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# 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)

OMB No 1545-0047 2015

Open to Public

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. For the 2015 calendar year, or tax year beginning 2015, and ending D Employer Identification number C Name of organization Check if applicable Glenwood Springs Association of Realtors Address change 84-0777133 Doing business as Number and street (or P O box if mail is not delivered to street address) E Telephone number Name change 108 (970) 945-9762 Initial return S GRAND AVE City or town, state or province, country, and ZIP or foreign postal code Final return/terminated **G** Gross receipts \$ 298,974 Amended return GLENWOOD SPRINGS CO 81601 H(a) Is this a group return for subordinates? F Name and address of principal officer Application pending H(b) Are all subordinates included?
If 'No,' attach a list (see instructions CHERYL BURNS 2520 S GRAND AVE \$108 GLENWOOD SPRINGS CO 81601 Yes No 4947(a)(1) or Tax-exempt status X 501(c) ( 6 ) (insert no ) Website: ► H(c) Group exemption number Form of organization L Year of formation 1976 M State of legal domicile X Corporation Association Summary Briefly describe the organization's mission or most significant activities Governance If the organization discontinued its operations or disposed of more than 25% of its net assets. Check this box ► Number of voting members of the governing body (Part VI, line 1a) . . . . . 3 Number of independent voting members of the governing body (Part VI, line 1b) . 4 Total number of individuals employed in calendar year 2015 (Part V, line 2a) . . . 5 1 Total number of volunteers (estimate if necessary) . . . . . . . . 6 40 166,729.Total unrelated business revenue from Part VIII, column (C), line 12 . 7a b Net unrelated business taxable income from Form 990-T, line 34 7b -1,604.Prior Year **Current Year** 115,637.Contributions and grants (Part VIII, line 1h) . . . . . . . . 94,581 Program service revenue (Part VIII, line 2g) . . . . . . . . . . . . 207,626 181,632. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . 709 1,705. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . . . 11 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . . 12 302,916 298,974. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . . . . . . 9,500 10,250. Benefits paid to or for members (Part IX, column (A), line 4)
Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 14 15 78,654 80,988. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 194,721. 193,725 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), Ine 25) 281,879. 285,959. 19 Revenue less expenses Subtract line 18 from line 12 21,037. 13,015. **End of Year Beginning of Current Year** 581,194. 20 Total assets (Part X, line 16) . . 579,069. 21 Total liabilities (Part X, line 26) . . . . . . . . . . . . . 12,307. 7,167. 22 566,762. 574,027. Signature Block 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 Print/Type preparer's name Date PTIN Preparer's signature David M Reynolds **20/25/16** self-employed P00936184 Paid THE REYNOLDS Preparer **Use Only** Firm's address PO BOX 773 84-1157599 81602-0773 GLENWOOD SPRINGS (970) 945-7734

No

Yes

Pau			m Service Acco	mplichments	1.5		111133	Tage 2
icen		-		te to any line in this Part	101			
1		the organization's		te to any line in this Fait		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · ·	····
•	Board of	-						
	board_or_	Weat rolls				~		~
	Did the organize	tion undertake an	canificant program	services during the year	which were not list	ed on the prior	·	
_	_	=		· · · · · · · · · · · · ·			TYes	X No
		these new service					Ц 163	<u> </u>
3				cant changes in how it co	inducts any program	m services?	Yes	X No
	-	these changes or		din ondriges in now k oc	madata, any program	11 301 11003	🗀 .00	<u> </u>
4				hments for each of its th	ree largest program	services as measu	red by expense	es.
	Section 501(c)( and revenue, if	3) and 501(c)(4) organy, for each progr	ganizations are requi am service reported	hments for each of its the ired to report the amount	of grants and alloc	ations to others, the	total expenses	
4 a	(Code:	) (Expenses	\$	including grants of	\$	) (Revenue	\$	)
	PROFESSIO			, ARBITRATION,	MULTIPLE	<del></del> ··		
				ATION, PUBLIC I				
	ETHICS EN	FORCEMENT,	AND RELATED	MEMBER SERVICES	,			
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41	(Code.	) (Expenses	\$	including grants of	\$	) (Revenue	\$	
	·		·		·	<del></del> ^`		·
4 0	: (Code:	) (Expenses	Ś	including grants of	\$	) (Revenue	\$	)
- •			·		·		•	′
4 0	Other program :	services. (Describe	in Schedule O )	<del></del>				<del></del> -
		\$	including gr	ants of \$	) (Re	venue \$		)
4 6	Total program s		<b>&gt;</b>		7 (-10	<del></del>		·

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<u>- =</u>	+		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		<u> </u>
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 similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
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		Х
10		10		Х
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	11 a	Х	
!	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	11 b		Х
•	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	11 c		Х
•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		Х
1	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	12 b		_X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14:	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ļ	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		Х
15		15		Х
16		16		Х
17		17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19_		Х

<u></u>	Checklist of Required Schedules (continued)		Yes	No
<b>2</b> 0a	Did the organization operate one or more hospital facilities? If 'Yes', complete Schedule H	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	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
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and			х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 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		
25	a 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		
ا	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		į
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', complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
;	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
١	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		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		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
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	х	

BAA

84-0777133 Form 990 (2015) Glenwood Springs 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 . . . . . . . . . . . . . Yes No 1 a 0 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . . b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . . . . . . . . 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . . b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . . . . 3 a X 3 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 . . . . 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4 a **b** If 'Yes,' enter the name of the foreign country: **b** See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR) Х 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?..... 5 a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . . . 5 b 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization 6 a Х b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were 6 b 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 7 a services provided to the payor? 7 b **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided? . . . . . . c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с d If 'Yes,' indicate the number of Forms 8282 filed during the year . . . . . . . . . . . . . . . . e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?..... 7 e 7 f 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 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7 h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring R 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? . . . . . . 9 a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?. . . . 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12. . . . . . . . . . . . . 10 a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . . 11 Section 501(c)(12) organizations. Enter b Gross income from other sources (Do not net amounts due or paid to other sources 12 a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? . . . . Section 501(c)(29) qualified nonprofit health insurance issuers. 13 a a 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.

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

13 b

14 a

**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 . . . . . . . . . . 

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

[l <sup>a</sup>	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes Schedule O. See instructions.	w, an in	d tor	
	Check if Schedule O contains a response or note to any line in this Part VI			. X
Sec	tion A. Governing Body and Management			
			Yes	No
1:	a Enter the number of voting members of the governing body at the end of the tax year			
1	b Enter the number of voting members included in line 1a, above, who are independent   1 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?	2		X
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		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
-	a 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?	7 a	X	
I	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	a The governing body?	8 a	Х	<u> </u>
- 1	b Each committee with authority to act on behalf of the governing body?	8 b	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	9		
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Rever	nue C	ode.)	
			Yes	No
	a Did the organization have local chapters, branches, or affiliates?	10 a		Х
I	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b		
11:	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X	
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 · · · · · · · · · · · · · · · · · ·	12 a	Х	
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b		Х
•	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c		Х
13	Did the organization have a written whistleblower policy?	13		X
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?			
	a The organization's CEO, Executive Director, or top management official	15 a	X	<u> </u>
ı	b Other officers or key employees of the organization	15 b		Х
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)			
16:	a 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	Х	
ı	b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		X
Sec	ction C. Disclosure			
17				
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) for public inspection. Indicate how you made these available. Check all that apply.	availab	le	
19		le to		
20	the public during the tax year  State the name, address, and telephone number of the person who possesses the organization's books and records:			
	CHERYL BURNS 2520 \$ GRAND AVENUE \$108, GLENWOOD SPRINGS, CO 81601 (9	70) 9	945-	9762

### Pant VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

- 1 a 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 nor any related organization compensated any current officer, director, or trustee										
	(C)									
(A) Name and Title	(B) Average hours per	Pos than	both	an of ector/	fficer a truste	ck more personand a e)		(D)  Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) ERIN BASSET PAST CHAIR	_3.00	X						0.	0.1	0.
(2) BOB FULLERTON CHAIR	_3.00	Х						0.	0.	0.
(3) KONNIE KRAHN-PROSENCE CHAIR ELECT	_3.00	х						0.	0.	0.
_(4)_ LaPRIEL_ARMIJO 	3.00	Х						0.	0.	0.
(5) BRANDY SWANSON DIRECTOR	3.00	Х						0.	0.	0.
(6) MIKE DUNN DIRECTOR	3.00	х						0.	0.	0.
_(7)_ BRAD_PLANTZ 	3.00	х						0.	0.	0.
	_3.00	Х						0.	0.	0.
(9) PHIL_WEIR DIRECTOR	_3.00	х						0.	0.	0.
(10) CHERYL BURNS CEO	40.00				Х			69 <b>,</b> 929.	0.	0.
(11)										
(12)										
(13)										
(14)										

\$100,000 of compensation from the organization

Total number of independent contractors (including but not limited to those listed above) who received more than

Pari	Statement of Revenue	BBOCIUCION O	1 Realcold		04 0777133	
الميت الم	Check if Schedule O contains a respon	nse or note to any lin	e in this Part VIII .	<i>.</i>		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
its ts	1a Federated campaigns 1a				<del></del>	
ran	b Membership dues 1 b	104,912.				i I
s, G	c Fundraising events 1 c	10,725.				
ar /	d Related organizations 1 d					
s, C	e Government grants (contributions) 1 e			) !		
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, gifts, grants, and similar amounts not included above 1 f					
ntri d O	g Noncash contributions included in lines 1a-1f \$					
Co	h Total. Add lines 1a-1f		115,637.			
Iue		Business Code				
γeΓ	2a MLS	531390	153,929.	0.	153,929.	0.
a Re	b EDUCATION	611430	2,840.	2,840.	0.	0.
Κį	c FEES	531390	23,716.	10,916.	12,800.	0.
æ	d MEETINGS	611430	1,147.	1,147.	0.	0.
am	e					
Program Service Revenue	f All other program service revenue					
<u> </u>	g Total. Add lines 2a-2f		181,632.			
	Investment income (including dividends, other similar amounts)	interest and	4 505			_
	4 Income from investment of tax-exempt be	ı,	1,705.	1,705.	0.	0.
	5 Royalties	· .	<del>-</del>			
	(i) Real	(II) Personal				
	6 a Gross rents	<del>                                     </del>				
	b Less: rental expenses	1				
	c Rental income or (loss) .					
	d Net rental income or (loss)	<u></u> ▶				
	7 a Gross amount from sales of (i) Securities	(ii) Other				
·	assets other than inventory					
	b Less cost or other basis and sales expenses					
	c Gain or (loss)					
	, ,					
Other Revenue	8 a Gross income from fundraising events (not including\$ 10,725. of contributions reported on line 1c)					
æ	See Part IV, line 18	a				
ē		b				
ᇂ	c Net income or (loss) from fundraising even	ents ▶				
	9 a Gross income from gaming activities See Part IV, line 19	a				
	· · · · · · · · · · · · · · · · · · ·	b				
	c Net income or (loss) from gaming activitie	es				
	10 a Gross sales of inventory, less returns and allowances					
		b				
	c Net income or (loss) from sales of invent	ory	-			
	Miscellaneous Revenue	Business Code				
	11a					
	b					
	С					
	d All other revenue					
	e Total. Add lines 11a-11d					

84-0777133

# Part X Statement of Functional Expenses

	not include amounts reported on lines 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		·		<u> </u>
2	Grants and other assistance to domestic individuals. See Part IV, line 22	10,250.			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	10,230.			
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	69,929.			
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				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,993.			
9	Other employee benefits	3,456.			
10	Payroll taxes	5,610.			
11	Fees for services (non-employees)				
	Management	1,074.			
	Legal	6,000.			
	Accounting	998.			· · · - ·
	Lobbying				
	Professional fundraising services See Part IV, line 17				
	Investment management fees		7-7-1	-	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
	Advertising and promotion			ļ	
13	Office expenses	2,400.			
14	Information technology			ļ	
15	Royalties		. <u> </u>	ļ	
16	Occupancy	1,408.			
17	Travel			<del> </del>	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	24,882.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,126.			
23	Insurance	823.			
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)				
á	POSTAGE	523.			
	Bank fees	1,840.			
	Dues	34,160.			
	EDUCATION	5,065.			
	All other expenses	105,422.			
25	Total functional expenses Add lines 1 through 24e	285,959.			
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				
	SOP 98-2 (ASC 958-720)				
BAA		TEEA0110 10/1	2/15		Form <b>990</b> (2015)

		Check if Schedule O contains a response or note to ar	ny line in this	Part X			<u>.</u>
					(A) Beginning of year		(B) End of year
	1	Cash non-interest-bearing			204,806.	1	348,578.
ŀ	2	Savings and temporary cash investments	[	131,521.	2		
Ì	3	Pledges and grants receivable, net		[		3	
	4	Accounts receivable, net	<u> </u>	4			
ļ	5	Loans and other receivables from current and former office					
	J	trustees, key employees, and highest compensated emp Part II of Schedule L	loyees Com	plete			
			L.		5		
	6	Loans and other receivables from other disqualified persisection 4958(f)(1)), persons described in section 4958(c) employers and sponsoring organizations of section 501(d beneficiary organizations (see instructions). Complete Pa	ontributina		6		
9	7	Notes and loans receivable, net	[		7		
Assets	8	Inventories for sale or use	[		8		
As	9	Prepaid expenses and deferred charges		<i>.</i> [		9	
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10.2	368 <b>,</b> 564.			
		Less: accumulated depreciation		149,698.	228,992.	10 c	218,866.
	11	Investments – publicly traded securities				11	
	12	Investments – other secunties See Part IV, line 11		-	13,750.	12	13,750.
·	13	Investments – program-related. See Part IV, line 11		-	13,730.	13	15,150.
	14	Intangible assets		<b> </b>		14	
	15	Other assets See Part IV, line 11	-	15			
	16	Total assets. Add lines 1 through 15 (must equal line 34		F	579,069.	16	581,194.
$\neg$	17	Accounts payable and accrued expenses		· · · · · · · · · · · · · · · · · · ·	12,307.	17	7,167.
	18	Grants payable			12/00/11	18	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
တ္မ	21	Escrow or custodial account liability Complete Part IV o	f Schedule D		<del></del> -	21	
Liabilities	22	Loans and other payables to current and former officers, key employees, highest compensated employees, and d Complete Part II of Schedule L	isqualified pe	rsons		22	
	23	Secured mortgages and notes payable to unrelated third	parties			23	
	24	Unsecured notes and loans payable to unrelated third pa	arties	<i>.</i>		24	
	25	Other liabilities (including federal income tax, payables to and other liabilities not included on lines 17-24). Complete	o related third te Part X of S	l parties, Schedule D		25	
	26	Total liabilities. Add lines 17 through 25			12,307.	26	7,167.
<u>"</u>		Organizations that follow SFAS 117 (ASC 958), check	k here ► X	nd complete			
ĕ		lines 27 through 29, and lines 33 and 34.	لحدا				
a	27	Unrestricted net assets			566,76 <u>2.</u>	27	574,027.
Bal	28	Temporarily restricted net assets		· · · · · · · · · · · · · · · · · · ·		28	
힏	29	Permanently restricted net assets				29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958) and complete lines 30 through 34.	), check here	• ▶ ∐			
<u>8</u>	30	Capital stock or trust principal, or current funds		<i></i> [		30	
8	31	Paid-in or capital surplus, or land, building, or equipment	fund	[		31	
As	32	Retained earnings, endowment, accumulated income, or	r other funds	[		32	
ē	33	Total net assets or fund balances			566,762.	33	574,027.
~	34	Total liabilities and net assets/fund balances		<u></u> [	579,069.	34	581,194.
<u></u>							Form 990 (2015)

Forn	1990 (2015) Glenwood Springs Association of Realtors 84-	077713	3	Pag	ge 12
[ ලිනු	飛翔 Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u>.</u> .			. 🛚
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	98,9	74.
2	Total expenses (must equal Part IX, column (A), line 25)	2		85,9	
3	Revenue less expenses Subtract line 2 from line 1	3		13,0	15.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		66,7	
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		<u>-5,7</u>	<u>50.</u>
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))		-		0.77
	®∭ Financial Statements and Reporting	10	5	<u>74,0</u>	<u>21.</u>
اله وا	• •				_
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>			<u>·      </u>
			1	Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other		- 1		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	Х	
	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.	ı			
	X Separate basis Consolidated basis Both consolidated and separate basis				_
	b Were the organization's financial statements audited by an independent accountant?		2 b	İ	Х
	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				
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud review, or compilation of its financial statements and selection of an independent accountant?	lıt, • • • • •	2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3	a 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?		3 a		Х
ı	g If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a	udıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	3 b		
BAA	· · · · · · · · · · · · · · · · · · ·		Form	990 (2	2015)

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

### **Political Campaign and Lobbying Activities**

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

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

► 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

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

• Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C.

• 9	ection 527 organizations: Com	plete Part I-A only		•	
		,' on Form 990, Part IV, line 4, or Form 990 that have filed Form 5768 (election under sea			
• 5		that have NOT filed Form 5768 (election und			
If the		,' on Form 990, Part IV, line 5 (Proxy Tax) ( en	see instructions) or	Form 990-EZ, Part V, lin	e 35c
• 5	ection 501(c)(4), (5), or (6) org	anizations. Complete Part III			
Name	of organization			Employer identifica	ation number
Gle	nwood Springs Asso	ciation of Realtors		84-077713	3
Par	Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organi	zation.
1	Provide a description of the or	rganization's direct and indirect political camp	aign activities in Part	IV.	
2					
3	Volunteer hours	<u> </u>			
_	Complete if the o	rganization is exempt under secti	on 501(c)(3).		
1	Enter the amount of any excis	e tax incurred by the organization under sect	on 4955	· · · · · · · · · · · · ▶ \$	
2	Enter the amount of any excis	se tax incurred by organization managers und	er section 4955		
3	If the organization incurred a s	section 4955 tax, did it file Form 4720 for this	year?		· · · Yes No
4 a	Was a correction made?				Yes No
	If 'Yes,' describe in Part IV.				
Par	Complete if the o	rganization is exempt under secti	on 501(c) . exce	pt section 501(c)(3).	
1		ended by the filing organization for section 52			
2	Enter the amount of the filing function activities	organization's funds contributed to other orga	nizations for section	527 exempt	
3	Total exempt function expendine 17b	itures. Add lines 1 and 2 Enter here and on F	Form 1120-POL,		
4	Did the filing organization file I	Form 1120-POL for this year?			Yes No
5	organization made payments amount of political contribution	and employer identification number (EIN) of al For each organization listed, enter the amoun ns received that were promptly and directly de action committee (PAC) If additional space is	nt paid from the filing elivered to a separate	organization's funds. Also political organization, suc	enter the
	(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)					
(2)	<del></del>				
(3)					
(4)	<del></del>				
(5)					
(6)					
BAA	For Paperwork Reduction A	ct Notice, see the Instructions for Form 99	0 or 990-EZ.	Schedule C (For	n 990 or 990-EZ) 2015

Schedule C (Form 990 or 990-EZ) 20	<sup>15</sup> Glenwood Sr	orings Association	n of Realtors	84-077	7133 Page <b>2</b>
Part II-A Complete if section 501(	the organizatio	n is exempt under se	ction 501(c)(3) and	filed Form 5768 (e	
A Check ► If the filing	g organization belor	ngs to an affiliated group (and	d list in Part IV each affilia	ated group member's nam	ne,
address,	EIN, expenses, and	share of excess lobbying ex	(penditures)		
B Check ► I If the filing	g organization chec	ked box A and 'limited contro	ol' provisions apply		
(The term	Limits on Lobby	ring Expenditures ans amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditur	es to influence publ	ic opinion (grass roots lobby	ing)		
<b>b</b> Total lobbying expenditur	es to influence a leg	gislative body (direct lobbying	g)		
c Total lobbying expenditur	es (add lines 1a an	d 1b)			
d Other exempt purpose ex	penditures				
e Total exempt purpose ex	penditures (add line	s 1c and 1d)			<u> </u>
f Lobbying nontaxable amo	ount. Enter the amo	unt from the following table ii	n 		
If the amount on line 1e, colu		The lobbying nontaxable			
Not over \$500,000	(4) 5: (4) :5	20% of the amount on line 1e			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	s over \$500,000		
Over \$1,000,000 but not over \$	51,500,000	\$175,000 plus 10% of the excess	s over \$1,000,000		
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess			
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a	mount (enter 25% o	f line 1f)			
•	•	enter -0			
i Subtract line 1f from line	1c If zero or less, e	nter -0			
		er line 1h or line 1i, did the or		) reporting	
					Yes No
(Som	e organizations th	4-Year Averaging Period U at made a section 501(h) el ns below. See the instructi	ection do not have to c		
	Lob	bying Expenditures During	4-Year Averaging Perio	od	
Calendar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) Total
2 a Lobbying nontaxable amount					
<b>b</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					

BAA

Schedule C (Form 990 or 990-EZ) 2015

Part (HB) Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).						
	(a	1)	(b)			
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity		No	Amount			
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>b</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?						

2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?
b If 'Yes,' enter the amount of any tax incurred under section 4912
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912

			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?	3		Х

# 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	104,912.
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	2 a	0.
	<b>b</b> Carryover from last year	2 b	
	<b>c</b> Total	2 c	0.
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	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	0.
$\overline{}$			

### Part W 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.

### **SCHEDULE D** (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.

2015

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	Glenwood Springs Association	of Realtors		84-0777133
වන	Organizations Maintaining Donor		r Similar Funds	
1201	Complete if the organization answere	ed 'Yes' on Form 990, Pa	rt IV, line 6.	
		(a) Donor advised fur	ds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	- · · · · · · · · · · · · · · · · · · ·			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor ad are the organization's property, subject to the organ			
6	Did the organization inform all grantees, donors, an for charitable purposes and not for the benefit of the impermissible private benefit?	e donor or donor advisor, or for	any other purpose of	conferring
Den	Conservation Easements.	<del> </del>		
<u>ra</u>	Complete if the organization answere	ed 'Yes' on Form 990. Pa	rt IV. line 7.	
1				
	Preservation of land for public use (e.g., recrea	· · · · · · · · · · · · · · · · · · ·	• •	nistorically important land area
	Protection of natural habitat		1	ertified historic structure
	Preservation of open space	L	J	
2	Complete lines 2a through 2d if the organization hel	id a qualified conservation cont	ribution in the form o	of a conservation easement on the
	last day of the tax year.	•	<b>*</b>	
				Held at the End of the Tax Yea
	a Total number of conservation easements		<b>-</b>	2 a
	<b>b</b> Total acreage restricted by conservation easements		L	2 b
	c Number of conservation easements on a certified hi	• • •	F	2 c
,	d Number of conservation easements included in (c) a	acquired after 8/17/06, and not	on a historic	
3	structure listed in the National Register		L	2d
J	tax year	erred, released, extinguished,	or terminated by the	e organization during the
4	Number of states where property subject to conserv	vation easement is located ►		
5			ection handling of v	volations
•	and enforcement of the conservation easements it h			
6	Staff and volunteer hours devoted to monitoring, ins	pecting, handling of violations,	and enforcing cons	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspect	ing, handling of violations, and	enforcing conservat	ion easements during the year
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?	2(d) above satisfy the requirem	ents of section 170	(h)(4)(B)(ı) · · · · · · · · ·   Yes     No
9	In Part XIII, describe how the organization reports conclude, if applicable, the text of the footnote to the	onservation easements in its re organization's financial stateme	venue and expense nts that describes th	e statement, and balance sheet, and ne organization's accounting for
	conservation easements	one of Art Historias T		har Cimilar Assats
<b>2</b> a1	Organizations Maintaining Collectic Complete if the organization answere	ed 'Yes' on Form 990, Pa	rt IV, line 8.	mer Similar Assets.
1 :	a If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held in Part XIII, the text of the footnote to its financial sta	for public exhibition, education.	or research in furth	nent and balance sheet works of serance of public service, provide,
ı	b If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for following amounts relating to these items:	S 116 (ASC 958), to report in its bublic exhibition, education, or its	revenue statement esearch in furtherai	t and balance sheet works of art, nce of public service, provide the
	(i) Revenue included on Form 990, Part VIII, line 1			
	(ii) Assets included in Form 990, Part X			
	If the organization received or held works of art, hist amounts required to be reported under SFAS 116 (A	torical treasures, or other simila ASC 958) relating to these item	r assets for financia s:	gain, provide the following
á	a Revenue included on Form 990, Part VIII, line 1			▶\$
	b Assets included in Form 990, Part X			

a Board designated or quasi-endowment ►

b Permanent endowment ►

%

c Temporarily restricted endowment ► %

The percentages on lines 2a, 2b, and 2c should equal 100%.

**3 a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by

4 Describe in Part XIII the intended uses of the organization's endowment funds.

### Part 🕅 Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on 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				
<b>b</b> Buildings	295,988.		79,057.	216,931.
c Leasehold improvements				
d Equipment	72,576.		70,641.	1,935.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equa	al Form 990, Part X, colur	mn (B), line 10c.)		218,866.

BAA

Schedule **D** (Form 990) 2015

Schedule D (Form 990) 2015 Glenwood Springs	Association of	Realtors	84-0777133	Page :
Investments - Other Securities.   Complete if the organization answered			ee Form 990. Part X. line	∋ 12.
(a) Description of security or category (including name of security)	(b) Book value		uation Cost or end-of-year market va	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other	-			
(A)				<del></del>
(B)		<del> </del>		
(C) (D)	-	<del> </del>		
(E)			<del></del>	
(F)		<del> </del>		
(G)				
(H)	-			
(I)				
Total (Column (b) must equal Form 990, Part X, column (B) line 12) Part VIII Investments — Program Related.	<u> </u>	<u>L</u>		
Complete if the organization answered	'Yes' on Form 990,	Part IV, line 11c. Se	ee Form 990, Part X, line	<del>≥</del> 13.
(a) Description of investment	(b) Book value		tion. Cost or end-of-year mark	
(1)				
(2)		<u> </u>		
(3)	<del></del>	<del> </del>		
(4)	<del> </del>	<del> </del>		
(5) (6)	<del> </del>	<del> </del>	<del> </del>	
(7)	<del>                                     </del>	<del> </del>		
(8)		T		<del></del>
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 13).	<u> </u>	<u>                                     </u>		<del>,</del> =
Part X Other Assets. Complete if the organization answered	l 'Yes' on Form 990.	Part IV, line 11d. Se	ee Form 990, Part X, line	e 15.
(a) [	Description		<b>(b)</b> Book	
(1)				
(2)			<del></del>	
(4)				
(5)	· · · · · · · · · · · · · · · · · · ·			
(6)	<del>, , , , , , , , , , , , , , , , , , , </del>	· · · · · · · · · · · · · · · · · · ·		
(7) (8)				
(9)	<del></del>			- <del></del>
(10)	<del></del>			
Total. (Column (b) must equal Form 990, Part X, column (B,	) line 15 )			
Parit X Other Liabilities. Complete if the organization answered 'Yes' on				
(a) Description of liability	(b) Book value			
(1) Federal income taxes				
(2)				
(3)	<del></del>			
(5)	<del></del>			
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total (Column (b) must equal Form 990, Part X, column (B) line 25) 2. Liability for uncertain tax positions In Part XIII, provide the text of the fo		incial statements that reports	the organization's liability for uncerta	ın
tax positions under FIN 48 (ASC 740) Check here if the text of the footnot				П
BAA	TEFA3303 06/03/15		Schedule D (Form	990) 2015

chedule <b>D</b> (Form 990) 2015 Glenwood Springs Association of Realtors 84-	-0777133 Page	÷ 4
Reconciliation of Revenue per Audited Financial Statements With Revenue per Re		
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	_
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.		_
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of pnor year grants		
d Other (Describe in Part XIII )		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	_
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		_
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII )		
c Add lines 4a and 4b	4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
ant XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per F	Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.		_
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII )		
e Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2 e	_
3 Subtract line 2e from line 1	3	_
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 )		
C Add lines 4a and 4b	40	—
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	—
rangering outpremental 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

# SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Complete if the organization answered 'Yes' on 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.

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OMB No. 1545-0047

Open to Public	Inspection	2 4	ication number
		100	Employer Identification number

84-0777133

Glenwood Springs Association of Realtors Partil General Information on Grants and Assistance	on of Realtors rants and Assista	ance				84-0777133	3
<ul> <li>1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantee the selection criteria used to award the grants or assistance?</li> <li>2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States</li> </ul>	s to substantiate the an grants or assistance?	nount of the grants o	le grants or assistance, the grantees' eligibility for the grants or assistance, and	is' eligibility for the grants or assistanc	s or assistance, and		X Yes No
<b>Partill</b> Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on 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.	nce to Domestic for any recipient th	Organizations and received more	and Domestic Gove than \$5,000. Part	ernments. Comple	ete if the organizati if additional space	ion answered 'Yes e is needed.	s, on
1 (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)							
[2]							
							-
(3)							
[4]							
[5]							
(6)							
[7]							
18)							
2 Enter total number of section 501(c)(3) and government organizations I	and government organ	izations listed in the	isted in the line 1 table				
3 Enter total number of other organizations listed in the line 1 table	ns listed in the line 1 ta	ble					
BAA For Paperwork Reduction Act Notice, see the Instructions for Forn	e, see the Instructions	s for Form 990.		TEEA3901 11/04/15	11/04/15	Schedul	Schedule I (Form 990) (2015)

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Schedule I (Form 990) (2015) Glenwood Springs Association of Realtors

Partill Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

can so adpicated in additional opace 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
1 SCHOLARSHIPS	19	10,250.			
2					
3					
4					
r.					
9					
7					
Part III column (b) and any other additional information required in Part I. line 2. Part III. column (b), and any other additional information.	de the information	required in Part Lir	e 2 Part III colum	(h) and any other add	ditional information.

Schedule I (Form 990) (2015)

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

### 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.

2015

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Pt VI, Line 7a

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

Glenwood	Springs	<u>Association</u>	of	Realtors

Employer identification number

84-0777133

Pt VI, Line 11b AVAILABLE TO ALL BOARD MEMBERS
Pt VI, Line 15a BOARD REVIEWS ALL SALARY AND COMPENSATION
Pt VI, Line 6 ORGANIZATION HAS MEMBERS

BOARD ELECTS MEMBERS OF GOVERNING BODY