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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax	OMB No 1545-0047
	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 ▶ Information about Form 990 and its instructions is at www.irs.gov/form990	2014 Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014

B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending	C Name of organization FLORIDA ASSOCIATION OF REALTORS INC		D Employer identification number 59-0245475	
	Doing business as FLORIDA REALTORS		E Telephone number (407) 587-1435	
	Number and street (or P O box if mail is not delivered to street address) PO BOX 725025	Room/suite	G Gross receipts \$ 28,228,904	
	City or town, state or province, country, and ZIP or foreign postal code ORLANDO, FL 328725025			
	F Name and address of principal officer DAVID GARRISON CFO PO BOX 725025 ORLANDO, FL 328725025		H(a) Is this a group return for subordinates? ☐ Yes ☒ No H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list (see instructions)	
I Tax-exempt status ☐ 501(c)(3) ☒ 501(c)(6) ◀ (Insert no) ☐ 4947(a)(1) or ☐ 527		H(c) Group exemption number ▶		
J Website: ▶ WWW.FLORIDAREALTORS.ORG				
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶			L Year of formation 1970	M State of legal domicile FL

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities SUPPORTING THE REAL ESTATE INDUSTRY IN FLORIDA			
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3	Number of voting members of the governing body (Part VI, line 1a)	520	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	520	
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	151	
	6	Total number of volunteers (estimate if necessary)		
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	2,651,912	
7b	Net unrelated business taxable income from Form 990-T, line 34	-1,465,368		
Revenue	8	Contributions and grants (Part VIII, line 1h)	0	
	9	Program service revenue (Part VIII, line 2g)	18,628,982	20,570,630
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	740,280	445,029
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	369,931	575,062
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	19,739,193	21,590,721
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	122,724	139,263
14		Benefits paid to or for members (Part IX, column (A), line 4)		0
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	7,934,273	8,196,788
16a		Professional fundraising fees (Part IX, column (A), line 11e)		0
b		Total fundraising expenses (Part IX, column (D), line 25) ☐ 0		
17		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	9,719,515	10,273,165
18		Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	17,776,512	18,609,216
19		Revenue less expenses Subtract line 18 from line 12	1,962,681	2,981,505
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	20,659,419	24,124,765
	21	Total liabilities (Part X, line 26)	4,915,486	5,561,707
	22	Net assets or fund balances Subtract line 21 from line 20	15,743,933	18,563,058

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

Sign Here	*****				2015-11-09		
	Signature of officer				Date		
	DAVID GARRISON CFO						
	Type or print name and title						
Paid Preparer Use Only	Print/Type preparer's name ROSS WHITLEY		Preparer's signature ROSS WHITLEY		Date 2015-11-10	Check ☐ if self-employed	PTIN P01445797
	Firm's name ▶ BERMAN HOPKINS WRIGHT LAHAM CPAS & ASSOC					Firm's EIN ▶ 59-1152714	
	Firm's address ▶ 8035 SPYGLASS HILL RD MELBOURNE, FL 32940					Phone no (321) 757-2020	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

SUPPORTING THE REAL ESTATE INDUSTRY IN FLORIDA

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

YesNo

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

YesNo

If "Yes," describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as 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

(Code) (Expenses \$ 13,429,355 including grants of \$ 139,263) (Revenue \$ 21,590,721)

FURTHERANCE OF THE REAL ESTATE INDUSTRY IN FLORIDA PUBLICATIONS INCLUDE THE "FLORIDA REALTOR" MAGAZINE

4b

(Code) (Expenses \$ including grants of \$) (Revenue \$)

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$)

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses ▶ 13,429,355

Part 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		No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		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	Yes	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
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	Yes	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		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		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		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		No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	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		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		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	Yes	
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		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		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		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		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? If "Yes," complete Schedule F, Parts III and IV		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? If "Yes," complete Schedule G, Part I (see instructions)		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? If "Yes," complete Schedule G, Part II		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		No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part 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 domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. 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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	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? <i>If "Yes," complete Schedule N, Part I</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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
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	Yes	

Part 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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
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.		
2b	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).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
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?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	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?		
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	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.		
13b	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.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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.

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

Section 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		
	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		
1b	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	Yes
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	No
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	No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	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

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes
10b	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?	10b	Yes
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	No
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	15a	Yes
15b	Other officers or key employees of the organization	15b	Yes
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
16b	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?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	FL
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☒ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, address, and telephone number of the person who possesses the organization's books and records DAVID B GARRISON 7025 AUGUSTA NATIONAL DR ORLANDO, FL 32822 (407) 438-1400	

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) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	1,497,919		130,821

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 7

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
JTA LLC 1632 LOMA LINDA STREET SARASOTA, FL 34239	CONSULTING	126,004

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶1

Part VIII

Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a					
	b	Membership dues 1b					
	c	Fundraising events 1c					
	d	Related organizations 1d					
	e	Government grants (contributions) 1e					
	f	All other contributions, gifts, grants, and similar amounts not included above 1f					
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f					
Program Service Revenue	2a	MEMBER DUES	Business Code				
			900099	17,316,699	17,316,699		
	b	SERVICE FEES	900099	1,914,650		1,914,650	
	c	ADVERTISING	541800	692,404		692,404	
	d	TUITION	900099	646,877	646,877		
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		20,570,630			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		425,640		425,640	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties		43,359		43,359	
	6a		(i) Real	(ii) Personal			
			14,565				
		b	Less rental expenses				
		c	Rental income or (loss)	14,565			
	d	Net rental income or (loss)		14,565		14,565	
	7a		(i) Securities	(ii) Other			
			6,656,073	1,499			
		b	Less cost or other basis and sales expenses	6,638,183			
		c	Gain or (loss)	17,890	1,499		
	d	Net gain or (loss)		19,389	1,499	17,890	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from fundraising events					
	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less returns and allowances	a				
b	Less cost of goods sold	b					
c	Net income or (loss) from sales of inventory						
	Miscellaneous Revenue	Business Code					
11a	OTHER INCOME	900099	517,138	517,138			
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		517,138				
12	Total revenue. See Instructions		21,590,721	18,480,714	2,651,912	458,095	

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 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	139,263			
2	Grants and other assistance to domestic individuals See Part IV, line 22				
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				
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	7,397,036			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	236,494			
9	Other employee benefits	11,802			
10	Payroll taxes	551,456			
11	Fees for services (non-employees)				
a	Management				
b	Legal	3,845			
c	Accounting	32,451			
d	Lobbying	102,890			
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	70,404			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,242,080			
12	Advertising and promotion	290,333			
13	Office expenses	1,089,354			
14	Information technology	104,713			
15	Royalties				
16	Occupancy	488,457			
17	Travel	1,043,249			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	905,951			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	878,049			
23	Insurance	906,680			
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)				
a	COMPUTER	987,410			
b	HOSTING	270,631			
c	SERVICE CHARGES	248,389			
d	DATA BASE	229,081			
e	All other expenses	1,379,198			
25	Total functional expenses. Add lines 1 through 24e	18,609,216	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ☒ if following SOP 98-2 (ASC 958-720)				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		3,842,499	1	3,916,892
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		104,559	4	249,954
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		347,872	9	366,510
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a13,282,960			
	b	Less accumulated depreciation	10b10,537,935	2,921,763	10c	2,745,025
	11	Investments—publicly traded securities		12,981,710	11	16,577,966
	12	Investments—other securities See Part IV, line 11		130,638	12	143,680
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		330,378	15	124,738
	16	Total assets. Add lines 1 through 15 (must equal line 34)		20,659,419	16	24,124,765
Liabilities	17	Accounts payable and accrued expenses		807,498	17	921,160
	18	Grants payable			18	
	19	Deferred revenue		3,969,009	19	4,496,867
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	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		138,979	25	143,680
	26	Total liabilities. Add lines 17 through 25		4,915,486	26	5,561,707
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		15,743,933	27	18,563,058
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		15,743,933	33	18,563,058
	34	Total liabilities and net assets/fund balances		20,659,419	34	24,124,765

Part 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	21,590,721
2	Total expenses (must equal Part IX, column (A), line 25)	2	18,609,216
3	Revenue less expenses Subtract line 2 from line 1	3	2,981,505
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	15,743,933
5	Net unrealized gains (losses) on investments	5	-162,380
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	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	18,563,058

Part 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 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	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		

Additional Data

Software ID:

Software Version:

EIN: 59-0245475

Name: FLORIDA ASSOCIATION OF REALTORS
INC

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ERIKA E ABBOTT BOARD MEMBER	0 50	X						0	0	0
(1) HOPE A ABBOTT BOARD MEMBER	0 50	X						0	0	0
(2) GARY ABOFF BOARD MEMBER	0 50	X						0	0	0
(3) JESSE ACEVEDO BOARD MEMBER	0 50	X						0	0	0
(4) SUSAN ACKERSON BOARD MEMBER	0 50	X						0	0	0
(5) JOAN M ALIPO BOARD MEMBER	0 50	X						0	0	0
(6) MARGARET E ALLEN BOARD MEMBER	0 50	X						0	0	0
(7) CATHY J ALLEY BOARD MEMBER	0 50	X						0	0	0
(8) RANDALL E ALVORD BOARD MEMBER	0 50	X						0	0	0
(9) ISRAEL V AMEJEIRAS BOARD MEMBER	0 50	X						0	0	0
(10) IAN C ANDERSON BOARD MEMBER	0 50	X						0	0	0
(11) VICKI ANDERSON BOARD MEMBER	0 50	X						0	0	0
(12) FRANCISCO J ANGULO BOARD MEMBER	0 50	X						0	0	0
(13) NATALIE L ARROWSMITH BOARD MEMBER	0 50	X						0	0	0
(14) MICHAEL J ARTELLI BOARD MEMBER	0 50	X						0	0	0
(15) SCOTT A ARVIN BOARD MEMBER	0 50	X						0	0	0
(16) DONALD L ASHER BOARD MEMBER	0 50	X						0	0	0
(17) STEVEN D ASHER BOARD MEMBER	0 50	X						0	0	0
(18) MATTHEW J AUDIER BOARD MEMBER	0 50	X						0	0	0
(19) TIMOTHY D BACKER BOARD MEMBER	0 50	X						0	0	0
(20) STEPHEN N BAKER BOARD MEMBER	0 50	X						0	0	0
(21) TOM R BAKER BOARD MEMBER	0 50	X						0	0	0
(22) GARY BALANOFF BOARD MEMBER	0 50	X						0	0	0
(23) PAMELA L BANKS BOARD MEMBER	0 50	X						0	0	0
(24) RICHARD BARANSKI BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(26) ANTHONY K BARBAR BOARD MEMBER	0 50	X						0	0	0
(1) RAYMOND BARKETT BOARD MEMBER	0 50	X						0	0	0
(2) ROBERT D BARRON BOARD MEMBER	0 50	X						0	0	0
(3) MARIELA BARTENS BOARD MEMBER	0 50	X						0	0	0
(4) DENNIS E BASILE BOARD MEMBER	0 50	X						0	0	0
(5) KEVIN L BATDORF BOARD MEMBER	0 50	X						0	0	0
(6) JAMES A BATENCHUK BOARD MEMBER	0 50	X						0	0	0
(7) CHARLES B BATES BOARD MEMBER	0 50	X						0	0	0
(8) PAMELA S BEAUCHAMP BOARD MEMBER	0 50	X						0	0	0
(9) LAURA A BENSON BOARD MEMBER	0 50	X						0	0	0
(10) CAROL BERNTON BOARD MEMBER	0 50	X						0	0	0
(11) TERESITA BERSACH BOARD MEMBER	0 50	X						0	0	0
(12) ALMA B BETANCOURT BOARD MEMBER	0 50	X						0	0	0
(13) BERT BEVIS BOARD MEMBER	0 50	X						0	0	0
(14) MICHAEL A BINDMAN BOARD MEMBER	0 50	X						0	0	0
(15) ANDREW BIRCHALL BOARD MEMBER	0 50	X						0	0	0
(16) STANLEY H BISHOP BOARD MEMBER	0 50	X						0	0	0
(17) PATRICK T BISSETT BOARD MEMBER	0 50	X						0	0	0
(18) GEORGINA BLANCO BOARD MEMBER	0 50	X						0	0	0
(19) RYAN A BLEGGI BOARD MEMBER	0 50	X						0	0	0
(20) NICHOLAS C BOBZIEN BOARD MEMBER	0 50	X						0	0	0
(21) R GINENNE BOEHM BOARD MEMBER	0 50	X						0	0	0
(22) SARAH E BOGGS BOARD MEMBER	0 50	X						0	0	0
(23) CHRISTIAN E BOHYN BOARD MEMBER	0 50	X						0	0	0
(24) JILL J BOLES BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(51) CHARLES J BONFIGLIO BOARD MEMBER	0 50	X						0	0	0
(1) RICK E BOSCHEN BOARD MEMBER	0 50	X						0	0	0
(2) AARON M BOSSHARDT BOARD MEMBER	0 50	X						0	0	0
(3) MANUEL F BOUZA BOARD MEMBER	0 50	X						0	0	0
(4) DEBORAH M BOZA-VALLEDOR BOARD MEMBER	0 50	X						0	0	0
(5) BARBARA S BRADLEY BOARD MEMBER	0 50	X						0	0	0
(6) KATHY BRANDON BOARD MEMBER	0 50	X						0	0	0
(7) KRISTEN E BRENNER BOARD MEMBER	0 50	X						0	0	0
(8) DAVID H BREWER BOARD MEMBER	0 50	X						0	0	0
(9) SUSAN S BREWER BOARD MEMBER	0 50	X						0	0	0
(10) LA CRUZ LYNN BRIER-DE BOARD MEMBER	0 50	X						0	0	0
(11) MARION B BRIGGS BOARD MEMBER	0 50	X						0	0	0
(12) MARGARET P BROCK BOARD MEMBER	0 50	X						0	0	0
(13) ERVIN L BROWN BOARD MEMBER	0 50	X						0	0	0
(14) CLAUDETTE BRUCK BOARD MEMBER	0 50	X						0	0	0
(15) MICHAEL W BRUNO BOARD MEMBER	0 50	X						0	0	0
(16) ROGER BRUNSWICK BOARD MEMBER	0 50	X						0	0	0
(17) JANETTE M BRUZAS BOARD MEMBER	0 50	X						0	0	0
(18) KIMBERLY A BRYANT BOARD MEMBER	0 50	X						0	0	0
(19) JASON J BUCCI BOARD MEMBER	0 50	X						0	0	0
(20) JOSH P BURDINE BOARD MEMBER	0 50	X						0	0	0
(21) GREY C BURGE BOARD MEMBER	0 50	X						0	0	0
(22) DENNIS B BURGESS BOARD MEMBER	0 50	X						0	0	0
(23) DMICHAEL BURKE BOARD MEMBER	0 50	X						0	0	0
(24) ROBERT J BURR BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(76) JAMES BURSON BOARD MEMBER	0 50	X						0	0	0
(1) VANESSA BUSTAMANTE BOARD MEMBER	0 50	X						0	0	0
(2) ROBERT W BYRD BOARD MEMBER	0 50	X						0	0	0
(3) DOROTHY L BYRNE BOARD MEMBER	0 50	X						0	0	0
(4) RODRIGO J CABEZAS BOARD MEMBER	0 50	X						0	0	0
(5) MICHAEL P CADOGAN BOARD MEMBER	0 50	X						0	0	0
(6) ROBERT W CALDWELL BOARD MEMBER	0 50	X						0	0	0
(7) LINDA CALEBRO-KUDER BOARD MEMBER	0 50	X						0	0	0
(8) DEBORAH S CARDENAS BOARD MEMBER	0 50	X						0	0	0
(9) ROBERT H CARDENAS BOARD MEMBER	0 50	X						0	0	0
(10) DAVID L CARLISLE BOARD MEMBER	0 50	X						0	0	0
(11) INGRID B CARLOS BOARD MEMBER	0 50	X						0	0	0
(12) CAROLINE CARRARA BOARD MEMBER	0 50	X						0	0	0
(13) ALBERTO CARRILLO BOARD MEMBER	0 50	X						0	0	0
(14) MARIA E CARRILLO BOARD MEMBER	0 50	X						0	0	0
(15) JOHN L CASTELLI BOARD MEMBER	0 50	X						0	0	0
(16) JOANNE MARIE CHANDO BOARD MEMBER	0 50	X						0	0	0
(17) DAISY CID BOARD MEMBER	0 50	X						0	0	0
(18) RONALD F CIKA BOARD MEMBER	0 50	X						0	0	0
(19) KAZ CISOWSKI BOARD MEMBER	0 50	X						0	0	0
(20) MICHELLE R CLARK BOARD MEMBER	0 50	X						0	0	0
(21) JERELYN J COBB BOARD MEMBER	0 50	X						0	0	0
(22) ANGEL E COBO BOARD MEMBER	0 50	X						0	0	0
(23) MARTIN COHEN BOARD MEMBER	0 50	X						0	0	0
(24) NORMA M COHEN BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(101) MARI L COLGAN BOARD MEMBER	0 50	X						0	0	0
(1) ANITA COLLETTI BOARD MEMBER	0 50	X						0	0	0
(2) RJ J COLLINS BOARD MEMBER	0 50	X						0	0	0
(3) LAUREN W CONNOLLY BOARD MEMBER	0 50	X						0	0	0
(4) HARLEY P CONRAD BOARD MEMBER	0 50	X						0	0	0
(5) DIANE B COOK BOARD MEMBER	0 50	X						0	0	0
(6) JAMES L COOK BOARD MEMBER	0 50	X						0	0	0
(7) CLEBERTO L COPETTI BOARD MEMBER	0 50	X						0	0	0
(8) MICHELLE CRABTREE BOARD MEMBER	0 50	X						0	0	0
(9) DIANA CRONKHITE BOARD MEMBER	0 50	X						0	0	0
(10) NANCY-ELLEN DANCE-OTTE BOARD MEMBER	0 50	X						0	0	0
(11) JEFFREY A DANIELS BOARD MEMBER	0 50	X						0	0	0
(12) R TODD DANTZLER BOARD MEMBER	0 50	X						0	0	0
(13) MICHAEL W DAVENPORT BOARD MEMBER	0 50	X						0	0	0
(14) STEVEN J DAVID BOARD MEMBER	0 50	X						0	0	0
(15) WENDELL D DAVIS BOARD MEMBER	0 50	X						0	0	0
(16) MARTINO RALPH E DE BOARD MEMBER	0 50	X						0	0	0
(17) SEVILLA MARIA DE BOARD MEMBER	0 50	X						0	0	0
(18) WILLIAM M DEAN BOARD MEMBER	0 50	X						0	0	0
(19) ANN M DEFRIES BOARD MEMBER	0 50	X						0	0	0
(20) DENNIS DEGROOT BOARD MEMBER	0 50	X						0	0	0
(21) KATHERINE DELANEY BOARD MEMBER	0 50	X						0	0	0
(22) OSCAR J DELGADO BOARD MEMBER	0 50	X						0	0	0
(23) ROSA DELGADO BOARD MEMBER	0 50	X						0	0	0
(24) PATRICE M DENIKE BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(126) JEANNE DENTON-SCHECK BOARD MEMBER	0 50	X						0	0	0
(1) RICK DEPALMA BOARD MEMBER	0 50	X						0	0	0
(2) GLENDA S DEVANE BOARD MEMBER	0 50	X						0	0	0
(3) KAREN P DIERICKX BOARD MEMBER	0 50	X						0	0	0
(4) JOSEPH R DOHER BOARD MEMBER	0 50	X						0	0	0
(5) JOHN DOHM BOARD MEMBER	0 50	X						0	0	0
(6) LINDSAY W DOLAMORE BOARD MEMBER	0 50	X						0	0	0
(7) MICHAEL A DOOLEY BOARD MEMBER	0 50	X						0	0	0
(8) RORY A DUBIN BOARD MEMBER	0 50	X						0	0	0
(9) KIMBERLY S DUCHARME BOARD MEMBER	0 50	X						0	0	0
(10) DONNA J DUNAWAY BOARD MEMBER	0 50	X						0	0	0
(11) MARGARET E DUNNE BOARD MEMBER	0 50	X						0	0	0
(12) SERGIO DURAN BOARD MEMBER	0 50	X						0	0	0
(13) LISA A DURGIN BOARD MEMBER	0 50	X						0	0	0
(14) DAVID DWECK BOARD MEMBER	0 50	X						0	0	0
(15) TERESA A DYER BOARD MEMBER	0 50	X						0	0	0
(16) JEAN N ECKMAN BOARD MEMBER	0 50	X						0	0	0
(17) NOEL A EDWARDS BOARD MEMBER	0 50	X						0	0	0
(18) HOWARD B ELFMAN BOARD MEMBER	0 50	X						0	0	0
(19) BRUCE E ELLIOTT BOARD MEMBER	0 50	X						0	0	0
(20) ROBERT G ELLIOTT BOARD MEMBER	0 50	X						0	0	0
(21) ROBERT H ELROD BOARD MEMBER	0 50	X						0	0	0
(22) JOHN C ELYA BOARD MEMBER	0 50	X						0	0	0
(23) DIANA ENGLEHART BOARD MEMBER	0 50	X						0	0	0
(24) ENOCH ESPINOSA BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(151) CINDY L ESSELBURN BOARD MEMBER	0 50	X						0	0	0
(1) DENNIS L FADDEN BOARD MEMBER	0 50	X						0	0	0
(2) IVA D FADLEY-DANE BOARD MEMBER	0 50	X						0	0	0
(3) JEFFREY M FAGAN BOARD MEMBER	0 50	X						0	0	0
(4) DOMENIC R FARO BOARD MEMBER	0 50	X						0	0	0
(5) JORGE A FERNANDEZ BOARD MEMBER	0 50	X						0	0	0
(6) JORGE H FERNANDEZ BOARD MEMBER	0 50	X						0	0	0
(7) SANDRA FERNANDEZ BOARD MEMBER	0 50	X						0	0	0
(8) MIKE FERRIE BOARD MEMBER	0 50	X						0	0	0
(9) LISA H FERRINGO BOARD MEMBER	0 50	X						0	0	0
(10) DAVID R FERRO BOARD MEMBER	0 50	X						0	0	0
(11) BRENDA C FIORETTI BOARD MEMBER	0 50	X						0	0	0
(12) RICHARD E FIORETTI BOARD MEMBER	0 50	X						0	0	0
(13) PATRICIA S FITZGERALD BOARD MEMBER	0 50	X						0	0	0
(14) MARCO A FONSECA BOARD MEMBER	0 50	X						0	0	0
(15) LEE D FORBES BOARD MEMBER	0 50	X						0	0	0
(16) LISA C FORD BOARD MEMBER	0 50	X						0	0	0
(17) LINDA K FORMELLA BOARD MEMBER	0 50	X						0	0	0
(18) BARBARA A FOX BOARD MEMBER	0 50	X						0	0	0
(19) TYLON J FRALEY BOARD MEMBER	0 50	X						0	0	0
(20) MICHAEL J FRYE BOARD MEMBER	0 50	X						0	0	0
(21) RICHARD T FRYER BOARD MEMBER	0 50	X						0	0	0
(22) WILLIAM C FURST BOARD MEMBER	0 50	X						0	0	0
(23) BRANDI J GABBARD BOARD MEMBER	0 50	X						0	0	0
(24) SUSAN GAIESKI BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(176) MCIVER KATHLEEN A GALLAGHER BOARD MEMBER	0 50	X						0	0	0
(1) CASSANDRA G GALLEG0 BOARD MEMBER	0 50	X						0	0	0
(2) ANTHONY GAMBARDELLA BOARD MEMBER	0 50	X						0	0	0
(3) APRIL GAYLE GAUSMAN BOARD MEMBER	0 50	X						0	0	0
(4) WILLIAM A GELLER BOARD MEMBER	0 50	X						0	0	0
(5) DENISE GEOGHEGAN BOARD MEMBER	0 50	X						0	0	0
(6) JUAN C GERMAN BOARD MEMBER	0 50	X						0	0	0
(7) KIMBERLY GETTLE BOARD MEMBER	0 50	X						0	0	0
(8) BRENDA G GHIBAUDI BOARD MEMBER	0 50	X						0	0	0
(9) JOHN T GIBES BOARD MEMBER	0 50	X						0	0	0
(10) JUDITH A GIETZEN BOARD MEMBER	0 50	X						0	0	0
(11) JULIANNA E GIORDANO BOARD MEMBER	0 50	X						0	0	0
(12) LINDA S GOLDFARB BOARD MEMBER	0 50	X						0	0	0
(13) ROBERT N GOLDSTEIN BOARD MEMBER	0 50	X						0	0	0
(14) FAYOLA T GOLDSTONE BOARD MEMBER	0 50	X						0	0	0
(15) MAUREEN A G0LMONT BOARD MEMBER	0 50	X						0	0	0
(16) HOLLIE M GONDERA BOARD MEMBER	0 50	X						0	0	0
(17) JOSE I GONZALEZ BOARD MEMBER	0 50	X						0	0	0
(18) STEVEN S GRAUL BOARD MEMBER	0 50	X						0	0	0
(19) ANTHONY M GRAZIANO BOARD MEMBER	0 50	X						0	0	0
(20) SUMMER J GREENE BOARD MEMBER	0 50	X						0	0	0
(21) FRANCOIS K GREGOIRE BOARD MEMBER	0 50	X						0	0	0
(22) THOMAS D GRIZZARD BOARD MEMBER	0 50	X						0	0	0
(23) BARRY M GROOMS BOARD MEMBER	0 50	X						0	0	0
(24) RUSSELL GROOMS BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(201) SHERRY S GROOMS BOARD MEMBER	0 50	X						0	0	0
(1) JR JORGE LUIS GUERRA BOARD MEMBER	0 50	X						0	0	0
(2) DONNA M GUIDO BOARD MEMBER	0 50	X						0	0	0
(3) FRANK J GULISANO BOARD MEMBER	0 50	X						0	0	0
(4) FRANK GUNDLACH BOARD MEMBER	0 50	X						0	0	0
(5) CARLOS GUTIERREZ BOARD MEMBER	0 50	X						0	0	0
(6) ELLIOTT N HAGOOD BOARD MEMBER	0 50	X						0	0	0
(7) GINA B HALL BOARD MEMBER	0 50	X						0	0	0
(8) MELODY M HALL BOARD MEMBER	0 50	X						0	0	0
(9) MATTHEW T HALPERIN BOARD MEMBER	0 50	X						0	0	0
(10) ALAN D HARMON BOARD MEMBER	0 50	X						0	0	0
(11) RONALD P HARRIS BOARD MEMBER	0 50	X						0	0	0
(12) TIM K HARRIS BOARD MEMBER	0 50	X						0	0	0
(13) TINA C HARRIS BOARD MEMBER	0 50	X						0	0	0
(14) ROBERT HARTLEY BOARD MEMBER	0 50	X						0	0	0
(15) ANDREA J HATTON BOARD MEMBER	0 50	X						0	0	0
(16) CYNTHIA C HAYDON BOARD MEMBER	0 50	X						0	0	0
(17) DAN R HAZY BOARD MEMBER	0 50	X						0	0	0
(18) ELISHA HEEBNER BOARD MEMBER	0 50	X						0	0	0
(19) JAMES G HEIDISCH BOARD MEMBER	0 50	X						0	0	0
(20) THOMAS J HEISER BOARD MEMBER	0 50	X						0	0	0
(21) PAULA K HELLENBRAND BOARD MEMBER	0 50	X						0	0	0
(22) LYNNETTE HENDRICKS BOARD MEMBER	0 50	X						0	0	0
(23) PAUL B HENDRIKS BOARD MEMBER	0 50	X						0	0	0
(24) MICHELE G HERNDON BOARD MEMBER	0 50	X						0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(226) DAVID P HITCHCOCK BOARD MEMBER	0 50	X						0	0	0
(1) ELIZABETH M HOBART BOARD MEMBER	0 50	X						0	0	0
(2) NANCY B HOGAN BOARD MEMBER	0 50	X						0	0	0
(3) CAROL B HOUSEN BOARD MEMBER	0 50	X						0	0	0
(4) BOB S HUDGENS BOARD MEMBER	0 50	X						0	0	0
(5) PHILLIP HUDSON BOARD MEMBER	0 50	X						0	0	0
(6) MICHAEL L HUGHES BOARD MEMBER	0 50	X						0	0	0
(7) BUDGE S HUSKEY BOARD MEMBER	0 50	X						0	0	0
(8) CASSANDRA D INGRAHAM BOARD MEMBER	0 50	X						0	0	0
(9) JASON M JAKUS BOARD MEMBER	0 50	X						0	0	0
(10) GEORGE C JALIL BOARD MEMBER	0 50	X						0	0	0
(11) MARY JALIL BOARD MEMBER	0 50	X						0	0	0
(12) MICHAEL JALIL BOARD MEMBER	0 50	X						0	0	0
(13) ALEXANDER JANSEN BOARD MEMBER	0 50	X						0	0	0
(14) MARC V JERNIGAN BOARD MEMBER	0 50	X						0	0	0
(15) GARCIA JUSTINE JIMENEZ BOARD MEMBER	0 50	X						0	0	0
(16) JILL A JOHNS BOARD MEMBER	0 50	X						0	0	0
(17) CONNIE M JOHNSON BOARD MEMBER	0 50	X						0	0	0
(18) JASON A JOHNSON BOARD MEMBER	0 50	X						0	0	0
(19) MICHELLE W JOHNSON BOARD MEMBER	0 50	X						0	0	0
(20) DANA E JONES BOARD MEMBER	0 50	X						0	0	0
(21) JAMES R JONES BOARD MEMBER	0 50	X						0	0	0
(22) JEFFREY M JONES BOARD MEMBER	0 50	X						0	0	0
(23) LYNN H JONES BOARD MEMBER	0 50	X						0	0	0
(24) BARBARA S JORDAN BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(251) MARIA G JUNCADELLA BOARD MEMBER	0 50	X						0	0	0
(1) DALE G JUNDT BOARD MEMBER	0 50	X						0	0	0
(2) CHARLES R KASSAW BOARD MEMBER	0 50	X						0	0	0
(3) EDWARD A KEARNEY BOARD MEMBER	0 50	X						0	0	0
(4) WILLIAM KEHOE BOARD MEMBER	0 50	X						0	0	0
(5) DIANE B KELLER BOARD MEMBER	0 50	X						0	0	0
(6) GERALD T KELLEY BOARD MEMBER	0 50	X						0	0	0
(7) KEVIN KENT BOARD MEMBER	0 50	X						0	0	0
(8) HERMAN KENTOLALL BOARD MEMBER	0 50	X						0	0	0
(9) JOHN P KERN BOARD MEMBER	0 50	X						0	0	0
(10) ROBIN J KESLER BOARD MEMBER	0 50	X						0	0	0
(11) DANIEL KIJNER BOARD MEMBER	0 50	X						0	0	0
(12) PAULA R KIKER BOARD MEMBER	0 50	X						0	0	0
(13) SAM KINKAID BOARD MEMBER	0 50	X						0	0	0
(14) CAROL L KINNARD BOARD MEMBER	0 50	X						0	0	0
(15) JOHN R KINNEY BOARD MEMBER	0 50	X						0	0	0
(16) TIMOTHY M KINZLER BOARD MEMBER	0 50	X						0	0	0
(17) HOWARD KLAHR BOARD MEMBER	0 50	X						0	0	0
(18) CHRISTINE M KNIGHTON BOARD MEMBER	0 50	X						0	0	0
(19) ERIK V KORZILIUS BOARD MEMBER	0 50	X						0	0	0
(20) FRANK E KOWALSKI BOARD MEMBER	0 50	X						0	0	0
(21) BARBARA R KOZLOW BOARD MEMBER	0 50	X						0	0	0
(22) RANDY L KRISE BOARD MEMBER	0 50	X						0	0	0
(23) DONALD R KUDER BOARD MEMBER	0 50	X						0	0	0
(24) WESLIE E KUNKLE BOARD MEMBER	0 50	X						0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(276) AUDREY R LACKIE BOARD MEMBER	0 50	X						0	0	0
(1) LEA LAGUEUX BOARD MEMBER	0 50	X						0	0	0
(2) DONNA A LANCASTER BOARD MEMBER	0 50	X						0	0	0
(3) MARYANN K LAWLER BOARD MEMBER	0 50	X						0	0	0
(4) BONNIE S LAZAR BOARD MEMBER	0 50	X						0	0	0
(5) JOHN E LAZENBY BOARD MEMBER	0 50	X						0	0	0
(6) ALBERT R LEE BOARD MEMBER	0 50	X						0	0	0
(7) RONALD B LENNEN BOARD MEMBER	0 50	X						0	0	0
(8) JACK H LEVINE BOARD MEMBER	0 50	X						0	0	0
(9) JEFFREY J LEVINE BOARD MEMBER	0 50	X						0	0	0
(10) EDWIN E LIGHT BOARD MEMBER	0 50	X						0	0	0
(11) WANDA M LINSCHOTT BOARD MEMBER	0 50	X						0	0	0
(12) CYNTHIA LOGAN BOARD MEMBER	0 50	X						0	0	0
(13) JILL E LONG BOARD MEMBER	0 50	X						0	0	0
(14) DANIEL A LOPEZ BOARD MEMBER	0 50	X						0	0	0
(15) ENRIQUE LOPEZ BOARD MEMBER	0 50	X						0	0	0
(16) TINA M LOPEZ BOARD MEMBER	0 50	X						0	0	0
(17) VILMA LOPEZ BOARD MEMBER	0 50	X						0	0	0
(18) JARROD LOWE BOARD MEMBER	0 50	X						0	0	0
(19) GEORGE F LUBECK BOARD MEMBER	0 50	X						0	0	0
(20) NANCY J LUBECK BOARD MEMBER	0 50	X						0	0	0
(21) LOUIS LUDWIG BOARD MEMBER	0 50	X						0	0	0
(22) CAROLA LUEDER BOARD MEMBER	0 50	X						0	0	0
(23) TRICIA D LUTHER BOARD MEMBER	0 50	X						0	0	0
(24) LAUREN M LYONS BOARD MEMBER	0 50	X						0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(301) ANTHONY MACALUSO BOARD MEMBER	0 50	X						0	0	0
(1) VIVIAN MACIAS BOARD MEMBER	0 50	X						0	0	0
(2) MARGO L MACKENZIE BOARD MEMBER	0 50	X						0	0	0
(3) ROBIN L MADDEN BOARD MEMBER	0 50	X						0	0	0
(4) SUSANNA MADDEN BOARD MEMBER	0 50	X						0	0	0
(5) MARILUE M MARIS BOARD MEMBER	0 50	X						0	0	0
(6) JAMES F MARIUCCI BOARD MEMBER	0 50	X						0	0	0
(7) FRAN MARKOWITZ BOARD MEMBER	0 50	X						0	0	0
(8) RANDOLPH W MARTIN BOARD MEMBER	0 50	X						0	0	0
(9) FERNANDO I MARTINEZ BOARD MEMBER	0 50	X						0	0	0
(10) BEATRIX H MASOTTI BOARD MEMBER	0 50	X						0	0	0
(11) RICHARD R MASTERSON BOARD MEMBER	0 50	X						0	0	0
(12) DIANNE M MATTIACE BOARD MEMBER	0 50	X						0	0	0
(13) MARY T MCCALL BOARD MEMBER	0 50	X						0	0	0
(14) DIANE E MCCOMBS BOARD MEMBER	0 50	X						0	0	0
(15) DWIGHT A MCDONALD BOARD MEMBER	0 50	X						0	0	0
(16) GEORGE MCGRAW BOARD MEMBER	0 50	X						0	0	0
(17) ROBIN L MCKEEVER BOARD MEMBER	0 50	X						0	0	0
(18) JODI MCKEITHAN BOARD MEMBER	0 50	X						0	0	0
(19) LINDA C MCMORROW BOARD MEMBER	0 50	X						0	0	0
(20) VICKY L MCPHEE BOARD MEMBER	0 50	X						0	0	0
(21) STEPHEN B MCWILLIAM BOARD MEMBER	0 50	X						0	0	0
(22) GONZALO M MEJIA BOARD MEMBER	0 50	X						0	0	0
(23) CARLOS A MELENDEZ BOARD MEMBER	0 50	X						0	0	0
(24) LIZA E MENDEZ BOARD MEMBER	0 50	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(326) STEVEN L MERCHANT BOARD MEMBER	0 50	X						0	0	0
(1) KIM M MEREDITH-HAMPTON BOARD MEMBER	0 50	X						0	0	0
(2) REINALDO L MESA BOARD MEMBER	0 50	X						0	0	0
(3) BONNIE F METVINER BOARD MEMBER	0 50	X						0	0	0
(4) JOHN J MIKE BOARD MEMBER	0 50	X						0	0	0
(5) DEAN G MILLER BOARD MEMBER	0 50	X						0	0	0
(6) DEBORAH J MILLER BOARD MEMBER	0 50	X						0	0	0
(7) ELLEN MITCHEL BOARD MEMBER	0 50	X						0	0	0
(8) LINDA MITCHELL BOARD MEMBER	0 50	X						0	0	0
(9) HARRY J MITCHEM BOARD MEMBER	0 50	X						0	0	0
(10) BRAD MONROE BOARD MEMBER	0 50	X						0	0	0
(11) LYNN K MOONEY BOARD MEMBER	0 50	X						0	0	0
(12) JENNIFER MOORHEAD BOARD MEMBER	0 50	X						0	0	0
(13) EBEN V MORAN BOARD MEMBER	0 50	X						0	0	0
(14) STEVEN W MOREIRA BOARD MEMBER	0 50	X						0	0	0
(15) MARGARET D MORRIS BOARD MEMBER	0 50	X						0	0	0
(16) RICHARD M MORRIS BOARD MEMBER	0 50	X						0	0	0
(17) CHRISTINA H MORRISON BOARD MEMBER	0 50	X						0	0	0
(18) CHARLES MORTON BOARD MEMBER	0 50	X						0	0	0
(19) JACK R MYERS BOARD MEMBER	0 50	X						0	0	0
(20) BRIAN NEUBAUER BOARD MEMBER	0 50	X						0	0	0
(21) SHARON M NEUHOFFER BOARD MEMBER	0 50	X						0	0	0
(22) TERRELL P NEWBERRY BOARD MEMBER	0 50	X						0	0	0
(23) MIRIAM NICKLAUS BOARD MEMBER	0 50	X						0	0	0
(24) LOUIS H NIMKOFF BOARD MEMBER	0 50	X						0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(351) AMITY NOWLING BOARD MEMBER	0 50	X						0	0	0
(1) JOSE AUGUSTO P NUNES BOARD MEMBER	0 50	X						0	0	0
(2) CHARLENE OAKOWSKY BOARD MEMBER	0 50	X						0	0	0
(3) NEAL A OATES BOARD MEMBER	0 50	X						0	0	0
(4) MAYRA OCANA BOARD MEMBER	0 50	X						0	0	0
(5) MADELAINE OJEDA BOARD MEMBER	0 50	X						0	0	0
(6) KEVIN P O'KEEFE BOARD MEMBER	0 50	X						0	0	0
(7) MICHAEL W OWEN BOARD MEMBER	0 50	X						0	0	0
(8) GREG J OWENS BOARD MEMBER	0 50	X						0	0	0
(9) DOMINIC L PALLINI BOARD MEMBER	0 50	X						0	0	0
(10) KAREN S PALMER BOARD MEMBER	0 50	X						0	0	0
(11) CHRISTINA PAPPAS BOARD MEMBER	0 50	X						0	0	0
(12) ANAND PATEL BOARD MEMBER	0 50	X						0	0	0
(13) SUSAN PEARSON BOARD MEMBER	0 50	X						0	0	0
(14) JOE J PEREZ BOARD MEMBER	0 50	X						0	0	0
(15) JOHN S PERRONE BOARD MEMBER	0 50	X						0	0	0
(16) JEFFREY D PERRY BOARD MEMBER	0 50	X						0	0	0
(17) LYNN M PETERS BOARD MEMBER	0 50	X						0	0	0
(18) MICHAEL PETRO BOARD MEMBER	0 50	X						0	0	0
(19) ERIC J PFEIFER BOARD MEMBER	0 50	X						0	0	0
(20) LORI PIEROT BOARD MEMBER	0 50	X						0	0	0
(21) JACKIE PILCHER BOARD MEMBER	0 50	X						0	0	0
(22) TERRY J PILCHER BOARD MEMBER	0 50	X						0	0	0
(23) JAMES A PILON BOARD MEMBER	0 50	X						0	0	0
(24) BEVERLY Y PINDLING BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(376) ROGER M PIRO BOARD MEMBER	0 50	X						0	0	0
(1) CHRISTINA R PITCHFORD BOARD MEMBER	0 50	X						0	0	0
(2) PATRICIA K PITOCCHI BOARD MEMBER	0 50	X						0	0	0
(3) REDDY ANGELA PITRE BOARD MEMBER	0 50	X						0	0	0
(4) MARTHA POMARES BOARD MEMBER	0 50	X						0	0	0
(5) WILLIAM H POTEET BOARD MEMBER	0 50	X						0	0	0
(6) FRANK X PULLES BOARD MEMBER	0 50	X						0	0	0
(7) JULIA C PULLES BOARD MEMBER	0 50	X						0	0	0
(8) JAMES QUINN BOARD MEMBER	0 50	X						0	0	0
(9) ROBIN M RAIFF BOARD MEMBER	0 50	X						0	0	0
(10) JUDY MARY RAMELLA BOARD MEMBER	0 50	X						0	0	0
(11) ANDRES RANGEL BOARD MEMBER	0 50	X						0	0	0
(12) VICTOR J RAYMOS BOARD MEMBER	0 50	X						0	0	0
(13) PA DEBORAH A RECTOR BOARD MEMBER	0 50	X						0	0	0
(14) EDWARD J REDLICH BOARD MEMBER	0 50	X						0	0	0
(15) DONNA REID BOARD MEMBER	0 50	X						0	0	0
(16) WILLIAM S REID BOARD MEMBER	0 50	X						0	0	0
(17) AURA C RENGIFO BOARD MEMBER	0 50	X						0	0	0
(18) PATRICIA A RENNA BOARD MEMBER	0 50	X						0	0	0
(19) OSCAR N RESEK BOARD MEMBER	0 50	X						0	0	0
(20) MITCH S RIBAK BOARD MEMBER	0 50	X						0	0	0
(21) WILLIAM B RICHARDSON BOARD MEMBER	0 50	X						0	0	0
(22) PHIL RIEK BOARD MEMBER	0 50	X						0	0	0
(23) LYNNE RIFKIN BOARD MEMBER	0 50	X						0	0	0
(24) NANCY J RILEY BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(401) XINA RIM BOARD MEMBER	0 50	X						0	0	0
(1) ED P ROBERTS BOARD MEMBER	0 50	X						0	0	0
(2) ROSE M ROBERTS BOARD MEMBER	0 50	X						0	0	0
(3) JACK RODRIGUEZ BOARD MEMBER	0 50	X						0	0	0
(4) MICHELLE ROJAS BOARD MEMBER	0 50	X						0	0	0
(5) GREGORY D ROKEH BOARD MEMBER	0 50	X						0	0	0
(6) SUSAN C ROOD BOARD MEMBER	0 50	X						0	0	0
(7) GERRI ROSENTHAL BOARD MEMBER	0 50	X						0	0	0
(8) MELINDA S ROVILLO BOARD MEMBER	0 50	X						0	0	0
(9) LARRY R ROWE BOARD MEMBER	0 50	X						0	0	0
(10) JOHN J RURKOWSKI BOARD MEMBER	0 50	X						0	0	0
(11) ROBERT J RUSSOTTO BOARD MEMBER	0 50	X						0	0	0
(12) JUDI RUTLAND BOARD MEMBER	0 50	X						0	0	0
(13) KARUNA SABHARWAL BOARD MEMBER	0 50	X						0	0	0
(14) MARK SADEK BOARD MEMBER	0 50	X						0	0	0
(15) III ALLAN G SAFRANEK BOARD MEMBER	0 50	X						0	0	0
(16) ERIC SAIN BOARD MEMBER	0 50	X						0	0	0
(17) BETTY A SALAS BOARD MEMBER	0 50	X						0	0	0
(18) THOMAS F SALOMONE BOARD MEMBER	0 50	X						0	0	0
(19) JOHN SAPONE BOARD MEMBER	0 50	X						0	0	0
(20) LEON S SARKISIAN BOARD MEMBER	0 50	X						0	0	0
(21) LLC TOM SCAGLIONE BOARD MEMBER	0 50	X						0	0	0
(22) ANDREW J SCAGLIONE BOARD MEMBER	0 50	X						0	0	0
(23) BEN G SCHACHTER BOARD MEMBER	0 50	X						0	0	0
(24) JAMES C SCHANZ BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(426) JOSEPH P SCHLITT BOARD MEMBER	0 50	X						0	0	0
(1) THERESA M SCHREIBER BOARD MEMBER	0 50	X						0	0	0
(2) CLAIRE G SCHWARTZ BOARD MEMBER	0 50	X						0	0	0
(3) ROBIN A SCHWARTZ BOARD MEMBER	0 50	X						0	0	0
(4) TRINA R SEARCY BOARD MEMBER	0 50	X						0	0	0
(5) JULIO SEDA BOARD MEMBER	0 50	X						0	0	0
(6) LOURDES SEDA BOARD MEMBER	0 50	X						0	0	0
(7) MARK R SEEBERG BOARD MEMBER	0 50	X						0	0	0
(8) JOSE M SERRANO BOARD MEMBER	0 50	X						0	0	0
(9) CYNTHIA J SHAFER BOARD MEMBER	0 50	X						0	0	0
(10) CHRISTOPHER D SHAHEEN BOARD MEMBER	0 50	X						0	0	0
(11) RICHARD S SHANAHAN BOARD MEMBER	0 50	X						0	0	0
(12) THOMAS E SHELLY BOARD MEMBER	0 50	X						0	0	0
(13) CYNTHIA C SHELTON BOARD MEMBER	0 50	X						0	0	0
(14) MICHAEL R SHELTON BOARD MEMBER	0 50	X						0	0	0
(15) CARL SHENNING BOARD MEMBER	0 50	X						0	0	0
(16) SUZANNE SHERER BOARD MEMBER	0 50	X						0	0	0
(17) CARDIGAN W SHIPMAN BOARD MEMBER	0 50	X						0	0	0
(18) CHRISTEL SILVER BOARD MEMBER	0 50	X						0	0	0
(19) STEVEN SILVERMAN BOARD MEMBER	0 50	X						0	0	0
(20) PATRICK SIMM BOARD MEMBER	0 50	X						0	0	0
(21) BETTIE L SLAY BOARD MEMBER	0 50	X						0	0	0
(22) JOHN H SLIVON BOARD MEMBER	0 50	X						0	0	0
(23) JO-ANN SLOAN BOARD MEMBER	0 50	X						0	0	0
(24) KATHY J SLUSSER BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(451) DANIEL W SMITH BOARD MEMBER	0 50	X						0	0	0
(1) KAREN C SMITH BOARD MEMBER	0 50	X						0	0	0
(2) RITA B SMITH BOARD MEMBER	0 50	X						0	0	0
(3) ALFREDDA J SMITH-ODATO BOARD MEMBER	0 50	X						0	0	0
(4) DJ SNAPP BOARD MEMBER	0 50	X						0	0	0
(5) TANSEY M SODERSTROM BOARD MEMBER	0 50	X						0	0	0
(6) DEBRA SPADAFORA BOARD MEMBER	0 50	X						0	0	0
(7) VIRGINIA M SPENCER BOARD MEMBER	0 50	X						0	0	0
(8) SHANE T SPRING BOARD MEMBER	0 50	X						0	0	0
(9) JULIE A STARBUCK BOARD MEMBER	0 50	X						0	0	0
(10) STAFFORD L STARCHER BOARD MEMBER	0 50	X						0	0	0
(11) JAMES J STEINBAUER BOARD MEMBER	0 50	X						0	0	0
(12) WILLIAM STEINKE BOARD MEMBER	0 50	X						0	0	0
(13) REESE STEWART BOARD MEMBER	0 50	X						0	0	0
(14) SANDRA R STREIT BOARD MEMBER	0 50	X						0	0	0
(15) JAYNE L STROSHEIN-ROUSSEAU BOARD MEMBER	0 50	X						0	0	0
(16) SALLY A SUSLAK BOARD MEMBER	0 50	X						0	0	0
(17) KAREN D SWANBECK BOARD MEMBER	0 50	X						0	0	0
(18) NONA L SWANN BOARD MEMBER	0 50	X						0	0	0
(19) ZSOLT SZERENCSES BOARD MEMBER	0 50	X						0	0	0
(20) DANYETTA M TAVARES BOARD MEMBER	0 50	X						0	0	0
(21) LAURE H TAYLOR BOARD MEMBER	0 50	X						0	0	0
(22) SARAH M TAYLOR BOARD MEMBER	0 50	X						0	0	0
(23) VERNON E TAYLOR BOARD MEMBER	0 50	X						0	0	0
(24) CHRISTOPHER TELLO BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(476) ROBERT H TESSMER BOARD MEMBER	0 50	X						0	0	0
(1) HEMENDRA THAKKAR BOARD MEMBER	0 50	X						0	0	0
(2) ANGELA M THARP BOARD MEMBER	0 50	X						0	0	0
(3) BARBARA F TRIA BOARD MEMBER	0 50	X						0	0	0
(4) KRISTIN K TRIOLO BOARD MEMBER	0 50	X						0	0	0
(5) VENEMA THEODORA M UNIKEN BOARD MEMBER	0 50	X						0	0	0
(6) XENA A VALLONE BOARD MEMBER	0 50	X						0	0	0
(7) DAM BARBARA J VAN BOARD MEMBER	0 50	X						0	0	0
(8) PELT JULIE C VAN BOARD MEMBER	0 50	X						0	0	0
(9) ROYCE D VANDERPOOL BOARD MEMBER	0 50	X						0	0	0
(10) CARMEN I VASQUEZ BOARD MEMBER	0 50	X						0	0	0
(11) MAURICE J VEISSI BOARD MEMBER	0 50	X						0	0	0
(12) GARY VERWILT BOARD MEMBER	0 50	X						0	0	0
(13) PHILIP VIAS BOARD MEMBER	0 50	X						0	0	0
(14) LISA VIZCAINO BOARD MEMBER	0 50	X						0	0	0
(15) SHARON P VOSS BOARD MEMBER	0 50	X						0	0	0
(16) CORINNE L WALDENMAYER BOARD MEMBER	0 50	X						0	0	0
(17) JOEL L WARD BOARD MEMBER	0 50	X						0	0	0
(18) WILLIAM A WATSON BOARD MEMBER	0 50	X						0	0	0
(19) MARTHA WEINER BOARD MEMBER	0 50	X						0	0	0
(20) TIM WEISHEYER BOARD MEMBER	0 50	X						0	0	0
(21) JAMES L WEIX BOARD MEMBER	0 50	X						0	0	0
(22) ANNALISA WELLER BOARD MEMBER	0 50	X						0	0	0
(23) CATHERINE B WHATLEY BOARD MEMBER	0 50	X						0	0	0
(24) LYNN A WHELPLEY BOARD MEMBER	0 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(501) ROBERT P WHITE BOARD MEMBER	0 50	X						0	0	0
(1) CRAIG D WILBURN BOARD MEMBER	0 50	X						0	0	0
(2) NANCY L WILLIAMSON BOARD MEMBER	0 50	X						0	0	0
(3) TERESA WILSON BOARD MEMBER	0 50	X						0	0	0
(4) MARY ANNE WINDES BOARD MEMBER	0 50	X						0	0	0
(5) JENNIFER WOLLMANN BOARD MEMBER	0 50	X						0	0	0
(6) DONN T WONDERLING BOARD MEMBER	0 50	X						0	0	0
(7) JOHN R WOOD BOARD MEMBER	0 50	X						0	0	0
(8) BRIAN WOODS BOARD MEMBER	0 50	X						0	0	0
(9) ALBERT A YABOR BOARD MEMBER	0 50	X						0	0	0
(10) RONALD YANKS BOARD MEMBER	0 50	X						0	0	0
(11) JOEL YOUNG BOARD MEMBER	0 50	X						0	0	0
(12) JUDITH W ZIMMER BOARD MEMBER	0 50	X						0	0	0
(13) CAROL A ZINGONE BOARD MEMBER	0 50	X						0	0	0
(14) CHRISTOPHER ZOLLER BOARD MEMBER	0 50	X						0	0	0
(15) SHERRI MEADOWS PRESIDENT	8 00			X				0	0	0
(16) ANDREW BARBAR PRESIDENT-EL	8 00			X				0	0	0
(17) MATEY VEISSI VICE PRESIDE	8 00			X				0	0	0
(18) MARIA WELLS TREASURER	8 00			X				0	0	0
(19) CHRISTINE HANSEN SECRETARY	8 00			X				0	0	0
(20) MARGY GRANT GENERAL COUN	40 00					X		243,767	0	20,787
(21) JEFF ZIPPER VP OF COMMUN	40 00					X		193,660	0	23,764
(22) LOUIS GOLDMAN LEGAL COUNSE	40 00					X		172,816	0	17,540
(23) DAVID GARRISON VP OF FINANC	40 00					X		164,994	0	19,401
(24) ERIC FORSMAN VP OF TECHNO	40 00					X		142,371	0	21,725

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(526) JOHN FRIDLINGTON CEO	40 00						X	407,212	0	15,739
(1) JOHN SEBREE VP OF PUBLIC	40 00						X	173,099	0	11,865

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.

OMB No 1545-0047

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

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization FLORIDA ASSOCIATION OF REALTORS INC	Employer identification number 59-0245475
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$ 2,699,271
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$	
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$	
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?		☐ Yes ☐ No
4a	Was a correction made?		☐ Yes ☐ No
b	If "Yes," describe in Part IV		

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$	
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$	9,000
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$	9,000
4	Did the filing organization file Form 1120-POL for this year?		☐ Yes ☒ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV		

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE	430 NORTH MICHIGAN AVENUES CHICAGO, IL 60611	36-2795122	9,000	

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% 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, enter -0-															
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?		☐ Yes ☐ No													

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.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(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))					
f Grassroots lobbying expenditures					

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 each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)	
		Yes	No	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
a	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
e	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i.				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912.				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	Yes

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	17,316,699
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	9,000
b	Carryover from last year	2b	15,874,550
c	Total	2c	15,883,550
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	15,883,550
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
SCHEDULE C, PART I-A, LINE 1	THE ORGANIZATION CONTRIBUTES TO 527 PACS TO PROMOTE AND STRIVE FOR THE IMPROVEMENT OF GOVERNMENT BY ENCOURAGING AND STIMULATING REALTORS AND OTHERS TO TAKE A MORE ACTIVE AND EFFECTIVE PART IN GOVERNMENT AFFAIRS, TO ENCOURAGE REALTORS AND OTHERS TO UNDERSTAND THE NATURE AND ACTION OF THEIR GOVERNMENT, AND TO SUPPORT CANDIDATES FOR ELECTION TO PUBLIC OFFICE OF THE LOCAL, STATE AND NATIONAL GOVERNMENTS
SCHEDULE C, PART IV	NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE 430 NORTH MICHIGAN AVENUE CHICAGO, IL 60611

Part IV

Return Reference

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization FLORIDA ASSOCIATION OF REALTORS INC	Employer identification number 59-0245475
--	--

Part I 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
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	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? ☐ Yes ☐ No	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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 Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
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 ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 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 conservation easements

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

► \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2014

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3

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)
- a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other
- 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 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?

☐ Yes

☐ No

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 on Form 990, Part X?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII and complete the following table
- | | |
|----|--------|
| | Amount |
| 1c | |
| 1d | |
| 1e | |
| 1f | |

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

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.

- | | (a)Current year | (b)Prior year | b (c)Two years back | (d)Three years back | (e)Four years back |
|----|--|---------------|---------------------|---------------------|--------------------|
| 1a | Beginning of year balance | | | | |
| b | Contributions | | | | |
| c | Net investment earnings, gains, and losses | | | | |
| d | Grants or scholarships | | | | |
| e | 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
- 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

3a(i)

(ii) related organizations

3a(ii)

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 basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,070,517		1,070,517
b Buildings		8,046,996	6,795,552	1,251,444
c Leasehold improvements				
d Equipment		4,165,447	3,742,383	423,064
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				2,745,025

Part VII

Investments—Other Securities.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation 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)		

Part VIII

Investments—Program Related.

Complete if the organization 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 Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX

Other Assets.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X

Other Liabilities.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value	
Federal income taxes		
DEFERRED COMPENSATION PLAN PAYABLE	143,680	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	143,680	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☒

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	1	21,428,341
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-162,380
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	-162,380
3	Subtract line 2e from line 1	3	21,590,721
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	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	21,590,721

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	1	18,609,216
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	18,609,216
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)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	18,609,216

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.

Return Reference	Explanation
SCHEDULE D, PAGE 3, PART X	THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAX AS AN ORGANIZATION DESCRIBED IN SECTION 501 (C)(6) OF THE INTERNAL REVENUE CODE AND FROM STATE INCOME TAX UNDER SIMILAR PROVISIONS PURSUANT TO FLORIDA LAW. ACCORDINGLY, NO PROVISION OR LIABILITY FOR INCOME TAXES HAS BEEN RECORDED IN THE ACCOMPANYING FINANCIAL STATEMENTS. THE ASSOCIATION ACCOUNTS FOR INCOME TAXES IN ACCORDANCE WITH FINANCIAL ACCOUNTING STANDARDS BOARD ACCOUNTING STANDARDS CODIFICATION ("FASB ASC") 740, INCOME TAXES, WHICH CLARIFIES THE ACCOUNTING AND DISCLOSURE REQUIREMENTS FOR UNCERTAINTY IN TAX POSITIONS. IT REQUIRES A TWO-STEP APPROACH TO EVALUATE TAX POSITIONS AND DETERMINE IF THEY SHOULD BE RECOGNIZED IN THE FINANCIAL STATEMENTS. THE TWO-STEP APPROACH INVOLVES RECOGNIZING ANY TAX POSITIONS THAT ARE MORE LIKELY THAN NOT TO OCCUR AND THEN MEASURING THOSE POSITIONS TO DETERMINE IF THEY ARE RECOGNIZABLE IN THE FINANCIAL STATEMENTS. MANAGEMENT REGULARLY REVIEWS AND ANALYZES ALL TAX POSITIONS AND HAS DETERMINED THAT NO UNCERTAIN TAX POSITIONS REQUIRING RECOGNITION HAVE OCCURRED. THE ASSOCIATION IS NO LONGER SUBJECT TO FEDERAL OR STATE INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR FISCAL YEARS PRIOR TO 2011.

[illegible]

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

2014

Open to Public
Inspection

Name of the organization
FLORIDA ASSOCIATION OF REALTORS
INC

Employer identification number
59-0245475

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount 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) FLORIDA REALTORS EDUCATION FOUNDATION PO BOX 725025 ORLANDO,FL 328725025	27-1388782	501C3	139,263				GRANT SCHOLARSHIPS

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3

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

Part III

Grants and Other Assistance to Domestic Individuals. 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)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
SCHEDULE I, PAGE 1, PART I, LINE 2	THE PROGRAM AND DISBURSEMENTS ARE SUPERVISED AND MONITORED BY THE VICE PRESIDENT OF COMMUNICATIONS

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.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
FLORIDA ASSOCIATION OF REALTORS
INC

Employer identification number

59-0245475

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☐ Compensation committee ☐ Written employment contract ☒ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☐ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization?	5a	
b	Any related organization?	5b	
	If "Yes," to line 5a or 5b, describe in Part III.		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization?	6a	
b	Any related organization?	6b	
	If "Yes," to line 6a or 6b, describe in Part III.		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

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

Note. The sum of columns (B)(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 W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MARGY GRANT, GENERAL COUNSEL	(i)	242,670	1,097		7,331	13,456	264,554	
	(ii)	.....	.....	.....	.....	.....	.....	.....
2 JEFF ZIPPER, VP OF COMMUNICATIONS	(i)	189,173	4,487		6,741	17,023	217,424	
	(ii)	.....	.....	.....	.....	.....	.....	.....
3 LOUIS GOLDMAN, LEGAL COUNSEL	(i)	168,325	4,491		6,840	10,700	190,356	
	(ii)	.....	.....	.....	.....	.....	.....	.....
4 DAVID GARRISON, VP OF FINANCE	(i)	155,822	9,172		5,945	13,456	184,395	
	(ii)	.....	.....	.....	.....	.....	.....	.....
5 ERIC FORSMAN, VP OF TECHNOLOGY SER	(i)	137,612	4,759		5,786	15,939	164,096	
	(ii)	.....	.....	.....	.....	.....	.....	.....
6 JOHN FRIDLINGTON, CEO	(i)	389,712	17,500		10,231	5,508	422,951	
	(ii)	.....	.....	.....	.....	.....	.....	.....
7 JOHN SEBREE, VP OF PUBLIC POLICY	(i)	166,451		6,648	6,295	5,570	184,964	
	(ii)	.....	.....	.....	.....	.....	.....	.....

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
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SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ****Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.****▶ 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

2014**Open to Public
Inspection**Name of the organization
FLORIDA ASSOCIATION OF REALTORS
INC**Employer identification number**

59-0245475

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 2	
FORM 990, PAGE 6, PART VI, LINE 11B	THE ORGANIZATION'S VP OF FINANCE AND THE CONTROLLER REVIEW THE 990 BEFORE IT IS SENT TO THE IRS
FORM 990, PAGE 6, PART VI, LINE 12C	THE ORGANIZATION REQUIRES THE BOARD OF DIRECTORS TO PROVIDE ANY CONFLICTS OF INTEREST IN WRITING
FORM 990, PAGE 6, PART VI, LINE 15A	DATA IS PROVIDED BY INDEPENDENT RESEARCH FIRMS TO THE HUMAN RESOURCES DEPARTMENT WHO THEN MAKES A DETERMINATION BASED ON THE COMPARABILITY DATA
FORM 990, PAGE 6, PART VI, LINE 15B	PLEASE SEE RESPONSE TO PART VI, SECTION B , LINE 15A
FORM 990, PAGE 6, PART VI, LINE 19	ALL DOCUMENTS ARE POSTED ON THE ORGANIZATION'S WEBSITE

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
FLORIDA ASSOCIATION OF REALTORS
INC

Employer identification number

59-0245475

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) REALTORS POLITICAL ADVOCACY COMMITTEE7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 46-3247113	PAC	FL	527		N/A		No
(2) REALTORS POLITICAL ISSUES COMMITTEE 7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 59-2999043	PAC	FL	501C6		N/A		No
(3) REALTORS POLITICAL ACTIVITY COMMITTEE OF FLORIDA7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 46-4241001	PAC	FL	527		N/A		No
(4) REALTORS POLITICAL ACTION COMMITTEE OF FLORIDA7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 46-4233032	PAC	FL	527		N/A		No
(5) COUNCIL FOR STRONGER NEIGHBORHOODS INC7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 26-3184848	PAC	FL	527		N/A		No
(6) CITIZENS FOR A BETTER FLORIDA INC 7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 26-3184911	PAC	FL	527		N/A		No
(7) FLORIDA ASSOCIATION OF REALTORS 7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 59-0245475	TRADE ASSO	FL	501C6		N/A		No

Part III

Identification of Related Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproporionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Dividends from 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 to 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)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c		No
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m		No
1n	Yes	
1o	Yes	
1p		No
1q		No
1r		No
1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII

Supplemental Information

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

Return Reference	Explanation
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Additional Data

Software ID:

Software Version:

EIN: 59-0245475

Name: FLORIDA ASSOCIATION OF REALTORS
INC

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
(1) REALTORS POLITICAL ADVOCACY COMMITTEE 7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 46-3247113	PAC	FL	527		N/A		No
(1) REALTORS POLITICAL ISSUES COMMITTEE 7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 59-2999043	PAC	FL	501C6		N/A		No
(2) REALTORS POLITICAL ACTIVITY COMMITTEE OF FLORIDA 7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 46-4241001	PAC	FL	527		N/A		No
(3) REALTORS POLITICAL ACTION COMMITTEE OF FLORIDA 7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 46-4233032	PAC	FL	527		N/A		No
(4) COUNCIL FOR STRONGER NEIGHBORHOODS INC 7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 26-3184848	PAC	FL	527		N/A		No
(5) CITIZENS FOR A BETTER FLORIDA INC 7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 26-3184911	PAC	FL	527		N/A		No
(6) FLORIDA ASSOCIATION OF REALTORS 7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822 59-0245475	TRADE ASSO	FL	501C6		N/A		No