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EXTENDED TO NOVEMBER 15, 2016

Form **990**

Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

OMB No 1545-0047

A	For	the 20	115 calendar year, or tax year beginning	an	d ending		
В	Check applic	d if	C Name of organization			D Employer identifica	tion number
Г	Ad	dress ange	HAWAII ASSOCIATION OF REA	LTORS			
	Na	me ange	Doing business as	210112		23-70	56154
	Ind	tial	Number and street (or P.O box if mail is not delivered	to street address)	Room/suite	E Telephone number	
	Fin	urn/	1259 A'ALA STREET	,	300	(808)	733-7060
_	ate		City or town, state or province, country, and ZIP of	r foreign postal code		G Gross receipts \$	1,770,167.
Ļ	reti	nended urn plica-	HONOLULU, HI 96817			H(a) Is this a group retu	
L_	اورا لـــــ	n nding	F Name and address of principal officer NANCY	DONAHUE-JON	ES	for subordinates?	Yes X No
_	T		SAME AS C ABOVE ot status	2047(a)/1	1) or 527	H(b) Are all subordinates incl	
			ot status 501(c)(3)X 501(c)(6) ◀ (0	nsert no) 4947(a)(1) Or 527	H(c) Group exemption	st (see instructions)
			anization: X Corporation Trust Associa	ion Other	1 Year	of formation: 1972 M	
	art		ummary		L rour	orioniation, 19 / D W	otate of legal dofficile. 11 1
	1		efly describe the organization's mission or most sign	ficant activities THE	PURPOS	E OF HAWAII	
ü			SOCIATION OF REALTORS ("HA	AR") IS TO E	NHANCE		OF ITS
Activities & Governance	2	Ch	eck this box 🕨 🔲 if the organization discontinue	ed its operations or disp	osed of more	than 25% of its net ass	ets
Š	3	Nu	mber of voting members of the governing body (Part	VI, line 1a)		3	32
- ত - ত	4	Nu	mber of independent voting members of the governi	ng body (Part VI, line 1b)	4	32
ies	5	Tot	al number of individuals employed in calendar year 2 al number of volunteers (estimate if necessary)	015 (Part V, line 2a)	FIVED	5	11
ξ	6		- variable of volume of (seemate in rice could by)		-1 7 - 1	-10 6	187
, ¥			al unrelated business revenue from Part VIII, column		E 0040	7a 7b	0.
<u> </u>	+	b Ne	unrelated business taxable income from Form 990-	, line 34 NUV ()	7 2016	ÇPrior Year	
	8	Co	ntributions and grants (Part VIII, line 1h)			80,141.	Current Year 23,500.
Revenue	9		gram service revenue (Part VIII, line 2g)		N. III	1,786,955.	1,742,473.
eve ,	10		estment income (Part VIII, column (A), lines 3, 4, and	Called March 1981	*******	2,544.	2,459.
	11		er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c,	•		1,276.	1,735.
	12		al revenue - add lines 8 through 11 (must equal Part	•		1,870,916.	1,770,167.
SCAINING TO Xpenses	13	3 Gra	ints and similar amounts paid (Part IX, column (A), Iir	es 1-3)		3,165.	1,350.
2	14	l Bei	nefits paid to or for members (Part IX, column (A), line	e 4)		0.	0.
es es	15		aries, other compensation, employee benefits (Part I))	898,395.	878,753.
	16		fessional fundraising fees (Part IX, column (A), line 1	' .	,	0.	0.
ᡘ ដួ	۔ ا		al fundraising expenses (Part IX, column (D), line 25)		0.	1 016 021	001 401
	17		er expenses (Part IX, column (A), lines 11a-11d, 11f-	•	<u> </u>	1,016,831.	901,421.
	18		al expenses Add lines 13-17 (must equal Part IX, co renue less expenses Subtract line 18 from line 12	lumn (A), line 25)	-	<47,475.>	
10		, I.e.	reflue less expenses Subtract line 10 from fine 12		Re	ginning of Current Year	End of Year
sets or	20) Tot	al assets (Part X, line 16)			2,144,795.	2,511,626.
Net Ass	21		al liabilities (Part X, line 26)			992,416.	1,364,704.
Set .	22		assets or fund balances Subtract line 21 from line	20		1,152,379.	1,146,922.
	art		ignature Block				
			of perjury, I declare that I have examined this return, include			· · · · · · · · · · · · · · · · · · ·	knowledge and belief, it is
tru	e, cor	rect, a	nd cy rip iete. Reclaration of preparer (other th i ng officer) is t	ased on all information of	which preparer	has any knowledge.	k. 2016
			Signature of officer			Date	1.2014
Sig			•	F EXECUTIVE	OPPICE		
He	re		Type or print name and title	SF EXECUTIVE	OFFICE	iV.	
_		Pri		arer's signature		Date Check	PTIN
Pa	id		AN M.L. YEE	arer's signature 人 の M ナー	\	10/13/16 of self employed	P00130314
	pare		m's name KMH LLP		δ		42-1539623
	e Only		m's address 1003 BISHOP STREET,	SUITE 2400			
			HONOLULU, HI 96813			Phone no. 8 0 8	-526-2255
Ma	y the	e IRS	discuss this return with the preparer shown above? (see instructions)			X Yes No

		ge Z
Pa	rt III Statement of Program Service Accomplishments	77
		X
1	Briefly describe the organization's mission. THE DUDDOGE OF HAWATT ACCOCTANTON OF DEALMORG ("HAR") TO MO ENHANCE	
	THE PURPOSE OF HAWAII ASSOCIATION OF REALTORS ("HAR") IS TO ENHANCE	
	THE ABILITY OF ITS MEMBERS TO SUCCESSFULLY PRACTICE THEIR PROFESSION	
	ETHICALLY AND COMPETENTLY, TO SERVE THE COMMUNITY, AND TO PROTECT	
_	PRIVATE PROPERTY RIGHTS. HAR WORKS IN PARTNERSHIP WITH LOCAL AND	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? X Yes	١
	·	No
_	If "Yes," describe these new services on Schedule O	1
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as 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 S	<u> </u>
	PROFESSIONAL STANDARDS OF PERSONS ENGAGED IN THE REAL ESTATE BUSINESS.	
	STRATEGIES COURSES DEVELOPED BY HAR; ADMINISTERED BY LOCAL BOARDS: 53	
	CLASSES WITH 849 STUDENTS.	
	GRI COURSES DEVELOPED BY NAR/HAR; ADMINISTERED BY LOCAL BOARDS: 28	
	CLASSES WITH 617 STUDENTS.	
	E-PRO, BROKER AWARENESS COURSES DEVELOPED BY NAR/HAR; ADMINISTERED BY	
	LOCAL BOARDS: 4 CLASSES WITH 128 STUDENTS.	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$))
	THE HAWAII ASSOCIATION OF REALTORS GOVERNMENT AFFAIRS DIVISION IS	
	RESPONSIBLE FOR PROTECTING, PROMOTING, AND ADVANCING THE PUBLIC POLICY	Y
	INTERESTS AND OBJECTIVES OF REALTORS THROUGH POLITICAL ADVOCACY AND	
	MEMBER PARTICIPATION IN LEGISLATIVE ACTIVITIES, SUCH AS MAINTAINING	
	OPEN LINES OF COMMUNICATION BETWEEN STATE AND GOVERNMENT OFFICALS ON	
	REAL ESTATE ISSUES, BUILDING RELATIONSHIPS WITH OTHER ORGANIZATIONS TO	<u> </u>
	CREATE SUPPORT, AND WORKING DIRECTLY WITH MEMBERS TO DETERMINE WHAT	
	ISSUES ARE OF CONCERN TO REAL ESTATE IN HAWAII.	
	THE PRIMARY EFFORT OF THE GAC IS AT THE STATE LEVEL, INCLUDING BUT NOT	r
	LIMITED TO THE LEGISLATURE, EXECUTIVE BRANCH AND STATE AGENCIES.	
	HOWEVER, THE GAC MAY, FROM TIME TO TIME, BE INVOLVED WITH ISSUES AT THE	HE
_	FEDERAL LEVEL THROUGH THE NATIONAL ASSOCIATION OF REALTORS AND AT THE	
4c	(Code) (Expenses \$)
		—
		
4d	Other program services (Describe in Schedule O)	
_	(Expenses \$ including grants of \$) (Revenue \$)	
40	Total program service expenses	

Yes No

ra	tiv Checklist of Required Schedules
1	ls the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
	If "Yes." complete Schedule A

1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1		t
	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	sımılar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		_X_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
_	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		v	
L		11a	<u>X</u>	
D	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			x
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	44-		Х
а	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	11c		
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		ļ	
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	j	ĺ	
	complete Schedule G, Part III	19		<u> </u>

Form 990 (2015) HAWAII ASSOCIATION OF REALTORS

Part IV Checklist of Required Schedules (continued)

	· · · · · · · · · · · · · · · · · · ·	_		$\overline{}$
00-	Dutilion and the second of the	-	Yes	No X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<u> </u>
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			<u> </u>
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
-	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		Х
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		
	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? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
ne.	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"		İ	ĺ
	complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	-		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
04	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31	 -	
J L	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	l
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			İ
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	١		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		x	
	Note. All Form 990 filers are required to complete Schedule O	38_		(2045)

Form 990 (2015) HAWAII ASSOCIATION OF REALTORS 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			X						
			Yes	No						
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 29	$\neg \neg$								
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0									
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming									
	(gambling) winnings to prize winners?	1c		X						
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			l						
	filed for the calendar year ending with or within the year covered by this return 2a 11									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)									
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X						
b	b If "Yes," has it filed a Form 990.T for this year? If "No," to line 3b, provide an explanation in Schedule O									
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X						
b	If "Yes," enter the name of the foreign country									
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_								
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X						
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		<u>├</u> ^						
_	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		\vdash						
6a	, , , , , , , , , , , , , , , , , , , ,		х							
h	any contributions that were not tax deductible as charitable contributions?	6a	- 11	\vdash						
U	b 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).	6b	X							
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?	7a		1						
b										
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	to file Form 8282?	7c								
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e								
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?										
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		ļ						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
_	sponsoring organization have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.									
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		├─						
ь 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter	9b		┢						
	Initiation fees and capital contributions included on Part VIII, line 12									
h	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	.		}						
11	Section 501(c)(12) organizations. Enter	. !								
	Gross income from members or shareholders	. 1		į						
b	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?	12a								
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		 _						
	Note. See the instructions for additional information the organization must report on Schedule O									
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans									
	Enter the amount of reserves on hand			 						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X						
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	(2015)						

Form 990 (2015) HAWAII ASSOCIATION OF REALTORS 23-7056154 Page

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

	Check if Schedule O contains a response or note to any line in this Part VI			\mathbf{X}							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 32										
	If there are material differences in voting rights among members of the governing body, or if the governing	1									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.										
b											
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?										
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	2									
_	of officers, directors, or trustees, or key employees to a management company or other person?	3		х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х							
5											
6	Did the organization have members or stockholders?	5 6		X							
	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		х							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
_	persons other than the governing body?	7b		х							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	<u> </u>									
a	The governing body?	8a	х								
b	Each committee with authority to act on behalf of the governing body?	8b	Х								
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										
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	9		X							
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		X							
	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									
11a	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?										
12a											
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	Х								
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	in Schedule O how this was done	12c	Х								
13	Did the organization have a written whistleblower policy?	13	Х								
14	Did the organization have a written document retention and destruction policy?	14	Х								
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?	ļ									
а	The organization's CEO, Executive Director, or top management official	15a	х								
	Other officers or key employees of the organization	15b	Х								
	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		İ								
	taxable entity during the year?	16a		Х							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	ŀ		1							
	exempt status with respect to such arrangements?	16b	1	1							
Sec	tion C. Disclosure	<u>, , , , , , , , , , , , , , , , , , , </u>	L								
17	List the states with which a copy of this Form 990 is required to be filed ► NONE										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılah	le								
	for public inspection. Indicate how you made these available. Check all that apply		-								
	Own website Another's website X 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, an	d finan	cial								
	statements available to the public during the tax year.		J. 								
20	State the name, address, and telephone number of the person who possesses the organization's books and records:										
	HAWAII ASSOCIATION OF REALTORS - (808) 733-7060										
	1259 A'ALA STREET SULTE 300 HONOLULU HT 96817										

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

X

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization r		orga	anıza			nper	ısat	ated any current officer, director, or trustee					
(A)	(B)	_ (C)						(D)	(E)	(F)			
Name and Title	Average	(do	not c	Post	more	than o	one	Reportable	Reportable	Estimated			
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of						
	week	⊢	JC: U.			1	,	from	from related	other			
	(list any	recto	·					the	organizations (W-2/1099-MISC)	compensation from the			
	hours for related	500	8			sated		organization (W-2/1099-MISC)	(88-271099-181130)	organization			
	organizations	ruster	fras		aa,	ubeu		(₩-2/1099-141130)		and related			
	below	lual ti	trona		nploy	st cor	_			organizations			
	line)	Individual trustee or director	Institutional trustee	Ollicer	Key employee	Highest compensated employee	Former						
(1) ARABEL CAMBLOR	15.00							_	_				
PRESIDENT		X	<u> </u>	X	<u> </u>			0.	0.	0.			
(2) MOANA ANDERSEN	15.00				1								
PRESIDENT - ELECT		X		X				0.	0.	0.			
(3) SUSAN SAVAGE	15.00		ĺ										
FIRST VICE PRESIDENT		X	<u> </u>	Х				0.	0.	0.			
(4) JODEE FARM	5.00	[[
TREASURER		X		Х				0.	0.	0.			
(5) TRUDY NISHIHARA (SEE SCH. 0)	2.00						i						
IMMEDIATE PAST PRESIDENT		Х						5,850.	0.	0.			
(6) MARY BEGIER	2.00]					i	_	_	_			
EC LIAISON	1.00	X				<u> </u>		0.	0.	0.			
(7) CHERIE TSUKAMOTO	2.00												
EC LIAISON	0.50	X	<u> </u>		_		L_	0.	0.	0.			
(8) CHAD DEAL	0.50]	1										
DIRECTOR	ļ	X	lacksquare	_	<u>\</u>	ļ		0.	0.	0.			
(9) MARION HALLER	0.50	1					l		_	_			
DIRECTOR		X						0.	0.	0.			
(10) LINDA MOULIN	0.50			ļ					_	_			
DIRECTOR		X					L_	0.	0.	0.			
(11) JACK LEGAL	0.50						•		_				
DIRECTOR		X			<u> </u>	<u> </u>	<u> </u>	0.	0.	0.			
(12) MARGARET REYNOLDS	0.50		l					_	_	_			
DIRECTOR	1.00	X	ļ.,					0.	0.	0.			
(13) LISA WILLING	0.30							_	_				
DIRECTOR	<u> </u>	X	<u> </u>	<u> </u>			<u> </u>	0.	0.	0.			
(14) ROCHELLE AUGUSTIN BECK	0.50	1.			l			_					
DIRECTOR		X	_	lacksquare	<u> </u>			0.	0.	0.			
(15) TREVOR BENN	0.50				1			_	_	_			
DIRECTOR	 	X	<u> </u>	<u> </u>	L	<u> </u>		0.	0.	0.			
(16) MARK DECASTRO	0.50	1	l										
DIRECTOR	<u> </u>	X	_	<u> </u>	<u> </u>	ļ	_	0.	0.	0.			
(17) GLENNON GINGO	0.50	١.,								_			
DIRECTOR		X	1	<u> </u>	乚	<u> </u>	_	0.	0.	0.			

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ghe	st C	Compensated Employe	es (continued)				
(A)	(B)	(C)						(D)	(E)			(F)	
Name and title	Average	Position (do not check more than one			1	ana	Reportable Reportable			Es	tımate	d	
	hours per	box	, unle	ss pe	rson	ıs bot	h an	compensation	compensation	n	ап	nount d	of
	week	⊢	ceran	nd a d	Irecto	or/trus	itee)	from	from related			other	
	(list any	ector			ł			the	organizations			pensat	
	hours for	i di			l	ated		organization	(W-2/1099-MIS	iC)	l	om the	
	related organizations	ste	Fast		۵	pens		(W-2/1099-MISC)			_	anızatı	
	below	F	ona		oloye	E e					1	d relate	
	tine)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	этте				urga	inizatio	JI 15
(18) RHONDA HAY	0.50	=	=	-	ž	ᆂᇷ	<u></u>				\vdash		-
DIRECTOR		х	ł		ŀ	ŀ		0.		0.			0.
(19) KALAMA KIM	0.50	Ť			T			-					
DIRECTOR		х	ļ	ļ		ļ		0.		0.			0.
(20) SUE ANN LEE	0.50												
DIRECTOR		X						0.		0.			0.
(21) ROBERT LIGHTBOURN	0.50												
DIRECTOR		Х		ļ	<u> </u>	ļ	L	0.		0.			0.
(22) JULIE MEIER	2.50	١			1	1				_			_
DIRECTOR	0.50	Х	ļ		ļ	ļ	<u> </u>	0.		0.	ļ		0.
(23) NANCY METCALF	0.50	١.,	İ	ł						^			_
DIRECTOR (24) KEVIN MIYAMA	0.50	Х	-					0.		0.			0.
DIRECTOR	0.30	X	Ì	1		}		0.		0.			0.
(25) MARGARET MURCHIE	0.50	 	╁╴	┢┈	\vdash	-	├─			<u> </u>	 		
DIRECTOR		x					ł	0.		0.			0.
(26) JOYCE NAKAMURA	0.50			-			1						
DIRECTOR	1.00	Х		<u> </u>	<u>.</u>			0.		0.			0.
1b Sub-total							▶	5,850.		0.	<u></u>		0.
c Total from continuation sheets to Part V	II, Section A						ightharpoons	175,495.		0.		11,801.	
d Total (add lines 1b and 1c)				_			<u> </u>	181,345.		0.	11,801.		
2 Total number of individuals (including but r	not limited to th	nose	liste	ed a	bov	e) w	ho r	eceived more than \$100	0,000 of reportabl	e			4
compensation from the organization	-											Yes	No
3 Did the organization list any former officer,	director or tr	ıcto	م ارد	^.	male	2422	٥.	highest compensated a	mplayee en		$\overline{}$	162	NO
line 1a? If "Yes," complete Schedule J for s			Ç, N	sy Ci	пріс	Јусс	, Ui	riighest compensated e	inployee on		3		х
4 For any individual listed on line 1a, is the si			omo	ens	atioi	n an	d ot	her compensation from	the organization		۳		
and related organizations greater than \$15	•							•	g		4	x	
5 Did any person listed on line 1a receive or	accrue compe	nsat	tion	from	an	y un	relat	ted organization or indiv	idual for services				
rendered to the organization? If "Yes," com	nplete Schedul	e J	for s	uch	per	son					5	لــــا	Х
Section B. Independent Contractors	-												
1 Complete this table for your five highest co										pens	sation 1	rom	
the organization Report compensation for	the calendar y	ear	end	ing v	with	or w	/ithir	n the organization's tax	year				
(A) Name and business	address	BT/	ONI					(B) Description of s	enuces	_)) eamo <i>'</i>)) nsatior	_
Traine and business	1 4441033	14/	OM	<u>. </u>			\dashv	Description of	30141003		Jompe	1341101	-
-	 , , - , - , - , - , - , - , - , -					•	一						
							\dashv						
2 Total number of independent contractors (ıncludıng but r	not l	ımıte	ed to	the	se li	stec	d above) who received r	nore than				
\$100,000 of compensation from the organi	zation 🕨					0		FEMC					

Part VII Section A. Officers Directors Tru						_			23-705	0134
, , , , , , , , , , , , , , , , , , , ,	T	mplo	yee			ligh	est			
(A) Name and title	(B) Average hours	erage Position		tion		ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of	
	per week (list any hours for related organizations below line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organization
27) NORMAN NOGUCHI	0.50	x						0.	0.	
DIRECTOR	0.50	^	_	H			_	0.	0.	(
(28) JONI SHIRAISHI DIRECTOR	0.50	X						0.	0.	(
(29) MIHAELA STOOPS	0.50	_	H	\vdash			_	0.	0.	
DIRECTOR	0.30	x						0.	0.	(
(30) CHAD TAKESUE	0.50	 ^	\vdash	H			\vdash	J .	0.	
DIRECTOR	1.30	x						0.	0.	(
(31) PETER TEGAN	0.50	 ^	 	H			 	0.	.	
DIRECTOR	1.50	\mathbf{x}						0.	0.	
(32) PEGGY YUAN	0.50			Н				-		
DIRECTOR	<u> </u>	$ \mathbf{x} $						0.	0.	
(33) NANCY DONAHUE JONES	60.00	Ť	T	П					30	
SECRETARY/CEO	1.00	1			Х			175,495.	0.	11,80
		-								
			_							
										<u> </u>
		-								
							_			
		-								
										_
Fotal to Part VII, Section A, line 1c								175,495.		11,80

Form **990** (2015)

532009 12-16-15

		Check if Schedule O cont	ains a resnonse	or note to any lin	ne in this Part VIII	1		
		Official in Schedule O Cont	airs a response	or note to any iii	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo	ts, and ve 1f	23,500.	23,500.			
Program Service Revenue	2 a b c d e f	MEMBERSHIP DUES EDUCATION AND F SPECIAL PROGRAM MISCELLANEOUS	FORMS IS	531390 531390 531390	1,609,970. 117,829. 14,590. 84.	117,829.		
	3 4 5	Total. Add lines 2a-2f Investment income (including other similar amounts) Income from investment of tal Royalties	·	est, and	2,459. 1,735.			2,459
Other Revenue	c d	Less. rental expenses	(i) Real	(ii) Personal (ii) Other				
	c	Less cost or other basis and sales expenses Gain or (loss)	ng events (not	•				
	С	contributions reported on line Part IV, line 18 Less. direct expenses Net income or (loss) from fund Gross income from gaming ad Part IV, line 19	a b draising events	•				
	c 10 a b	Less direct expenses Net income or (loss) from gan Gross sales of inventory, less and allowances Less. cost of goods sold Net income or (loss) from sale	returns a b	>				
	11 a	Miscellaneous Revenu	ıe	Business Code				
	e 12	Total. Add lines 11a-11d Total revenue. See instructions.		>	1,770,167.	1,742,473.	0.	4,194

Form 990 (2015) HAWAII ASSOCIATION OF REALTORS Part IX Statement of Functional Expenses

secti	on 501(c)(3) and 501(c)(4) organizations must comp			omplete column (A)	- T
Do 1	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A) I	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1,350.			
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,	107 206			
_	trustees, and key employees	187,296.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B)	537,139.			
7 8	Other salaries and wages Pension plan accruals and contributions (include	331,133.			
0	section 401(k) and 403(b) employer contributions)	26,294.		ļ	
9	Other employee benefits	76,012.			
9 10	Payroll taxes	52,012.			
11	Fees for services (non-employees)	32,012.			
	Management				
	Legal	64,367.			
	Accounting	88,443.			
	Lobbying	1,728.			
е	Professional fundraising services. See Part IV, line 17	-			
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	88,930.			
12	Advertising and promotion	9,785.			
13	Office expenses	62,579.			
14	Information technology				
15	Royalties		··· ·· · · · · · · · · · · · · · · · ·		
16	Occupancy	112,189.			
17	Travel	114,462.	<u> </u>		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	10 020			
19	Conferences, conventions, and meetings	10,938.			
20	Interest				
21	Payments to affiliates	17 506			
22	Depreciation, depletion, and amortization	47,586. 8,939.			
23	Other expanses Itemize expanses not severed	0,333.			
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)				
а	amount, list line 24e expenses on Schedule 0.) ZIP FORM COSTS	140,007.			
a b	PROGRAMS	138,033.			
C	NAR GRANT EXPENSE	11,527.			
d	BAD DEBT RECOVERY	<14,122.			
	All other expenses	16,030.		†	
25	Total functional expenses. Add lines 1 through 24e	1,781,524.		†	
26	Joint costs. Complete this line only if the organization			1	
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				İ
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2015)
Part X | Balance Sheet

Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing		1	
	2	Savings and temporary cash investments	1,724,587.	2	2,123,087
	3	Pledges and grants receivable, net		3	·
	4	Accounts receivable, net	6,248.	4	23,999
	5	Loans and other receivables from current and former officers, directors,		i i	
ļ		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		1 1	
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
2		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
733613	7	Notes and loans receivable, net		7	
(8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D Less accumulated depreciation 10a 483,727 10b 288,542	<u>-</u>		
	b	Less accumulated depreciation 10b 288,542	. 239,498.	10c	195,185
	11	Investments - publicly traded securities		11	
	12	Investments · other securities See Part IV, line 11	105,326.	12	106,172
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	69,136.	15	63,183
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,144,795.	16	2,511,626
	17	Accounts payable and accrued expenses	141,646.	17	113,301
	18	Grants payable		18	
	19	Deferred revenue	758,850.	19	1,167,707
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
3	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	91,920.	25	83,696
	26	Total liabilities. Add lines 17 through 25	992,416.	26	1,364,704
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
ß		complete lines 27 through 29, and lines 33 and 34.		:	
2	27	Unrestricted net assets	1,021,563.	27	1,021,717 125,205
į	28	Temporarily restricted net assets	130,816.	28	125,205
2	29	Permanently restricted net assets		29	
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here ▶		1	
Net Assets of Fully Dalances		and complete lines 30 through 34.			
S	30	Capital stock or trust principal, or current funds		30	
2	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
נו	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	1,152,379.	33	1,146,922
	34	Total liabilities and net assets/fund balances	2,144,795.	34	2,511,626

	1990 (2015) HAWATT ASSOCIATION OF REALTORS	<u> </u>	- / ບວຍ	124	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets	_				
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	. <u>,</u> 77	0,1	67.
2	Total expenses (must equal Part IX, column (A), line 25)	2	_ 1	.,78		
3	Revenue less expenses Subtract line 2 from line 1	3				<u>57.</u> :
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	.,15	2,3	79.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				48.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			7,4	48.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
_	column (B))	10	1	,14	6,9	22.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					LX.
					Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				ı	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		l 1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a				
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	te basis	•			
	consolidated basis, or both					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ie audit	,			İ
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dıt			۱
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ııred au	dıt			1
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
				Form	990	(2015)

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

2015
Open to Public

Open to Public Inspection

If the organization answered "Yes," on 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," on 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," on 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) organiza	tions Complete Part III			
Nar	ne of organization			Emp	loyer identification number
		ASSOCIATION OF R			23-7056154
Ρĭ	art I-A Complete if the org	janization is exempt und	er section 501(c)	or is a section 527 of	organization.
2	Provide a description of the organiz Political expenditures Volunteer hours	ration's direct and indirect politic	al campaign activities i		.
Pá	art I-B Complete if the org	ganization is exempt und	er section 501(c)	(3).	<u> </u>
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	▶ 9	à
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	▶ 9	B
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
46	a Was a correction made?				Yes No
	o If "Yes," describe in Part IV	· · · · · · · · · · · · · · · · · · ·			
	art I-C Complete if the org				`````````
	Enter the amount directly expended	, ,	•		·
2	Enter the amount of the filing organ	ization's funds contributed to ot	her organizations for se		
	exempt function activities			▶ \$	
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here a	ind on Form 1120-POL	i •	
	line 17b			▶ 5	· · · · · · · · · · · · · · · · · · ·
	Did the filing organization file Form	•			Yes No
5	Enter the names, addresses and er made payments For each organiza			_	
	contributions received that were pr	•	• •		
	political action committee (PAC) If				ate segregated tarie of a
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(0) 2114	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization
					If none, enter -0-
			_		
					}
				_	
			1		
			- 		

Schedule C (Form 990 or 990-EZ) 2015	HAWAI	I ASSO	CIATION OF	REALTORS	23-7	7056154 Page 2
Part II-A Complete if the org	janizatio	on is exei	npt under sectio	n 501(c)(3) and file	ed Form 5768 (election under
section 501(h)).						
A Check ► L if the filing organiza	tion belon	gs to an affi	liated group (and list in	n Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and sha						
B Check ► if the filing organiza	tion check	ed box A ar	nd "limited control" pro	ovisions apply		
		bying Expe	nditures Ints paid or incurred.	,	(a) Filing organization's	(b) Affiliated group totals
		icaris arriod	mits paid or incurred.	,	totals	
1a Total lobbying expenditures to infli	uence pub	lic opinion (grass roots lobbying)			
b Total lobbying expenditures to infli	uence a le	gislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add l	nes 1a an	d 1b)				
d Other exempt purpose expenditure	es				· 	
 Total exempt purpose expenditure 	s (add line	s 1c and 1c	i)			
f Lobbying nontaxable amount Enter		unt from the	e following table in bot	h columns		
If the amount on line 1e, column (a) of	or (b) is:		bying nontaxable am			
Not over \$500,000			the amount on line 1e			
Over \$500,000 but not over \$1,00			00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,5			0 plus 10% of the exc			
Over \$1,500,000 but not over \$17	,000,000		0 plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000		\$1,000,	000			
		f l 16				-
g Grassroots nontaxable amount (er		•		ŀ		-
 h Subtract line 1g from line 1a. If zer i Subtract line 1f from line 1c. If zero 				ŀ		
	•		line 1) did the erganiz	ation file Form 4720		<u>.l</u>
j If there is an amount other than ze reporting section 4911 tax for this		er line in or	line II, did the organiz	ation life Form 4720		Yes No
reporting section 4911 tax for this	year.	4-Voor Ave	eraging Period Under	section 501(h)		163140
(Some organizations t	hat made			• •	of the five columns	below.
	See	the separa	ate instructions for li	nes 2a through 2f.)		
	Lobi	oying Exper	nditures During 4-Ye	ar Averaging Period		
0-1						
Calendar year (or fiscal year beginning in)	(a)	2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
(or noon year beginning my						
!						
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures		<u> </u>				
d Grassroots nontaxable amount				[
e Grassroots ceiling amount					·	<u> </u>
(150% of line 2d, column (e))						
		••				1
f Grassroots Johnving expenditures			ł			

Schedule C (Form 990 or 990-EZ) 2015

Schedule C (Form 990 or 990 EZ) 2015 HAWAII ASSOCIATION OF REALTORS 23-7056154 Page 3

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

For e	each "Yes," response on lines 1a through 1ı below, provide in Part IV a detailed description	(;	a)	(b)
of th	e lobbying activity	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of				
а	Volunteers?	<u></u>			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?		<u> </u>		
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912	İ			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	<u> </u>			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	5044	\(5\)		
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	ion 501(c)(5), or se	ection	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c		3	:	X
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members		1 (b) Par		970.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical	-	_, _, _,	,,,,,,,
2	expenses for which the section 527(f) tax was paid).	icai			
5	Current year		2a	218	3,804.
	Carryover from last year		2b		,
	: Total		2c	218	3,804.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		3,804.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		_		
	expenditure next year?	poou.	4	!	
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
_	rt IV Supplemental Information			<u>' </u>	
	ride the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated ground	io list). Part	II A. lines 1	and 2 (see	
	uctions), and Part II-B, line 1. Also, complete this part for any additional information	,,	, ,	(
	actions, and that it is, into the took complete and parties any administration				
					
					_

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on 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.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

HAWAII ASSOCIATION OF REALTORS

Employer identification number 23-7056154

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Acco	unts.Complete if the
	organization answered "Yes" on Form 990, Part IV, lin			
		(a) Donor advised funds	(b) Fu	nds 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 advi	sed funds	
	are the organization's property, subject to the organization's			Yes No
6	Did the organization inform all grantees, donors, and donor a		used only	
	for charitable purposes and not for the benefit of the donor of			
	impermissible private benefit?			Yes No
Par		ganization answered "Yes" on Form 990,	Part IV, line	7
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)		-
	Preservation of land for public use (e.g., recreation or e	F1	torically impo	rtant land area
	Protection of natural habitat	Preservation of a cer	tified historic	structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conser	vation easement on the last
	day of the tax year			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic sti	ructure included in (a)	2c	
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc	ture	
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by th	ne organizatio	on during the tax
	year ▶			
4	Number of states where property subject to conservation ea	sement is located >		
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements	ıt holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cor	nservation ea	sements during the year
	>			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easeme	ents during the year
	▶ \$			
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 17	0(h)(4)(B)(ı)	
	and section 170(h)(4)(B)(ii)?			└── Yes └── No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expens	e statement,	and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes	s the organiza	ation's accounting for
	conservation easements			
Pa	t III Organizations Maintaining Collections of		Other Sim	ilar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue state	ement and ba	llance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	ance of publ	c service, provide, in Part XIII,
	the text of the footnote to its financial statements that described			
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statemei	nt and baland	ce sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of p	ublic service,	provide the following amounts
	relating to these items			
	(i) Revenue included on 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 tre	easures, or other similar assets for financ		_
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items		
а	Revenue included on Form 990, Part VIII, line 1		>	\$
ь	Assets included in Form 990. Part X		▶	\$

		<u>ASSOCIATIO</u>							56154	
Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	orical Tr	easures, o	r Other	Simil	ar Asse	ts (continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the	following that	t are a sig	nıfıcant	use of its	collection	items
	(check all that apply)									
а	Public exhibition	d	ı	oan or exc	hange progra	ıms				
b	Scholarly research	е		Other	_		_			
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how th	ey further t	he organizatio	on's exem	pt purpo	ose in Par	t XIII	
5	During the year, did the organization solicit o	r receive donations o	of art, his	storical trea	sures, or othe	er sımılar a	issets	_	_	
	to be sold to raise funds rather than to be ma								Yes	No_
Par	t IV Escrow and Custodial Arran		te if the	organizatio	n answered "	'Yes" on F	orm 990), Part IV,	line 9, or	
	reported an amount on Form 990, Par	t X, line 21								
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for (contribution	ns or other as	sets not ir	ncluded	_	7	
	on Form 990, Part X?							L	Yes	L No
þ	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing t	able						
							\perp		Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for e	escrow or co	ustodial acco	unt liabilit	y?	<u></u>	」Yes	⊢ No
_	If "Yes " explain the arrangement in Part XIII									<u> </u>
Par	t V Endowment Funds. Complete	f the organization an	swered	"Yes" on Fo					r	
		(a) Current year	(b) P	rior year	(c) Two year	s back () Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions				<u> </u>					
С	Net investment earnings, gains, and losses				ļ				<u> </u>	
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance				·					···
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1	g, column (a	a)) held as					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	•								
За	Are there endowment funds not in the posse	ession of the organiza	ation tha	at are held a	and administe	ered for th	e organı	zation	_	
	by									es No
	(i) unrelated organizations								3a(i)	-
	(ii) related organizations								3a(ii)	-
ь	If "Yes" on line 3a(ii), are the related organization	· · · · · · · · · · · · · · · · · · ·			,				3b	
4	Describe in Part XIII the intended uses of the		wment	funds						
Pai	t VI Land, Buildings, and Equipn		. D	/ h	D F+ : 000	. D+V !	40			
	Complete if the organization answere							, 1	<u> </u>	
	Description of property	(a) Cost or o			t or other	. ,	cumulat		(d) Book	value
		basis (investr	nent)	Dasis	(other)	аер	eciation	,		
	Land									
	Buildings			2.4	7,082.		90,5	97	1 5 6	,485.
	Leasehold improvements					- 4				,485. ,700.
d	Equipment			23	6,645.	1	97,9	40.	38	, / 0 0 •
e	Other	1.5 200 8 1		(5)				.	105	.185.

Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"				d of wood modern well-
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Va	aluation. Cost or end	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				_
(C)				
(D)				·
(E)				
(G)				
(H)				··
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"				
(a) Description of investment	(b) Book value	(c) Method of va	aluation Cost or en	d-of-year market value
(2)				
(3)				
(4)				
(5)				
(6)				
(8)			·	
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13)				
Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 990, Part IV	/, line 11d See Form 990,	Part X, line 15	
(a)	Description			(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	-			
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15)		>	
Part X Other Liabilities.			·	
Complete if the organization answered "Yes"	on Form 990, Part IV	/, line 11e or 11f See Forn	n 990, Part X, line 2	5
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) DEFERRED LEASE CREDITS AN	D			
(3) OBLIGATIONS		83,696.		
(4)				
(5)	-			
(6)			1	
(7)				-
(8)				
(9)		-,		

83,696.

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

^{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.

HAWAII ASSOCIATION OF REALTORS 23-7056154 Page 4 Schedule D (Form 990) 2015 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 1,871,620. Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains (losses) on investments 2a b Donated services and use of facilities 2b c Recoveries of prior year grants 2c 101,453. d Other (Describe in Part XIII) <u>2d</u> 101,453. e Add lines 2a through 2d 1,770,167. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b 4b b Other (Describe in Part XIII) 0. 4c c Add lines 4a and 4b 1,770,167. Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 1,830,642. Total expenses and losses per audited financial statements 1 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 2a a Donated services and use of facilities 2b b Prior year adjustments c Other losses 2c 49,118. d Other (Describe in Part XIII) 2d 49,118. e Add lines 2a through 2d 1,781,524. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) 0. 4c c Add lines 4a and 4b 1,781,524. Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 | Part XIII | Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information PART X, LINE 2: THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION 501(C)(6), WHEREBY ONLY UNRELATED BUSINESS INCOME, AS DEFINED BY SECTION 512(A)(1) IS SUBJECT TO FEDERAL INCOME TAX. THE ASSOCIATION IS ALSO EXEMPT UNDER HAWAII REVISED STATUTES ON INCOME RELATED TO ITS EXEMPT PURPOSE. INTEREST INCOME AND CORPORATE SPONSORSHIP INCOME GENERATED FROM RPAC IS CONSIDERED TO BE UNRELATED BUSINESS INCOME SUBJECT TO TAXATION. THE ASSOCIATION RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF IT IS MORE-LIKELY-THAN-NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE

POSITION. CHANGES IN RECOGNITION OR MEASUREMENT ARE REFLECTED IN THE

Schedule D (Form 990) 2015

532054 09-21-15

Schedule D (Form 990) 2015 HAWAII ASSOCIATION OF REALTORS Part XIII Supplemental Information (continued)	23-7056154 Page 5
Supplemental information (continued)	
PERIOD IN WHICH THE CHANGE IN JUDGMENT OCCURS. ANY INTEREST	ST OR PENALTIES
RELATED TO UNRECOGNIZED TAX BENEFITS ARE CLASSIFIED AS IN	TEREST EXPENSE
AND PENALTIES IN MEMBER SERVICES. THE ASSOCIATION HAS EVA	LUATED ITS TAX
POSITIONS AND DETERMINED THAT THERE WERE NO UNCERTAIN TAX	POSITIONS AT
DECEMBER 31, 2015 AND 2014.	-
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
HAWAII ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE	101,453.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
RPAC CONTRIBUTIONS	49,118.
PART XI AND XII:	
AUDITED FINANCIAL STATEMENTS INCLUDES FINANCIAL ACTIVITY	FOR HAWAII
ASSOCIATION OF REALTORS (EIN: 23-7056154) AND HAWAII ASSO	CIATION OF
REALTORS POLITICAL ACTION COMMITTEE (EIN: 90-0041818).	

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on 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

Open to Public Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

HAWAII ASSOCIATION OF REALTORS

Employer identification number 23-7056154

Pá	art 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 on Form 990,			$\overline{}$
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			1
	First-class or charter travel Housing allowance or residence for personal use			1
	Travel for companions Payments for business use of personal residence			ĺ
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			1
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			ĺ
				l
b	If any of the boxes on 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	1 b		<u> </u>
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			l
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		Ь—
				1
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			1
	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			
	X Compensation committee X Written employment contract	'		
	Independent compensation consultant			l
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
-	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
Ī	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			
а	The organization?	5a		
b	Any related organization?	5b		<u> </u>
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
а	The organization?	6a		<u> </u>
b	Any related organization?	6b		<u> </u>
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	<u> </u>	
8	Were any amounts reported on 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	<u> </u>	├
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	_		
	Regulations section 53 4958-6(c)?	9		L

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

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015 HAWAII ASSOCIATION OF REALTORS 23-7056154

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 on 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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	<u>L</u>
(A) Name and Title		(ı) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(Q)-(i)(B)	ın column (B) reported as deferred on prior Form 990
(1) NANCY DONAHUE JONES	Ξ	165,000.	10,488.	7.	8,774.	3,027.	187,296.	0
SECRETARY/CEO	€		0	0	0	0.	0	0
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	Ξ							
	(ii)							
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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.

Open to Public

OMB No 1545-0047

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

Inspection

Name of the organization HAWAII ASSOCIATION OF REALTORS Employer identification number 23-7056154

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
MEMBERS TO SUCCESSFULLY PRACTICE THEIR PROFESSION ETHICALLY AND
COMPETENTLY, TO SERVE THE COMMUNITY, AND TO PROTECT PRIVATE PROPERTY
RIGHTS. HAR WORKS IN PARTNERSHIP WITH LOCAL AND NATIONAL REALTOR
ORGANIZATIONS TO PROVIDE PRODUCTS AND SERVICES TO ITS MEMBERS, TO
SUPPORT THE INDUSTRY THROUGH LEGISLATIVE ADVOCACY, AND TO ENHANCE AND
PROMOTE THE REALTOR IMAGE.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
NATIONAL REALTOR ORGANIZATIONS TO PROVIDE PRODUCTS AND SERVICES TO ITS
MEMBERS, TO SUPPORT THE INDUSTRY THROUGH LEGISLATIVE ADVOCACY, AND TO
ENHANCE AND PROMOTE THE REALTOR IMAGE.
FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:
ONE-DAY SESSION MEMBER OUTREACH ON FOUR ISLANDS IN 2015.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
COUNTY LEVELS THROUGH THE LOCAL BOARDS.
FORM 990, PART V, LINE 1C
THIS QUESTION IS NOT APPLICABLE TO THE EXEMPT ORGANIZATION. AS SUCH, IT
HAS BEEN MARKED NO.
FORM 990, PART VI, SECTION B, LINE 11:
FORM 990 IS REVIEWED BY THE EXECUTIVE COMMITTEE PRIOR TO FILING.

Schedule O (Fòrm 990 or 990-EZ) (2015)	Page 2
Name of the organization HAWAII ASSOCIATION OF REALTORS	Employer identification number 23-7056154
FORM 990, PART VI, SECTION B, LINE 12C:	
BOARD MEMBERS ARE PROVIDED A COPY OF THE CONFLICT OF INTE	REST POLICY AT
FIRST BOARD MEETING OF THE YEAR. IF CONFLICT ARISES ON A	PARTICULAR
DISCUSSION ITEM, MEMBER VACATES ROOM WHILE THERE IS DISCU	SSION AND VOTING.
FORM 990, PART VI, SECTION B, LINE 15:	,
THE PROCESS FOR DETERMINING COMPENSATION OF THE ORGANIZAT	TION'S TOP
MANAGEMENT, OFFICERS, AND KEY EMPLOYEES ARE REVIEWED AND	APPROVED BY THE
BOARD MEMBERS.	
FORM 990, PART VI, SECTION C, LINE 19:	
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FIN	NANCIAL STATEMENT
INFORMATION IS MADE AVAILABLE UPON REQUEST.	
FORM 990, PART VII, SECTION A, LINE 1A:	
REPORTABLE COMPENSATION FROM THE ORGANIZATION FOR TRUDY N	VISHIHARA
REPRESENTS INSTRUCTOR FEES.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
HAR-POLITICAL ACTION COMMITTEE ACCOUNTS PAYABLE & OTHER	
CURRENT LIABILITIES	7,447.
ROUNDING	1.
TOTAL TO FORM 990, PART XI, LINE 9	7,448.
FORM 990, PART XII, LINE 2C:	
HAWAII ASSOCIATION OF REALTORS HAS AN AUDIT COMMITTEE THA	AT ASSUMES
532212 09-02-15 Sche	edule O (Form 990 or 990-EZ) (2015

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization HAWAII ASSOCIATION OF REALTORS	Employer identification number 23-7056154
RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIA	L STATEMENTS
AND SELECTION OF AN INDEPENDENT ACCOUNTANT. THIS PROCESS	HAS NOT
CHANGED FROM THE PRIOR YEAR.	
	·····

SCHEDULE R (Form 990)

Part

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

2015

OMB No 1545-0047

Employer identification number 23-7056154 Open to Public Inspection

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 ► Attach to Form 990. HAWAII ASSOCIATION OF REALTORS Name of the organization Department of the Treasury Internal Revenue Service

Direct controlling 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 End-of-year assets **e** Total income € Legal domicile (state or foreign country) Primary activity 9 Name, address, and EIN (if applicable) of disregarded entity Part II

(g) Section 512(b)(13) controlled ŝ × entity? Yes Direct controlling entity Public charity status (if section 501(c)(3)) e Exempt Code section 冟 527 Legal domicile (state or foreign country) HAWAII Primary activity SEE PART VII ACTION COMMITTEE - 90-0041818, 1259 A'ALA HAWAII ASSOCIATION OF REALTORS POLITICAL STREET, SUITE 300, HONOLULU, HI 96817 Name, address, and EIN of related organization

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

Schedule R (Form 990) 2015

Page 2

Schedule R (Form 990) 2015 HAWAII ASSOCIATION OF REALTORS

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

Name address, and EIN Name address, and EIN Of related organization ocurring ocurr	(a)	(q)	(o)	(p)	(e)	£	(a)	Ð	9	9	3
Sections 512-514) Sections 512-514) Yes No K-1 (Form 1065)	Name, address, and EIN of related organization	Primary activity	Legat domicile (state or		Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year	Disproportionate allocations?	Code V UBI amount in box	General or managing partner?	Percentage ownership
			toreign country)		sections 512-514)		dosets		K-1 (Form 1065)	Yes No	
		_									
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	, the same of the										

Par N

(a)	(q)	(2)	(p)	(e)	(J)	(6)	(H)	(5)	۽
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Legal domicile Direct controlling (state or entity (Type of entity (C corp, S corp,	Share of total income	Share of end-of-year	Percentage ownership	512(b)(13) controlled	13) Ped (3)
)		foreign country)		or trust)		assets		Yes	ŝ
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532162 09-08-15						Sch	Schedule R (Form 990) 2015	2 (ספפ ר	2015

Page 3

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				_	Yes	å
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?	is with one or more re	elated organizations listed	in Parts II-IV?		_	
a Receipt of (I) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	>			1a		×
b Gift, grant, or capital contribution to related organization(s)				1p	×	
c Gift, grant, or capital contribution from related organization(s)				1c		×
d Loans or loan guarantees to or for related organization(s)				1d		×
e Loans or loan guarantees by related organization(s)				e e		×
						1
f Dividends from related organization(s)				=		×
g Sale of assets to related organization(s)				19	-	×
h Purchase of assets from related organization(s)				ŧ		×
i Exchange of assets with related organization(s)				÷		×
J Lease of facilities, equipment, or other assets to related organization(s)				=	\dashv	×
k Lease of facilities, equipment, or other assets from related organization(s)				*		×
! Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			11		×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			1		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)uoı			1n		×
o Sharing of paid employees with related organization(s)				9	\dashv	×
						;
p Reimbursement paid to related organization(s) for expenses				<u>م</u>	1	⊲
q Reimbursement paid by related organization(s) for expenses				₽		×
						>
				÷ 4	T	< ×
ourer transfer of cash of property from related organization(s)				2	1	:
2 If the answer to any of the above is "Yes," see the instructions for information on w	who must complete the	is line, including covered	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	olved		
HAWAII ASSOCIATION OF REALTORS POLITICAL (1) ACTION COMMITTEE	Д	1,000.CASH	CASH			
(2)					i	
(8)						
(4)						
(5)						
. 3						
(b) 532163 09-08-15			Schedule R (Form 990) 2015	3 (Form	(066	2015

Page 4

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

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(k) Percent	owners															990) 2(
(j) eneral or	tanaging partner?	Ves No					 			ŀ						(Form
(ı) Code V-UBI	tionale amount in box 20 managing allocations? of Schedule K-1 partner?	(2001			 						 •				_	Schedule R (Form 990) 2015
(h)	tionate a	Ves No		 #						1	 					
ة		<u> </u>								+	 				 	
(g) Share of	end-of-year assets															
(f) Share of																
(e) Are all	01(c)(3)	Ves No		 1					 	+						ļ
(d)	excluded from tax under	(+1 0-21 0 cionas									•					
(c)	(state or foreign (country)												-			
(b) Primary activity																
(a) (b) (c) (d) (d) (d)	of entity															

Schedule R (Form 990) 2015 HAWAII ASSOCIATION OF REALTORS	23-7056154	Page 5
Part VII Supplemental Information		
Provide additional information for responses to questions on Schedule R (see instructions)		
PART II COLUMN (B) PRIMARY ACTIVITY:		
POLITICAL CONTRIBUTIONS AND CAMPAIGN ACTIVITIES IN SUPPORT	OF POLITICAL	J
CANDIDATES WHOSE INTERESTS ARE IN HARMONY WITH THOSE OF THE	REAL ESTATE	3
PROFESSION AND PRIVATE PROPERTY RIGHTS.		
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