 12, for public use of old feetilities.		. !	
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter:		·	
'' a	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against		1	
b	amounts due or received from them.)		İ	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		ł	
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	Note. See the instructions for additional information the organization must report on Schedule O.	150		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans		1	
c	Enter the amount of reserves on hand			

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14a Did the organization receive any payments for indoor tanning services during the tax year?

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

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

	Check if Schedule O contains a response or note to any line in this Part VI					X			
Sec	tion A. Governing Body and Management								
					Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	35	[, , ,	7.0			
	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.	ł							
ь	Enter the number of voting members included in line 1a, above, who are independent	1ь	35						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship			1					
_	officer, director, trustee, or key employee?	******	04.101	2		X			
3	Did the organization delegate control over management duties customarily performed by or under the	direct s	inenvision	_~					
3	of officers, directors, or trustees, or key employees to a management company or other person?	Gill Cot 3	apervision	3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 9	an wae fi	led?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's ass		icu i	5		X			
6									
	Did the organization have members of stockholders, or other persons who had the power to elect or ap	noint one	or	6_		Х			
Ia	more members of the governing body?	point one	3 01	7a		x			
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ookholde	vre or	/a					
b	persons other than the governing body?	OCKIOLO	313, OI	7b		x			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	hy the fo	llowing.						
	The governing body?	by the lo	iio vyiii g.	8a	х				
a				8b	X				
ь	Each committee with authority to act on behalf of the governing body?	bod at th		OD					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reac organization's mailing address? If "Yes," provide the names and addresses in Schedule O	ilieu at ti	ic .	9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue Co	nde l						
<u> </u>	NOTE D. 1 OHOLOS (THIS SECTION D TEQUESTS INFORMATION ABOUT PORISIES NOT TOQUINGS BY THE INFORMATION	venue o			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			10a	103	X			
	If "Yes," did the organization have written policies and procedures governing the activities of such ch	antere a	ffiliates	.00					
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	артого, а	rinates,	10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	before f	iling the form?	11a		Х			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		9						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a		х			
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	o conflict:	:?	12b					
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes								
_	in Schedule O how this was done	-,		12c					
13	Did the organization have a written whistleblower policy?			13		X			
14	Did the organization have a written document retention and destruction policy?			14		X			
15	Did the process for determining compensation of the following persons include a review and approva	by inde	pendent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official			15a		X			
	Other officers or key employees of the organization			15b		X			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ent with	а						
	taxable entity during the year?			16a	- [X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	e its parti	cipation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ								
	exempt status with respect to such arrangements?			16b					
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed NONE								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Section	501(c)(3)s only) a	vailab	le				
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain i	n Schedi	ıle O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con	flict of in	terest policy, and	l finan	cial				
	statements available to the public during the tax year								
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and re	ecords:						
	EXECUTIVE ADMINISTRATOR - (757) 481-2494								
	1818 SHERINGHAM WEST, VIRGINIA BEACH, VA 23454-313	31		_					

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

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

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

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

☐ Check this box if neither the organiza (A) Name and Title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				than	one h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee			Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organization
) SEE SCHEDULE ATTACHED	0.00							0.	0.	(
		_				_	_			
		<u> </u> 	_		 	_	L			
		_	_		_	_	_			
			_				_			
		-				-	_			
							_			
		_					<u> </u>			
		_				-	_			
		_			 			 		
		-			_	-	_			
							<u> </u>			
		-	_			-	-			
		-				-				

Form	990 (2014) REAL ESTA	ATE								<u>54-1</u>	<u>648</u>	<u> 222</u>	<u> </u>	age 8
Par	VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ghe	st C	Compensated Employe	es (continued)				
	, (A) Name and title	(B) Average hours per week	box	Position (do not check more than on box, unless person is both a other and a director/truster			than is bot	h an	from	(E) Reportable compensation from related	on d	an	(F) stimate nount other	of
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-Mi		compensate from the organization organizatio		e tion ted
							L							
				_			L							
							_							
							_	_						
						_								
							L	_						
								_						
				_			_	L			_			
	Sub-Add						<u>.</u>		0.		0.			0.
С	Sub-total Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A						>	0.		0.			0.
	Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	ed at	bove	e) wl	ho r		0,000 of reportab				
3	Did the organization list any former officer,	director, or tru	uste	e. ke	ev en	nplo	vee	. or	highest compensated e	mplovee on			Yes	No
	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su	uch individual			-							3		Х
	and related organizations greater than \$150 Did any person listed on line 1a receive or a	o,000? <i>If</i> "Yes,	" co	mple	ete S	Sche	edul	e J i	for such individual	ū		4		х
	rendered to the organization? If "Yes," comion B. Independent Contractors											5		Х
1	Complete this table for your five highest co	· ·									npens	ation 1	from	
	the organization. Report compensation for (A)					vith	<u>or</u> w	<u>uthir</u>	(B)			(0		
	Name and business	address	NO	INC	<u> </u>			_	Description of s	services		ompe	nsatio	n
			_									 ,		
								\dashv				<u></u>		-
		<u></u>			· ·			\dashv				-		
					_			\dashv						
	Total number of independent contractors (i \$100,000 of compensation from the organic		ot lir	nite	d to	tho:	se lu O	stec	d above) who received n	nore than				

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REAL ESTATE

Pa	T V	111	Check if Schedule O contain		or note to any lu	ne in this Part VIII			
		•	Greek ii Scrieddie O'Cornaii	із а тезропзе	or note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1	а	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues	1b					
S, (C	Fundraising events	1c					
la git		d	Related organizations	1d					
ini,		е	Government grants (contribution	ns) 1e		[į		[
r tio		f	All other contributions, gifts, grants,	and					
			similar amounts not included above	1f	115,672.				
달의		g	Noncash contributions included in lines 1a	i-1f \$			1		
<u>8</u>		h	Total. Add lines 1a-1f			115,672.			
1			NUMBERODIZATION TRANSPORT	TOM	Business Code		74 927		
<u>i</u>	2		NETWORKING FUNCT			74,837.	74,837.		ļ———
e Z		b	LUNCHEON PROGRAM	15		44,310. 37,325.	44,310. 37,325.		
e S		C	DESIGN AWARDS			31,343.	37,323.		
gra Re		d							
Program Service Revenue		e							
-			Ail other program service revenue Total. Add lines 2a-2f	ie		156,472.			
\dashv	3	g	Investment income (including di	vidende inter		130/1/20			
- 1			other similar amounts)	viderius, iriter	esi, and	625.	625.]
	4		Income from investment of tax-e	exempt bond	proceeds				
	5		Royalties	xempi bond j	>,000000				
ł	_		Γ	(ı) Real	(ii) Personal				
ļ	6	а	Gross rents		1		1		
			Less: rental expenses						
ĺ			Rental income or (loss)			Ī			
			Net rental income or (loss)]			
				(ı) Securities	(ii) Other				
			assets other than inventory]			
		b	Less: cost or other basis						
			and sales expenses						}
		С	Gain or (loss)						
1		d	Net gain or (loss)						[
enne	8	а	Gross income from fundraising including \$	-					
			contributions reported on line 1	c). See					
Other Re			Part IV, line 18	а					İ
盲			Less: direct expenses	b	25,579.	00 551	}		00 551
_			Net income or (loss) from fundra	-		20,551.			20,551.
	9	а	Gross income from gaming activ				[
			Part IV, line 19	a		d	 		
			Less: direct expenses	b					
			Net income or (loss) from gamin	_					
	10	а	Gross sales of inventory, less re and allowances			[1		
		.	Less: cost of goods sold	a b		1			
			Net income or (loss) from sales			;	j		
		<u>. </u>	Miscellaneous Revenue	or inventory	Business Code				
i	11	_	NATIONAL AND OTTO		Dusiness Code	26,812.	26,812.		
}		a b							
		c					 		
		d	All other revenue						
İ			Total. Add lines 11a-11d			26,812.			
	12		Total revenue. See instructions,			320,132.	183,909.	0.	
43200 11-07	9								Form 990 (2014)

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Part IX | Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must c	omplete column (A)	
	 Check if Schedule O contains a respor 		this Part IX		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21]	
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	ļ		1	
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals, See Part IV, lines 15 and 16			}	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1		1	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and			[
	persons described in section 4958(c)(3)(B)			1	
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)			[
9	Other employee benefits			 	
10	Payroll taxes	2,143.		<u> </u>	
11	Fees for services (non-employees):				
а	Management	150.		 	
ь	Legal	3,850.		 	
C	Accounting	3,850.		 	
đ	Lobbying Professional fundratume contract See Bort IV line 17			 	
e	Professional fundraising services. See Part IV, line 17 Investment management fees				
, 9	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion			 	
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	14,420.			
17	Travel				
18	Payments of travel or entertainment expenses			1	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			 	
20	Interest			 	
21	Payments to affiliates	13.		 	
22	Depreciation, depletion, and amortization				
23	Insurance				
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 0.)				
а	ADMINISTRATIVE SUPPORT	89,273.			
b	CATERING EXPENSE	63,187.			
C	VECTRE DUES	27,870. 8,470.		 	
d	CVENT All other expenses SEE SCH O	78,804.		 	
	All other expenses SEE SCH O Total functional expenses. Add lines 1 through 24e	288,180.		 	
<u>25</u> 26	Joint costs. Complete this line only if the organization	200,100.		 	
20	reported in column (B) joint costs from a combined	[[
	educational campaign and fundraising solicitation.				
	Check here fig. (f following SOP 98-2 (ASC 958-720)	J]]	
					F 000 (001.4)

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
	,		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	14,050.	1	9,974.
	2	Savings and temporary cash investments	157,632.	2	203,257.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
	[trustees, key employees, and highest compensated employees. Complete			
	l	Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
	ļ	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	ĺ	employers and sponsoring organizations of section 501(c)(9) voluntary			
ςς.		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	1
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	1,994.	9	
		Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	Ь	Less: accumulated depreciation 10b		10c	
	11	Investments · publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	12,068.	15	9,949.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	185,744.	16	223,180.
	17	Accounts payable and accrued expenses	24,820.	17	27,670.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	· ·_ ·_ ·_ ·
Ś	22	Loans and other payables to current and former officers, directors, trustees,			
ij	[key employees, highest compensated employees, and disqualified persons.			
Liabilıties		Complete Part II of Schedule L		22	
Ï	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
	}	Schedule D	3,660.	25	2,209.
	26	Total liabilities. Add lines 17 through 25	28,480.	26	29,879.
		Organizations that follow SFAS 117 (ASC 958), check here and			······
ŝ		complete lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets		27	
ala	28	Temporarily restricted net assets		28	
d B	29	Permanently restricted net assets		29	
5	l	Organizations that do not follow SFAS 117 (ASC 958), check here			
<u>5</u>		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	0.	30	0.
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
žt A	32	Retained earnings, endowment, accumulated income, or other funds	157,264.	32	193,301.
ž	33	Total net assets or fund balances	157,264.	33	193,301.
	34	Total liabilities and net assets/fund balances	185,744.	34	223,180.
					Form 990 (2014)

Form	990 (2014) REAL ESTATE	54-1648	222	Pa	ge 12
Pa	rt XI Reconciliation 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			<u>32.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			80.
3	Revenue less expenses Subtract line 2 from line 1	3			52.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u> 157</u>	<u>, 2</u>	64.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	4	1,0	85.
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,	1 1			
	column (B))	10	<u> 193</u>	<u>, 3</u>	01.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				بيب
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		1 1		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	. O.			,,
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a	1		
	separate basis, consolidated basis, or both:]		
	Separate basis] [
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separation of the year were audited on the year were audited on the year were audited on the year were all the year were audited on the year were all the y	te basis,	1		
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		1		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,	1 . 1		1
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
_	If the organization changed either its oversight process or selection process during the tax year, explain in Sci				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ingle Audit			x
	Act and OMB Circular A-133?		3a		<u>├</u> ^
Þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits and the organization did not undergo the required audit or audits and the organization did not undergo the required audit or audits.	uired audit	3b		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		i JD I		ı

SCHEDULE C (Form 990 or 990-EZ)

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

2014
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.
- 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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•) organizations: Complete Part III.			
Nan		MPTON ROADS ASSOC	IATION FOR COMM	ERCIAL Empl	oyer identification number
		AL ESTATE			54-1648222
Pa	art I-A Complete if	the organization is exemp	ot under section 501(c)	or is a section 527 o	rganization.
	•	he organization's direct and indirec	t political campaign activities		
	Political expenditures			▶\$	
3	Volunteer hours				
Pa	art I-B Complete if	the organization is exemp	ot under section 501(c)	(3).	
1	Enter the amount of any	excise tax incurred by the organizat	tion under section 4955	▶\$	
2	Enter the amount of any	excise tax incurred by organization	managers under section 4955	5 ▶\$	
3	If the organization incurre	ed a section 4955 tax, did it file Forr	n 4720 for this year?		Yes No
42	a Was a correction made?				└─ Yes
	o If "Yes," describe in Part				
Pa	art I-C Complete if	the organization is exemp	ot under section 501(c)		
1	Enter the amount directly	expended by the filing organization	n for section 527 exempt fund	tion activities	
2	Enter the amount of the f	iling organization's funds contribute	ed to other organizations for s	ection 527	
	exempt function activities	5		▶ \$	
3	Total exempt function exp	penditures. Add lines 1 and 2. Ente	r here and on Form 1120-POL	· .	
	line 17b			▶\$	
4	Did the filing organization	file Form 1120-POL for this year?			Yes No
5		ses and employer identification nun			
		h organization listed, enter the amo			
		at were promptly and directly delive e (PAC). If additional space is neede	•	•	te segregated fund or a
		```			T
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political contributions received and
				filing organization's funds. If none, enter -0	promptly and directly
		1			delivered to a separate
					political organization. If none, enter -0
					if none, enter -o
_					
		}	l l	-	}
_		_ 			
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2014

	dule C (Form 990 or 990-EZ) 2014	REAL	ESTATE			54-	1648222 Page 2
Par	t II-A Complete if the org	anizati	on is exe	mpt under section	n 501(c)(3) and fil	ed Form 5768(election under
	section 501(h)).						
A Ch			_		n Part IV each affiliated	group member's na	me, address, EIN,
	expenses, and shar			•			
B C	neck L if the filing organizat	ion chec	red box A a	nd "limited control" pr	ovisions apply.		1 2 2 2 2 2 2
			bying Expe neans amou	nditures unts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
	Total lobbying expenditures to influ	ience pub	dic opinion ((grass roots lobbying)			
	 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) 						
	Total lobbying expenditures (add lin		-	-, (<u>-</u> ,)			
	Other exempt purpose expenditure		,				
	Total exempt purpose expenditures		es 1c and 1c	d)			
	Lobbying nontaxable amount. Ente			•	h columns		
- [If the amount on line 1e, column (a) o			bying nontaxable am			
Ī	Not over \$500,000			the amount on line 1e			
Ī	Over \$500,000 but not over \$1,000	.000		00 plus 15% of the exc			
j	Over \$1,000,000 but not over \$1,56			00 plus 10% of the exc			
Ī	Over \$1,500,000 but not over \$17,0			00 plus 5% of the exce			
1	Over \$17,000,000			\$1,000,000.			
•							
	Grassroots nontaxable amount (en	ter 25% c	of line 1f)				
	h Subtract line 1g from line 1a. If zero or less, enter -0-						
i	Subtract line 1f from line 1c If zero	or less, e	nter -0-		ĺ		
j	j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720						
	reporting section 4911 tax for this year?						
4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)							
	·	Lobi	ying Expe	nditures During 4-Yea	ar Averaging Period		
	Calendar year (or fiscal year beginning in)	(a)	2011	(b) 2012	(c) 2013	(d) 2014	(e) Totai
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount						
	(150% of line 2a, column(e))						<u> </u>
c	Total lobbying expenditures						
d	Grassroots nontaxable amount						
	Grassroots ceiling amount						
	(150% of line 2d, column (e))						
f	Grassroots lobbying expenditures				L		<u> </u>

Schedule C (Form 990 or 990-EZ) 2014

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Schedule C (Form 990 or 990 EZ) 2014 REAL ESTATE 54-164822

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

For e	ach "Yes," response to lines 1a through 1ı below, provide in Part IV a detailed description	(6	1)	(E)
of th	e lobbying activity	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?	<u></u>			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<u> </u>			
i	Other activities?				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				<u></u>
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	on 501(a)	(5) or so	otion	
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).		(5), 01 56		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2_		X
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).		3		X
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members		1		1,267
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	ical			7-3-
~	expenses for which the section 527(f) tax was paid).	·oui			
а	Current year		2a	33	3,085
	Carryover from last year		2b		
	Total		2c	33	3,085
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		7,085
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			· ·
·	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		1		
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par					
Prov	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou	p list): Part I	-A. lines 1 a	and 2 (see	
	uctions); and Part II-B, line 1. Also, complete this part for any additional information.	,	•	•	
	,,,,,,,,,,,,,,				
		· · ·			

SCHEDULE D

(Form 990)

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.

2014
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990
HAMPTON ROADS ASSOCIATION FOR COMMERCIAL Empl

Employer identification number 54-1648222

REAL ESTATE Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 4 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) _ Yes and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenue included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2014

54-1648222 Page 2 REAL ESTATE Schedule D (Form 990) 2014 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply); d Loan or exchange programs Public exhibition Scholarly research Preservation for future generations c 4 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 receive donations 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? Part IV | Escrow 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. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included Yes __ No on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table Amount c Beginning balance 10 d Additions during the year 1d 1e e Distributions during the year 1f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? _ٰ Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (c) Two years back (d) Three years back (a) Current year (b) Prior year 1a Beginning of year balance **b** Contributions c Net investment earnings, gains, and losses d Grants or scholarships Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 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 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: Yes No 3a(i) (i) unrelated organizations 3a(ii) (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 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 (b) Cost or other (c) Accumulated (d) Book value depreciation basis (investment) basis (other) 1a Land **b** Buildings c Leasehold improvements d Equipment e Other 0. Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

Schedule D (Form 990) 2014

Schedule	D (Forn	n <u>9</u> 90)	2014

REAL.	ESTATE
ипип	DOIDID

Int Hocorint		to Form 990, Part IV, line			
a) nescribil	on of security or category (including name of security)	(b) Book value	(c) Method of va	aluation: Cost or e	nd-of-year market value
Fınancial	derivatives	 			
_	eld equity interests		 		
Other _			 		
(A)			 		
(B)			 		
(C)			 		
(D)			 		
(E)			 		
(F)			 		
(G)			 		
(H)	must aqual Form 000 Part V and (P) line 12)				
	must equal Form 990, Part X, col. (B) line 12.) ► Investments - Program Related.	<u> </u>	<u> </u>		<u></u>
	•	4- Faura 000 Bart IV line	. 11a Con Form 000 f	and V line 12	
	Complete if the organization answered "Yes" (a) Description of investment	(b) Book value			nd-of-year market value
(1)	(a) Description of investment	(b) Book value	(0)		Ta or your market value
(1) (2)			 		
(3)			 		
(4)			 		
(5)		l	 		
(6)					
(7)		 	 		
(8)			 	,	
(9)					
	must equal Form 990, Part X, col. (B) line 13.)				
	Other Assets.			- ··· ···-	
	Complete if the organization answered "Yes"	to Form 990, Part IV, line	11d. See Form 990, F	Part X, line 15.	
	(a)	Description			(b) Book value
(1)					
(2)					<u> </u>
(2)					
(3)					
(3)					
(3) (4) (5)					
(3) (4) (5) (6) (7) (8)					
(3) (4) (5) (6) (7) (8) (9)					
(3) (4) (5) (6) (7) (8) (9) tal. (Column	nn (b) must equal Form 990, Part X, col (B) lin	e 15)			
(3) (4) (5) (6) (7) (8) (9) tal. (Columant X	Other Liabilities.				
(3) (4) (5) (6) (7) (8) (9) tal. (Columant X	Other Liabilities. Complete if the organization answered "Yes"			990, Part X, line 2	5.
(3) (4) (5) (6) (7) (8) (9) (at. (Columant X	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability		11e or 11f. See Form (b) Book value	990, Part X, line 2	5.
(3) (4) (5) (6) (7) (8) (9) tal. (Columant X	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability ral income taxes		(b) Book value	990, Part X, line 2	5.
(3) (4) (5) (6) (7) (8) (9) tal. (Columnart X) (1) Fede (2) MIS	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability ral income taxes CCELLANEOUS EXPENSES		(b) Book value 1,334.	990, Part X, line 2	5.
(3) (4) (5) (6) (7) (8) (9) tal. (Columnart X) (1) Fede (2) MIS (3) PAY	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability ral income taxes		(b) Book value	990, Part X, line 2	5.
(3) (4) (5) (6) (7) (8) (9) tal. (Columnart X) (1) Fede (2) MIS (3) PAY (4)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability ral income taxes CCELLANEOUS EXPENSES		(b) Book value 1,334.	990, Part X, line 2	5.
(3) (4) (5) (6) (7) (8) (9) tal. (Column Art X) (1) Fede (2) MIS (3) PAY (4) (5)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability ral income taxes CCELLANEOUS EXPENSES		(b) Book value 1,334.	990, Part X, line 2	5.
(3) (4) (5) (6) (7) (8) (9) tal. (Column Art X) (1) Fede (2) MIS (3) PAY (4) (5) (6)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability ral income taxes CCELLANEOUS EXPENSES		(b) Book value 1,334.	990, Part X, line 2	5.
(3) (4) (5) (6) (7) (8) (9) tal. (Column Art X (1) Fede (2) MIS (3) PAY (4) (5) (6) (7)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability ral income taxes CCELLANEOUS EXPENSES		(b) Book value 1,334.	990, Part X, line 2	5.
(3) (4) (5) (6) (7) (8) (9) tal. (Columnant X (1) Fede (2) MIS (3) PAY (4) (5) (6) (7) (8)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability ral income taxes CCELLANEOUS EXPENSES		(b) Book value 1,334.	990, Part X, line 2	5.
(3) (4) (5) (6) (7) (8) (9) tal. (Column art X (1) Fede (2) MIS (3) PAY (4) (5) (6) (7) (8) (9)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability ral income taxes CCELLANEOUS EXPENSES (ABLE TO PAC	to Form 990, Part IV, line	(b) Book value 1,334. 875.	990, Part X, line 2	5.
(3) (4) (5) (6) (7) (8) (9) tal. (Columnart X) (1) Fede (2) MIS (3) PAY (4) (5) (6) (7) (8) (9) tal. (Columnart X)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability ral income taxes CCELLANEOUS EXPENSES	to Form 990, Part IV, line	1,334. 875. 2,209.		

Schedule D (Form 990) 2014 REAL ESTATE Part XI | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990. Part VIII, line 12: a Net unrealized gains (losses) on investments 2a b Donated services and use of facilities 2b c Recoveries of prior year grants 2c d Other (Describe in Part XIII.) 2ď 2e e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4b b Other (Describe in Part XIII) c Add lines 4a and 4b 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a 2b **b** Prior year adjustments c Other losses 2¢ 2d d Other (Describe in Part XIII.) 26 e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 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 XI, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

432054 10-01-14

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2014
Open to Public Inspection

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990
HAMPTON ROADS ASSOCIATION FOR COMMERCIAL Emplo

Employer identification number 54-1648222

REAL ESTATE FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: IMPORTANT TIMELY REAL ESTATE ISSUES FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: NETWORKING OPPORTUNITIES, NEW MEMBER OREIENTATION, NEWS LETTER, AND MEMBERSHIP DIRECTORY FORM 990, PART VI, SECTION B, LINE 11: NOT PROVIDED TO THE GOVERNING BODY FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES: 8,222. BEVERAGE EXPENSE PRINTING 6,654. EQUIPMENT RENTALS 6,654. MISCELLANEOUS - ADMINISTRATIVE 6,529. AUDIOVISUAL EXPENSE 6,049. 5,215. PAC 4,892. CREDIT CARD FEES 4,045. INSURANCE 3,439. TELEPHONE WEBSITE 3,380. 3,354. COMPUTER / SOFTWARE EXPENSE 2,711. SPACE RENTAL

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 432211 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014) Name of the organization HAMPTON ROADS ASSOCIATION FOR COMMERCIAL REAL ESTATE	Page 2 Employer identification number 54-1648222
BOARD / EC	2,612.
SCHOLARSHIP	2,400.
AWARDS	2,298.
PRESIDENT'S COUNCIL	1,979.
PERFORMERS EXPENSES	1,900.
JUDGES EXPENSES	1,179.
UTILITIES	948.
ADVERTISING	750.
POSTAGE	708.
GIFTS	679.
LICENSES	486.
SIGNAGE	464.
SPEAKERS EXPENSE	304.
EMPLOYEE TRAINING	279.
CHARITY	250.
BAD DEBTS	142.
DECORATIONS	107.
GREEN FEES	100.
PRIZES	75.
TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL	A 78,804.

Director	Title
Christopher T. Aebel	
Michael J. Barrett	Director
Daniel D. Beck	Director
Tony Beck	Director
Cindy L. Blzck	Director
Donald H. Britt	Director
Vincent A. Campana, Jr.	Director
Hugh D. Cohen	Director
Lawrence J. Colorito	Director
Krista J. Costa	Director
Thomas M. Dillon	Director
Matthew M. Dudley	Director
Peter S. Eckert	Director
Joel T. Flax	Director
Persifor "Perry" Frazer V	Director
Cami Hahn	Director
Candi James	Director
Eric L. Kelinger	Director
Robert P. Kerr	Director
Edward A. Kimple	Director
John M. Knibb	Director
Mary S. Long	Director
William L. Nusbaum	Director
Teresa C. Peters	Director
F. Craig Read	Director
Kenneth E. Rodman, Jr.	Director
Stephen R. Romine	Director
Thomas E. Snyder	Director
W. Chris Wood	Director

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