

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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 2016

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

<u> </u>	roi the A	to to calen	ar year, or tax year beginn			and endi				,	
В	Check if app		C Name of organization KITS	SAP COUNTY A	SSOCIATION	OF REA	LTORS	<u> </u>		tification numb	er
	Addres	s change	Doing business as						0723		
	Name	change	Number and street (or P O box	f mail is not delivered to s	treet address)	Room	/suite	E Telepho	ne num	ber	
	Initial r	eturn	3689 MUNSON STREE					(36	0) 6	92-8852	
	Final ret	urn/terminated	City or town, state or province, co	ountry, and ZIP or foreign	postal code						
	Amend	led return	SILVERDALE		WA	98383		<b>G</b> Gross re	eceipts	\$ 310,5	72.
	Applica	ation pending	F Name and address of principal o	fficer			H(a) is this	group return	for sub	ordinates?	Yes X No
		4	MICHAEL ELIASON 3689 MUN	SON STREET SIL	VERDALE WA	98383	H(b) Are all	subordinates attach a list (	included	is 🔲	Yes 🗌 No
$\overline{\Gamma}$	Tax-exe	mpt status	501(c)(3) X 501(c) ( 6	) < (insert no )	4947(a)(1) or	527	] ","	attacit a list (	566 111511	uctions)	
J	Websi	te: ► WW	W.KITSAPREALTOR.O				H(c) Group	exemption nu	mber 🕨	•	
$\overline{\mathbf{K}}$	Form of c	rganization	X Corporation Trust	Association Other	LY	ear of format	ion 194	9 <b>M</b> s	tate of le	egal domicite	WA
Pa	rit 📗 🔃	Summar	v	<del></del>							
<u> </u>			e the organization's mission	or most significant a	activities RE	ALTOR	TRADE	ASSOCI.	ATIC	N	
a		- <del></del>									
Š		<b>-</b>			- <b></b>			- <b></b> -			
Activities & Governance	] [				- <b>-</b>						
o Ve		eck this bo							ssets		
ى سى			ing members of the governing						3		36
S	1		ependent voting members of						4		36
ij	1		of individuals employed in ca	•					5		2
Ę	1		of volunteers (estimate if ned d business revenue from Par						6 7a		53
⋖	ľ		business taxable income froi	•				• • • •	7b		483.
		unicialed	business taxable income nor	11 0111 990-1 <sub>0-11116-</sub>				rior Year		Curren	0.
	8 Co 9 Pro	ntributione	and grants (Part VIII, line 1h)	ــم ا	RECEIVE		<u>_</u>	267,7	00		
e i			, ,	احما		<u> </u>	·	20,6			74,422. 32,771.
Revenue	10 Inv	estment in	ce revenue (Part VIII, line 2g come (Part VIII, column (A), I	ines 3. 4. and (2d)	NOV 2 2 201	7 9	. <del> </del>	20,0	15.	<del></del> -	12.
æ	11 Ot	her revenue	(Part VIII, column (A), lines	5. 6d. 8c. 9c. 10c. a	and 11e)	02 02	. <del>                                     </del>	3,5			2,844.
(	1 12		- add lines 8 through 11 (m	1		}		292,0		3	10,049.
			nılar amounts paid (Part IX, o					4,7			1,500.
	l-~		o or for members (Part IX, co						<del>  </del>		1,000.
	E15 C2	•	r compensation, employee be					219,1	62	2'	21,278.
	Sa Dr		undraising fees (Part IX, colu					21011	02.		1,2,0.
ens							* 1	is to	- (i		*
쩘	( b 10		ng expenses (Part IX, colum					£.3	*		<u> </u>
_	144 00	•	es (Part IX, column (A), lines					69,7			<u> 59,408.</u>
	1	•	s Add lines 13-17 (must equ					293,6			92 <b>,</b> 186.
		venue less	expenses Subtract line 18 fr	rom line 12		<u></u>	· <b> </b>	-1,6	01.		.7 <u>,863.</u>
5 g	İ						Beginnir	ig of Curren		End of	
aset Salai	20 To	•	Part X, line 16)		• • • • • • • • • • • • • • • • • • • •		·	204,3			7,369.
Net Assets Fund Balan	<b>21</b> To		(Part X, line 26)				·	88,8	$\overline{}$		74,787.
			fund balances Subtract line	21 from line 20		<u> </u>	· \	_115,5	22.	13	32,582.
Pa	ert II.	Signatur	e Block							·	
Unde	er penalties o	of perjury, I dec	lare that I have examined this return, i er (other than officer) is based on all in	ncluding accompanying so	chedules and statements	, and to the b	est of my know	rledge and be	lief, it is	true, correct, and	ļ.
-		I.	ST (CITICITY CITICOTY) TO BESSE OF CITICITY								
			e of officer				Da Da	1112	113		
Sig	gn										
He	re		HAEL ELIASON				EXECU	TIVE_V	ICE	PRESIDE	TM
			print name and title	Preparer's agpeture		I Data	<del></del>	<del></del>		DTM	
		Print/Type p	eparer's name	Preparer's agneture		Date		Check	۱ " ا	PTIN	
Pa		RANDY	BIEGENWALD	1		11/10	/17	self-employe	d	P0124540	)6
	eparer	Firm's name						!			
US	e Only	Firm's addre						Firm's EIN		<u>-1494073</u>	
			SILVERDALE		WA 9838			Phone no	(360	<del></del>	424
			return with the preparer sho			<u>.</u>		<u></u>	<u></u>	. X Yes	No
BA	A For Pa	perwork F	eduction Act Notice, see th	ne separate instruc	tions.	TE	EA0101 11/1	5/16		Form 9	<b>990</b> (2016)

Form	990 (2016) KITSAP COUN	TY ASSOCIATION OF REALTORS	91-	_0723769 Page 2
Par		am Service Accomplishments		
		ains a response or note to any line in this Part I	<u> </u>	
1	Briefly describe the organization's			
	REALTOR TRADE ASSOC	ATION		
	Did the ergenization undertake or	ly significant program services during the year	which were not letted as the prior	<del></del>
2	<del>-</del>			Yes X No
	If 'Yes,' describe these new service			·· L les V No
3	·	cting, or make significant changes in how it co	nducts any program services?	· · · Yes X No
Ū	If 'Yes,' describe these changes of		include, any program deritode in the	
4	Describe the organization's progr	am service accomplishments for each of its thre	ee largest program services, as meas	sured by expenses
	Section $501(c)(3)$ and $501(c)(4)$ and revenue, if any, for each program	rganizations are required to report the amount	of grants and allocations to others, th	e total expenses,
4 a	(Code) (Expenses	\$ including grants of	\$) (Revenue	\$)
	PROVIDE CONTINUING H	DUCATION TO ENABLE REALTORS	TO	
	MEET STATE LICENSING	REQUIREMENTS		
	(Code ) (Expenses	\$ including grants of	\$ ) (Revenue	\$ )
4 0		R FOR REALTORS COVERING	) (Revenue	,
		JLATORY AND MARKET ENVIRONME		
		ISSUES RELATED TO THE INDUST		~-~
	WELL AS ADVOCACT OF	ISSUES RELATED TO THE THOOS.	1111	
				·
4 c	(Code) (Expenses	\$ including grants of	\$) (Revenue	\$)
	ENHANCE THE INDUSTRY	WITHIN THE COUNTY BY PROVI	DING	
	MEDIATION SERVICES A	AND ENFORCING A CODE OF ETHI	<u>cs</u>	
- A -1	Other program convect (December	un Schedule ()		<del></del>
4 a	Other program services (Describe (Expenses \$	in Schedule O) including grants of   \$	) (Revenue \$	,
40	Total program service expenses	Including grants of ♀	) (I/casing A	
BAA		TEEA0102 11/16/16	<del></del>	Form <b>990</b> (2016)

# Part IV Checklist of Required Schedules

	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
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		_ 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	, ,,,,,,	X X X	
	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		X
	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
	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	11 f		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
	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a 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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		X
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 (see instructions)	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		Х
19	complete Schedule G, Part III	19		Х
-			000 /	

Form 990 (2016) KITSAP COUNTY ASSOCIATION OF REALTORS

Part IV Checklist of Required Schedules (continued) Yes No

20a	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		X
24 8	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 complete Schedule K. If 'No, 'go to line 25a	24a		X
ı	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(	© 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	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		
ı	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If '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		X
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)		, 3	*
	metractions for applicable ming uncorrecte; conditions, and exceptions,	* "	4	,
á	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u>X</u>
			-	X X
ı	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	-	X
ı	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a 28b		X
(	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a 28b 28c		X X X
1 29	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a 28b 28c 29	4	X
29 30	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a 28b 28c 29	-	X X X
29 30 31	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a 28b 28c 29 30 31	1	X X X X
29 30 31 32 33	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a 28b 28c 29 30 31	1	x x x x x x
29 30 31 32 33	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a 28b 28c 29 30 31 32	1	X
29 30 31 32 33 34 35	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a 28b 28c 29 30 31 32 33	-	x x x x x x
29 30 31 32 33 34 35	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.  b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.  c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV.  Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M.  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M.  Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I.  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.  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.  Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, Iine 1.  a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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, Iine 2.	28a 28b 28c 29 30 31 32 33 34 35a		X
29 30 31 32 33 34 35 a	a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  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.  Was the organization have a controlled entity within the meaning of section 512(b)(13)?  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  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	28a 28b 28c 29 30 31 32 33 34 35a 35b		X

BAA

1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . 1 a 0 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1 b 0 0 c b He the grantzation combly with backup withholding rules for reportable payments to vendors and reportable garming grambling winnings to prize winners? . 2 c 1 c X . 2 a Enter the number of amployees reported on Form W-3. Transmittal of Wage and Tax State . 2 a 2 c	Check if Schedule O contains a response or note to any line in this Part V			
1a Enter the number epromed in 8xx 3 of Form 1056 Enter -0" final applicable			$\overline{}$	
b Enter the number of Forms W-20 included in line 1 a Enter -0- if not appicable.  C Did the organization comply with backup withholding fuels for protrable payments to vendors and reportable gamming (gimiling) winnings to prize winners?  2 a Enter it his number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return.  2 a Enter it his number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return.  2 b If a least one is reported on the 23, did the organization file all recurred federal employment tax returns?  2 b X Nots, if the sum of lines 1s and 2s is greater than 250, you may be required to e-fee (see instructions)  3 b C Honganization have unrealized business gross income of \$1,00 or more during the year?  3 b If Yes, I feel if the see of this year? Wer for all 3, provide in explanation in Schedule 0.  4 c Not a see instruction for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  5 a Was the organization in party to a prohibited tax sheller transaction at any time during the tax year?  5 a Was the organization in party to a prohibited tax sheller transaction at any time during the tax year?  5 a Dos the organization in party to a prohibited tax sheller transaction at son that was on its a party to a prohibited tax shelter transaction?  5 b X or If Yes, I do the organization that it was on its a party to a prohibited tax shelter transaction?  5 c If Yes, to line 5 or 5b, did the organization that or was on its a party to a prohibited tax shelter transaction?  5 c If Yes, to the organization annual gross receipts that are normally greater than \$100,000, and did the organization should be organization to receive a payment in excess of \$75 made party as a contribution on grist were not tax deductible contributions.  6 a Does the organization should will every solici	1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a  0	1	1
c Dut the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize withomser;  2 a Eater the number of employees reported on Form W.3. Transmittal of Wage and Tax Statement, the first of the calendar year ending with or within the year covered by this return.  2 b If a least one is reported on line 2 a, did the organization lite all required federal employment tax returns?  3 b Dif was the organization have unrelated business gross income of \$1,000 or more during the year?  3 b If Yes, has a filed a Form 990-1 for this year? If We're line is a provide an explanation in Schedule O.  3 b Dif Yes, has the difference of the payor of the organization have an interest in, or a signature or other authority over, a financial account in a foreign country.  4 a All 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.  5 a Wes the organization in a party or a prohibited that where it is a second, or other famicial accounts (FBAR).  5 a Was the organization in a party or a prohibited that where it is a party to a prohibited that where the axes of the foreign country.  5 a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any orthibitions have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any orthibitions that were not tax deductible as characteristic contributions?  5 a Dot the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicity and prohibitions that there no fits a declared contributions or grifts were not tax deductible as characteristic contributions.  5 b If Yes, did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible as characteristic contributions.  5 b If Yes, indicate the numbe	•			
(gambing) wrinings to prize winners?  2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  2 En Tax Statements, filed for the calendar year ending with or within the year covered by this return  1b if al least one is reported on the 23, did the organization file all required federal employment tax returns?  2 b X  1b if a least one is reported on the 23, did the organization file all required federal employment tax returns?  2 b X  3 b Clt the organization have unated business gross smoom of \$1,000 or more during the year?  3 a X  3 b If Yes, shall filed a Form 990-T for the year? If the follows 3b, provide an explanation and the year or a signature or other authority over, a financial account; or foreign country?  3 a A R tay time drough calendary year, did the organization have an uniterest in, or a signature or other authority over, a financial account, or other financial account; or the financial account; or other financial		<del></del>		1
ments, field for the calendary year ending with or within the year covered by this return 2 2 b X Note. If the sum of lines 1 and 2 a its greater than 250, you may be required for e-file (see instructions)  3 b If at least one is reported on the 2 a, dith the organization file all required feed e-file (see instructions)  3 b If the regionarization have unrelated business gross income of 51,000 or more during the year?  5 b If Yes', has files a Fam 90-1 for this year' If Not to live 30, prouds an explanation as Schedule 0.  4 a At any time during the ceaned year, did the reginanziation have an interest in, or a signistive or other authority over, a financial account in foreign country (such as passant account, securities account), or other financial accounts (FBAR)  5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5 a Does the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5 a Does the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization for tax deductible as charitable contributions?  5 a Does the organization that were not tax deductible as charitable contributions?  5 a Does the organization that may receive deductible and contribution and express statement that such contributions or grifs were not tax deductible?  6 a Does the organization 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 of organization receive and partly organization receives a payment in excess of \$75 made partly as a contribution or drift organization received and the organization received an orthibution of cars, boats, arplanes, or other vehicles, did the organization fil	(gambling) winnings to prize winners?	1	c X	
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Form 8282? 7.		<b></b> _	3	
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 f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f gl f the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required? 7 h S Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. 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? 9 b Osection 501(c)(7) organizations. Enter a initiation fees and capital contributions included on Part VIII, line 12. 10 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b I Section 501(c)(2) organizations. Enter a Gross income from members or shareholders. 11 Section 501(c)(2) organizations. Enter a 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 15a Section 501(c)(29) qualified nonprofit health insurance issuers. 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 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed t				
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?.  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.  f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  7 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?  Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  Sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter  a Initiation fees and capital contributions included on Part VIII, line 12.  b Gross recepts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	· · · · · · · · · ·	, , , <del> </del>	<del></del>	. **
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.  glif the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  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?  Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  b Did the sponsoring organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  b Gross income from members or shareholders.  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 501(c)(12) organizations. Enter b if Yes, enter the amount of tax-exempt interest received or accrued during the year  11b  12a Section 501(c)(29) qualified nonprofit health insurance issuers. 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 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  tenter the amount of reserves on hand  tenter the amount of reserves on hand  14a Did the organization receive any payments for indoor tanning services during the tax year?  14a  b if Yes, has it filed a Form 720 to report these payments? If No, 'provide an expl		* · · · · · · · · · · · · · · · · · · ·	·	v   • ś
g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  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?  Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Did the sponsoring organizations. Enter a initiation fees and capital contributions included on Part VIII, line 12.  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Gross income from members or shareholders.  Did Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 501(c)(12) organizations. Enter a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 501(c)(29) qualified nonprofit health insurance issuers. 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 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves the organization is required to maintain by the states in which the organization receive any payments for indoor tanning services during the tax year?  13b If Yes, has it filed a Form 720 to report these payments? If No, 'provide an explanation in Schedule O				+-
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Form 1098-C?	as required?		3	<del> </del>
organization have excess business holdings at any time during the year?.  9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 b 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 10 b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders. 11 b 12a Section 501(c)(12) organizations. Enter b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). 11 b 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? 13 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. 13 c 14 a Did the organization receive any payments for indoor tanning services during the tax year? 14 a  15 b if 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	Form 1098-C?		1	
9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 b  10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 10 b  11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders. 11 b  12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 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 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.  c Enter the amount of reserves on hand  13 c  14 a Did the organization receive any payments for indoor tanning services during the tax year? 14 a Did the organization receive any payments for indoor tanning services during the tax year? 14 a Did the organization receive any payments for indoor tanning services during the tax year? 14 a Did the organization receive any payments for indoor tanning services during the tax year? 14 a Did the organization receive any payments for indoor tanning services during the tax year? 14 a Did the organization receive any payments for indoor tanning services during the any payments of these payments? If 'No,' provide an explanation in Schedule O.	· • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·	W	1 1 1/2
a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 b  10 Section 501(c)(7) organizations. Enter  a Initiation fees and capital contributions included on Part VIII, line 12.  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.  10 b  11 Section 501(c)(12) organizations. Enter  a Gross income from members or shareholders.  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12a Section 501(c)(29) qualified nonprofit health insurance issuers.  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 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.  c Enter the amount of reserves on hand.  13b  c Enter the amount of reserves on hand.  14a Did the organization receive any payments for indoor tanning services during the tax year?  14a X  b if 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.	organization have excess business holdings at any time during the year?			
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?.  9 b  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 10 b  11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders. 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). 11 b  12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b if 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12 b  13 Section 501(c)(29) qualified nonprofit health insurance issuers. 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 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 11 ab c Enter the amount of reserves on hand 13 c the organization receive any payments for indoor tanning services during the tax year? 14 a b if 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O. 14 b		Y * '	3	, N
a Initiation fees and capital contributions included on Part VIII, line 12			3	
a Initiation fees and capital contributions included on Part VIII, line 12	b Did the sponsoring organization make a distribution to a donor, donor advisor, or relate	d person? 91	)	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			1 1	
11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders			1	8. **
a Gross income from members or shareholders.  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).  11a  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	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	· · · · · 10b	ļ. *,	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				
against amounts due or received from them)		11a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	against amounts due or received from them)	· · · · · 11b	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?		<del></del>	1	<u> </u>
a is the organization licensed to issue qualified health plans in more than one state?	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.	12b		, }
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	13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
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		<del> </del>	1	<u> </u>
c Enter the amount of reserves on hand	·	į		
c Enter the amount of reserves on hand	b Enter the amount of reserves the organization is required to maintain by the states in	1425		}
14a Did the organization receive any payments for indoor tanning services during the tax year?				1
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O				
		<del></del> -	+	+
				(2016)

Pa	rt VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes a	w, an	d for	
	Schedule O See instructions.			_
	Check if Schedule O contains a response or note to any line in this Part VI		<u></u>	. X
Sec	ction 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			
	b Enter the number of voting members included in line 1a, above, who are independent 1b			
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		X
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	X	
7 8	a Did the diganization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7 a	Х	}
,	b Are any governance decisions of the organization reserved to (or subject to approval by) members,		-	
1	stockholders, or persons other than the governing body?	7 b		_x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	() ()		N.
	a The governing body?	8 a	X	
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		x
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
	a Did the organization have local chapters, branches, or affiliates?	10 a		X
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		
	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	Χ	
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990			: \int \int \int \int \int \int \int \int
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	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	X	
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?			Ž.),
	a The organization's CEO Executive Director, or top management official	15 a	Х	
1	b Other officers or key employees of the organization	15 b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)		* 7%	, à ; }{
	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?	16 a	-	*
	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?	16 b		₹ •
Sec	tion C. Disclosure		•	
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a for public inspection. Indicate how you made these available. Check all that apply	vailab	le	
	Own website  Another's website  X Upon request  Other (explain in Schedule O)			
19	the public during the tax year	e to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
			92-8	
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Form 990 (2016)	KITSAP	COUNTY	ASSOCIATION	OF	REALTORS
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# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 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

				(C)							
(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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	Former Highest compensated employee Key employee		the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations	
(1) GARY WANNER	1.00										
DIRECTOR		X						0.	0.	0.	
(2) MICHAEL ELIASON  EXECUTIVE DIRECTOR	40.00					Х		146,578.	0.	0 .	
(3) DINO DAVIS DIRECTOR		Х						0.	0.	0.	
	1.00	Х						0.	0.	0.	
(5) PENNY MCLAUGHLIN DIRECTOR	1.00	х						0.	0.	0.	
(6) MARCUS HOFFMAN TREASURER	3.00			Х				0.	0.	0.	
(7) KJ LANGE  IMMEDIATE PAST PRESIDENT	3.00			Х				0.1	0.1	0.	
(8) PATRICIA MCGUIRE DIRECTOR	1.00	Х						0.	0.	_ 0.	
(9) ANNETTE NITZ PRESIDENT	3.00			Х				0.	0.	0.	
(10) KATHY BERNDTSON PRESIDENT ELECT	3.00			Х				0.1	0.	0.	
(11) KATE WILSON DIRECTOR	1.00	Х		Х				0.	0.	0.	
(12) MARY FORD DIRECTOR	1.00	Х			!			0.	0.	0.	
(13) IRENE GARCIA DIRECTOR	1.00	Х						0.	0.	0.	
(14) MICHAEL ROCHON DIRECTOR	1.00	Х						0.	0.	0.	

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Form 990 (2016)

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Form 990 (201	6) KITSAP COUNTY ASSOCIA	TION OF	REA	T.T	ORS	3				91-0723	3769	Page 8
	ection A. Officers, Directors, 1						es. a	anc	Highest Com			
•	<del></del>	(B)	7	_	(0							(00.11111000)
	(A) Name and title	Average hours per	box	, unle	Pos heck	ition more	than one is both an or/trustee)		(D)  Reportable compensation from	(E)  Reportable compensation from	m l am	(F) Estimated sount of other
		week (list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizatio (W-2/1099-MISC	ns co	ompensation from the rganization and related rganizations
(15) ROBER DIREC	T_CONTRERAS	1.00	X		-				0.		0.	0.
(16) JANET		1.00	<del>  ``</del>	<del>                                     </del>	-	-	┼ ┤	$\dashv$	<del></del>	<del></del>	<del></del>	
DIREC			X		ļ	l	1 1		0.		0.	0.
(17) RICH SECRE	JACOBSON	3.00			Х				0.		0.	0.
(18) GARY	ANDERSON DING PAST PRESIDENT	1.00	X						0.		0.	0.
(19) LEE A		1.00	X						0.		0.	0.
(20) JACQU	I CURTISS DING PAST PRESIDENT	1.00	X						0.		0.	0.
(21) JAMES	HARRIS	1.00	x									
(22) DAVID		1.00	X			-			0.		0.	0.
(23) JACKI	DING PAST PRESIDENT E KILLORAN	1.00	X						0.		0.	0.
(24) BRYAN		1.00	1		-	-		7	0.		0.	0.
	DING PAST PRESIDENT		X		<u> </u>				0.		0.	0.
	DING PAST PRESIDENT	1.00	X					]	0.		0.	0.
1 b Sub-tota					• •		'		146,578.		0.	0.
	om continuation sheets to Part VII, Se						'		0.		0.	0.
	dd lines 1b and 1c)								146,578.		0	0.
	nber of individuals (including but not lim organization ► 1	iited to those	listed		ove)	wnc	rece	ive	more than \$100,0	Juu of reportable	compens	ation
	irganization list any <b>former</b> officer, direc										**************************************	Yes No
4 For any i	on line 1a? If 'Yes,' complete Schedule J for such individual											
5 Did any	person listed on line 1a receive or accrubes rendered to the organization? If 'Yes	e compensat									5	X
Section B.  1 Complete	Independent Contractors  e this table for your five highest compensation from the organization. Report com-	sated indepe	nden	t co	ntrad	ctors	that	rece	eived more than \$1	100.000 of		<del></del>
	(A) Name and business ac							اً ا	(B) Description o		<del></del>	(C) ensation

Name and business address	Description of services	Compensation
• Tatal number of radous adapt a start to the control of the first and broaded to the control of the	V	

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

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII . . . (B) (A) (D) Unrelated Total revenue Related or Revenue exempt business excluded from tax function revenue under sections revenue 512-514 Gifts, Grants 1 a Federated campaigns . . . . . Amounts 1 a b Membership dues . . . . 1 b 221,930 c Fundraising events . . . . . . 1 c 12,423 d Related organizations . . . . . and Other Similar 1 d e Government grants (contributions) . . 1 e Contributions, f All other contributions, gifts, grants, and similar amounts not included above. 40,069 g Noncash contributions included in lines 1a-1f \$ 274.422 Program Service Revenue **Business Code** 2a EDUCATION INCOME 611430 156 12,156 0 **b** ADVERTISING 541800 483 0 483 531120 LEASE INCOME 8,250 0 0 8. 250 f All other program service revenue . . 11,882 11,882 0 Ο. 32,771 Investment income (including dividends, interest and 0 Income from investment of tax-exempt bond proceeds . . . (II) Personal 6 a Gross rents . . . . . b Less rental expenses c Rental income or (loss) . . d Net rental income or (loss) . . . . . . . . (i) Securities (II) Other 7 a Gross amount from sales of assets other than inventory **b** Less cost or other basis and sales expenses . . . c Gain or (loss) . . . . d Net gain or (loss)....... 8 a Gross income from fundraising events Other Revenue (not including. \$ 12,423. of contributions reported on line 1c) See Part IV. line 18. . . . . . . . . . . 367 **b** Less direct expenses . . . . . . . c Net income or (loss) from fundraising events . . . . . . . 9 a Gross income from gaming activities See Part IV, line 19. . . . . . . . . . **b** Less direct expenses . . . . . . . **c** Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances . . . . . . . . . . . . **b** Less cost of goods sold . . . . . . c Net income or (loss) from sales of inventory **Business Code** 11a d All other revenue. . e Total. Add lines 11a-11d . . . Total revenue. See instructions . . . . . 24,038 483 11,106 BAA TEEA0109 11/16/16 Form 990 (2016)

Form	990 (2016) KITSAP COUNTY ASSOCIA	ATION OF REALTO	ORS	91-072	3769 <b>Page 10</b>
Par	t IX   Statement of Functional Expens	ses			<del></del>
Sect	ion 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. All o	ther organizations musi	complete column (A)	
	Check if Schedule O contains a res	ponse or note to any lin	e in this Part IX	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
	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				
2	Grants and other assistance to domestic individuals See Part IV, line 22	1,500.			, ,
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16.			, 4	, , , , , , , , , , , , , , , , , , ,
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	146,578.			
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	56,310.			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	528.			
10	Payroll taxes	17,862.	<del></del>		
11	Fees for services (non-employees)		<del></del>		
а	Management				
t	Legal	1,203.			
c	Accounting	5,503.			
c	Lobbying				
e	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 Schedule O)	2,402.			
12	Advertising and promotion	477.			
13	Office expenses	7,228.	·		
14	Information technology				
15	Royalties				
16	Occupancy	12,632.			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	23,156.			

a EDUCATION EXPENSES
b DUES & PUBLICATIONS

e All other expenses . . . . .

C GA TELEPHONE

22 Depreciation, depletion, and amortization . . .
23 Insurance . . . . . . . . . . . . . . . .
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O ) . . . . . . . .

3,262

10.629

292,186.

110

403

Part X Balance Sheet

1 Cash - non-interest-bearing 2 Savings and temporary cash investments 2 Savings and temporary cash investments 2 Savings and temporary cash investments 3 Pledges and grains receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Compilee Part 1 to 15 Schedule L 6 Loans and other receivables from other disqualified persons (sedefined under section 4955(f)(1)) persons described in section 4955(g)(3)(8), and contributing employees and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions) Compiler Part 1 to 15 Schedule L 7 Notes and loans receivable, net 8 Investments for sale or use 9 Prepaid expenses and deferred charges 1 1, 410. 9 1, 281. 10a Land buildings, and equipment out or other basis Compiler Part Vi of Schedule D 10a 169, 058. 11 Investments – publicity traded securities 12 Investments – publicity traded securities 12 Investments – potential viraded securities 13 Investments – potential viraded securities 14 Inflangible assets 15 Other assets See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 10 Accounts payable and accrued expenses. 20 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 20 Total liabilities of the control of the part is and disqualified persons Complete Part IV (short Part IV) and the parties 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Tax-exempt bond liabilities 22 Secured mortsgages and notes payable to unrelated third parties 23 Charles Part IV (short Part IV) (short Parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities not included on lines 17-40 (complete Part IV of Schedule D 26 Total liabilities and control town SPAS 117 (ASC 958), check here ► \( \) and complete lines 27 through 29, and lines 33 and 34. 27 Unrescruded notes and solutions 33 and 34. 28 Temporanty re			Check if Schedule O contains a response or note to any line in this Part X	(A) Beginning of year	Ť.	(B) End of year
2   Savings and temporary cash investments   29,188   2   29,200     3   Pedoges and grants receivable, net   4   4   4   4     5   Loans and other receivables from current and former officers, directors, flustees key employees, and highest compensated employees Complete Part in of Schedule   5     6   Loans and other receivables from other disqualified persons (as defined under grants and other receivables from other disqualified persons (as defined under grants and other receivables from other disqualified persons (as defined under grants and other receivables from other disqualified persons (as defined under grants and other receivables from other disqualified persons (as defined under grants and other receivables from other disqualified persons (as defined under grants and other receivables from other disqualified persons (as defined under grants and other receivables from other disqualified persons (as defined under grants and other securities of the grants and deferred charges   1,410   9   1,281   1,281   1,410   9   1,281   1,281   1,410   9   1,281   1,281   1,410   9   1,281   1,281   1,410   9   1,281   1,281   1,410   9   1,281   1,2	_	1	Cash — non-interest-hearing	<b>_</b>	1	<del> </del>
3   Piedges and grants receivable, net   3   4   4   5   5   5   5   5   5   5   5			-		<del> </del>	
A Accounts receivable, net   A   A			· · · · · · · · · · · · · · · · · · ·	29,100.	+	29,200.
5   Loans and other receivables from current and former officers, directors, busitess, key employees, and highest compensated employees Complete   5		_			<b>—</b> ∸	
trustees, key employees, and highest compensated employees. Complete Part I tol Schedule 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(1)(1)), persons described in section 4958(2)(3)(8), and contributing employers and aponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part I of Schedule L 7 7 8 Inventiones for sale or use 8 7 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10 a Land, buildings, and equipment cost or other basis Complete Part I of Schedule D 10 a 169, 058 10 b Less accumulated depreciation 100 106, 404 10 c 62, 654 11 Investments — publicy traded securities 12 Investments — other securities See Part IV, line 11 12 Investments — other securities See Part IV, line 11 13 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 10 Take acceptable to current and former officers, directors, trustees, key employees, highlights. Line 1 (1) 1					+-	
Section 49580(11), persons described in section 49580(2)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L	i	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
8   Inventories for sale or use   8   9   Prepart expenses and deferred charges   1,410, 9   1,281,		6	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	- ^ ^ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		and the American
10 a Land, buildings, and equipment cost or other basis Complete Part Vi of Schedule D b Less accumulated depreciation 11 Investments – publicly traded securities 12 Investments – publicly traded securities 13 Investments – publicly traded securities 14 Investments – publicly traded securities 15 Investments – publicly traded securities 16 Investments – program-related See Part IV, line 11 17 Investments – program-related See Part IV, line 11 18 Investments – program-related See Part IV, line 11 19 Investments – program-related See Part IV, line 11 10 Investments – program-related See Part IV, line 11 11 Investments – program-related See Part IV, line 11 12 Investments – program-related See Part IV, line 11 13 Investments – program-related See Part IV, line 11 14 Intangible assets 14 Intangible assets 15 Other assets See Part IV, line 11 15 Investments – program-related See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 20 20 17 Intangible 20 18 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Lans and other payables to current and former officers, furectors, trustees, key employees, highest compensated employees, and disqualified persons 21 Complete Part II of Schedule L 22 Unsecured notes and loans payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities not included on lines 17-24) Complete Part X of Schedule D 26 Total liabilities and lines 15 Through 25 See Total liabilities and included on lines 17-24) Complete Part X of Schedule D 27 Unrestricted net assets 28 Temporarily restricted net assets 3 9 Permanently restricted net assets 3 111,610 27 127,451 3 Organizations that do not follow SFAS 117 (ASC 9	ts	7			7	
10 a Land, buildings, and equipment cost or other basis Complete Part Vi of Schedule D b Less accumulated depreciation 11 Investments – publicly traded securities 12 Investments – publicly traded securities 13 Investments – other secunities See Part IV, line 11 14 Investments – program-related See Part IV, line 11 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Escrow or custodial account liabilities 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Cass and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities not included on lines 17-24) Complete Part X of Schedule D 26 Total liabilities not included on lines 17-24) Complete Part X of Schedule D 26 Total liabilities not included on lines 17-24) Complete Part X of Schedule D 27 Unsecured notes and loans payable to unrelated third parties 28 Temporanty restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 31 Payad-nor capital sarptus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets fund balances 34 Total liabilities and net assets/fund balances 35 Other liabilities and net assets/fund balances 36 Total liabilities and net assets/fund balances 37 Total liabilities and net assets/fund balances 38 Total liabilities and net assets/fund balances	SSe	8	Inventories for sale or use		8	
10a   Land, buildings, and equipment cost or other basis Complete Part Vi of Schedule D   10a   169,058.   10c   62,654.   11   Investments – publicly traded securities   10b   106,404   66,720.   10c   62,654.   11   Investments – publicly traded securities   11   12   13   Investments – program-related See Part IV, line 11   12   13   Investments – program-related See Part IV, line 11   15   15   16   Total assets. Add lines 1 through 15 (must equal line 34)   204,337, 16   207,369, 17   17   17,391.   18   Grants payable and accrued expenses.   2,020.   17   1,391.   18   Grants payable and accrued expenses.   2,020.   17   1,391.   18   19   Deferred revenue   41,668   19   31,102.   20   21   Escrow or custodial account liabilities   20   21   22   22   23   23   24   24   24   24	Ä	9	Prepaid expenses and deferred charges	1,410.	9	1,281.
b Less accumulated depreciation		10 a				13
11		b		l		62.654
13   Investments - program-related See Part IV, line 11   13   14   Intangible assets   14   15   15   16   16   16   16   16   17   16   17   16   17   17		11			11	
14   Intangible assets   14   15   15   15   16   16   16   16   17   16   16   17   16   17   16   18   18   18   19   18   18   19   19		12	Investments — other securities See Part IV, line 11		12	
15 Other assets See Part IV, line 11   16   Total assets. Add lines 1 through 15 (must equal line 34)   204, 337, 16   207, 369.     17 Accounts payable and accrued expenses.   2,020, 17   1,391.     18 Grants payable.   18   18       19 Deferred revenue   41,668, 19   31,102.     20 Tax-exempt bond liabilities   20 Tax-exempt   20		13	Investments – program-related See Part IV, line 11		13	
16		14	Intangible assets		14	
17   Accounts payable and accrued expenses   2,020. 17   1,391.     18   Grants payable   18   Grants payable   18   18       19   Deferred revenue   20   Tax-exempt bond liabilities   20     21   Escrow or custodial account liability Complete Part IV of Schedule D   21     22   Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L   22     23   Secured mortgages and notes payable to unrelated third parties   23     24   Unsecured notes and loans payable to unrelated third parties   24     25   Other liabilities (including federal income tax, payables to related third parties, and other liabilities. Add lines 17 through 25   88,815, 26   74,787.     26   Total liabilities. Add lines 17 through 25   88,815, 26   74,787.     27   Organizations that follow SFAS 117 (ASC 958), check here   X and complete lines 27 through 29, and lines 33 and 34.     28   Temporanly restricted net assets   28   28   29   29   5,131.     29   Organizations that do not follow SFAS 117 (ASC 958), check here   30   31   29   5,131.     30   Capital stock or trust principal, or current funds   30   31   Paid-in or capital surplus, or land, building, or equipment fund   31   31   32   31   32,582.     31   Total liabilities and net assets/fund balances   204, 337, 34   207, 369   34   37, 34   207, 369   369   37, 369   37, 369   37, 34   207, 369   37,		15	Other assets See Part IV, line 11		15	
17   Accounts payable and accrued expenses   2,020. 17   1,391.     18   Grants payable   18   Grants payable   18   18       19   Deferred revenue   20   Tax-exempt bond liabilities   20     21   Escrow or custodial account liability Complete Part IV of Schedule D   21     22   Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L   22     23   Secured mortgages and notes payable to unrelated third parties   23     24   Unsecured notes and loans payable to unrelated third parties   24     25   Other liabilities (including federal income tax, payables to related third parties, and other liabilities. Add lines 17 through 25   88,815, 26   74,787.     26   Total liabilities. Add lines 17 through 25   88,815, 26   74,787.     27   Organizations that follow SFAS 117 (ASC 958), check here   X and complete lines 27 through 29, and lines 33 and 34.     28   Temporanly restricted net assets   28   28   29   29   5,131.     29   Organizations that do not follow SFAS 117 (ASC 958), check here   30   31   29   5,131.     30   Capital stock or trust principal, or current funds   30   31   Paid-in or capital surplus, or land, building, or equipment fund   31   31   32   31   32,582.     31   Total liabilities and net assets/fund balances   204, 337, 34   207, 369   34   37, 34   207, 369   369   37, 369   37, 369   37, 34   207, 369   37,		16	Total assets. Add lines 1 through 15 (must equal line 34)	204,337.	16	207,369.
Deferred revenue  20 Tax-exempt bond liabilities  21 Escrow or custodial account liability Complete Part IV of Schedule D  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  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  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  26 Total liabilities. Add lines 17 through 25.  27 Organizations that follow SFAS 117 (ASC 958), check here Independently restricted net assets.  28 Temporarily restricted net assets.  29 Permanently restricted net assets.  20 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds.  31 Pard-in or capital surplus, or land, building, or equipment fund.  32 Retained earnings, endowment, accumulated income, or other funds.  33 Total net assets or fund balances.  24 Unsestricted net assets or fund balances.  34 Total liabilities and net assets/fund balances.  25 Algorithm Add incomplete lines 30 through 34.  26 Capital stock or trust principal, or current funds.  30 Capital stock or trust principal, or current funds.  31 Pard-in or capital surplus, or land, building, or equipment fund.  32 Retained earnings, endowment, accumulated income, or other funds.  33 Total net assets or fund balances.  34 Total liabilities and net assets/fund balances.  26 Algorithm Add inspired in an inspired in a single part of the parties.  27 Algorithm Add inspired in a single part of the parties.  28 Total liabilities and net assets/fund balances.  31 Total net assets and one assets/fund balances.		17	Accounts payable and accrued expenses		17	
20 Tax-exempt bond liabilities					18	
21 Escrow or custodial account liability Complete Part IV of Schedule D.  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.  23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities and included on lines 17-24) Complete Part X of Schedule D.  25 Total liabilities. Add lines 17 through 25.  26 Total liabilities. Add lines 17 through 25.  27 Organizations that follow SFAS 117 (ASC 958), check here \times 27 through 29, and lines 33 and 34.  28 Temporarily restricted net assets.  29 Permanently restricted net assets.  29 Permanently restricted net assets.  30 Capital stock or trust principal, or current funds.  30 Capital stock or trust principal, or current funds.  31 Paid-in or capital surplus, or land, building, or equipment fund  31 Retained earnings, endowment, accumulated income, or other funds.  31 Total net assets or fund balances.  32 Total liabilities and net assets/fund balances.  33 Total liabilities and net assets/fund balances.				41,668.	19	31,102.
23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25.  Organizations that follow SFAS 117 (ASC 958), check here Xand complete lines 27 through 29, and lines 33 and 34.  Unirestricted net assets.  28 Temporarily restricted net assets.  Organizations that do not follow SFAS 117 (ASC 958), check here And Complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And Complete lines 30 through 34.  Capital stock or trust principal, or current funds.  30 Capital stock or trust principal, or current funds.  31 Paid-in or capital surplus, or land, building, or equipment fund.  32 Retained earnings, endowment, accumulated income, or other funds.  33 Total net assets or fund balances.  34 Total liabilities and net assets/fund balances.  29 Portal stock or trust principal, or current funds.  30 Total liabilities and net assets/fund balances.  20 Portal stock or fund balances.  30 Portal stock or fund balances.  31 Portal liabilities and net assets/fund balances.		20	·		20	
23 Secured mortgages and notes payable to unrelated third parties	<u>e</u> .	21	• • •		21	
23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25.  Organizations that follow SFAS 117 (ASC 958), check here Xand complete lines 27 through 29, and lines 33 and 34.  Unirestricted net assets.  28 Temporarily restricted net assets.  Organizations that do not follow SFAS 117 (ASC 958), check here And Complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And Complete lines 30 through 34.  Capital stock or trust principal, or current funds.  30 Capital stock or trust principal, or current funds.  31 Paid-in or capital surplus, or land, building, or equipment fund.  32 Retained earnings, endowment, accumulated income, or other funds.  33 Total net assets or fund balances.  34 Total liabilities and net assets/fund balances.  29 Portal stock or trust principal, or current funds.  30 Total liabilities and net assets/fund balances.  20 Portal stock or fund balances.  30 Portal stock or fund balances.  31 Portal liabilities and net assets/fund balances.	iabilit	22	key employees, highest compensated employees, and disqualified persons		22	
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.  26 Total liabilities. Add lines 17 through 25.  Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets.  28 Temporarily restricted net assets.  29 Permanently restricted net assets.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Organizations that follow SFAS 117	_	23	Secured mortgages and notes payable to unrelated third parties		23	
and other liabilities not included on lines 17-24) Complete Part X of Schedule D.  26 Total liabilities. Add lines 17 through 25.  Corganizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets.  Temporarily restricted net assets.  Corganizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34.  Capital stock or trust principal, or current funds.  Capital stock or trust principal, or current funds.  Retained earnings, endowment, accumulated income, or other funds.  Retained earnings, endowment, accumulated income, or other funds.  Total liabilities and net assets/fund balances.  26 74, 787.  27 451.  28 28 28 29 5, 131.  39 30 29 5, 131.  30 31 32 32 32 32 33 32 582.  31 Total net assets or fund balances.  30 31 32, 582.		24	Unsecured notes and loans payable to unrelated third parties		24	
Total liabilities. Add lines 17 through 25	Ì	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	45,127.	25	42,294.
lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets.  28 Temporarily restricted net assets.  29 Permanently restricted net assets.  30 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds.  31 Paid-in or capital surplus, or land, building, or equipment fund.  32 Retained earnings, endowment, accumulated income, or other funds.  33 Total net assets or fund balances.  34 Total liabilities and net assets/fund balances.  36 111,610.  27 127,451.  111,610.  28 28 3.  3,912.  29 5,131.  30 30 31 31 32,582.  31 Total liabilities and net assets/fund balances.  20 4, 337, 34 207, 369		26		88,815.	26	74,787.
Temporarily restricted net assets			Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
34   Total liabilities and net assets/fund balances	ě	27				
<b>34</b>   Total liabilities and net assets/fund balances	Bal	28			28	
<b>34</b>   Total liabilities and net assets/fund balances	힏	29	•		29	5,131.
<b>34</b>   Total liabilities and net assets/fund balances	or Fur					
<b>34</b>   Total liabilities and net assets/fund balances	ts	30			30	
<b>34</b>   Total liabilities and net assets/fund balances	8	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
<b>34</b>   Total liabilities and net assets/fund balances	As	32			32	
<b>34</b>   Total liabilities and net assets/fund balances	ē	33		115,522.	33	132,582.
	- 1		Total liabilities and net assets/fund balances	204,337.	34	207,369.

		072370	59	Pa	age 12
Part XI Recon	ciliation of Net Assets				
	Schedule O contains a response or note to any line in this Part XI	<u></u>			. X
1 Total revenue (	nust equal Part VIII, column (A), line 12)	1		310,0	049.
2 Total expenses	(must equal Part IX, column (A), line 25)	2		92,	
3 Revenue less e	kpenses Subtract line 2 from line 1	3		17,8	
4 Net assets or fu	nd balances at beginning of year (must equal Part X, line 33, column (A))	4	1	15,5	
5 Net unrealized	gains (losses) on investments	5			<u>,</u>
6 Donated service	s and use of facilities	6			
7 Investment exp	enses	7			
8 Prior period adj	ıstments	8			
9 Other changes	n net assets or fund balances (explain in Schedule O)	9		-8	303.
10 Net assets or fu	nd balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				<i>,</i>
		10	1	.32,5	<u> 582.</u>
Part XII. Financ	ial Statements and Reporting				
Check if	Schedule O contains a response or note to any line in this Part XII				. [
				Yes	No
<ol> <li>Accounting met</li> </ol>	nod used to prepare the Form 990 Cash X Accrual Other				
If the organizati	on changed its method of accounting from a prior year or checked 'Other,' explain		-   .	ļ	
in Schedule O	on anged to method of accounting norm a prior year of checked other, explain			2	l
2 a Were the organ	zation's financial statements compiled or reviewed by an independent accountant?		2 a		_
If 'Yes.' check a	box below to indicate whether the financial statements for the year were compiled or reviewed on a			, ,	*
s <u>ep</u> arate basis,	consolidated basis, or both		, "." "."	, ,	\ \ \
X Separate	casis Consolidated basis Both consolidated and separate basis		" "	] ~ ]	. ***
b Were the organ	zation's financial statements audited by an independent accountant?		. 2 b		Х
If 'Yes,' check a	box below to indicate whether the financial statements for the year were audited on a separate		8 2	,	* 5, -
´	ted basis, or both				~% s
Separate	basis Consolidated basis Both consolidated and separate basis		1	1 3	1 2
c If 'Yes' to line 2	i or 2b, does the organization have a committee that assumes responsibility for oversight of the aud Ilation of its financial statements and selection of an independent accountant?	ıt,		1	.,
	·		2 c		X
in Schedule O	on changed either its oversight process or selection process during the tax year, explain			1, 1	
3 a As a result of a	ederal award, was the organization required to undergo an audit or audits as set forth in the Single		- X	# " j.	
Audit Act and O	MB Circular A-133?		. <u>3 a</u>		X
	organization undergo the required audit or audits? If the organization did not undergo the required a		1		
	n why in Schedule O and describe any steps taken to undergo such audits	<u></u>	. 3b		
BAA			Form	990 (2	2016)

#### 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

OMB No 1545-0047 2016

► 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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

• 5	Section 501(c)(4), (5), or (6) org	anizations Complete Part III			
	of organization	<del></del>	<del></del>	Employer identific	ation number
KI	TSAP COUNTY ASSOCIA	TION OF REALTORS		91-072376	
Pai	rt I-A Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organi	zation.
	(see instructions for definition	ganization's direct and indirect political camp of 'political campaign activities')	•		
2	Political campaign activity exp	enditures (see instructions)			0.
3	Volunteer hours for political ca	ampaign activities (see instructions)	<u></u>	<u> </u>	C
Pai	rt I-B 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 sec	tion 4955		5
2	Enter the amount of any excis	e tax incurred by organization managers und	ler section 4955		S
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for this	year?	,	· · · Yes No
4 a	a Was a correction made?			. <i>.</i>	Yes No
	b If 'Yes,' describe in Part IV				
Pai	rt I-C Complete if the o	rganization is exempt under secti	on 501(c) , excep	t section 501(c)(3)	
1	Enter the amount directly expe	ended by the filing organization for section 52	27 exempt function act	ıvıtıes ▶ Ş	0.
2	Enter the amount of the filing function activities	organization's funds contributed to other orga	anızatıons for section 5	627 exempt 	}
3	Total exempt function expend line 17b	itures Add lines 1 and 2 Enter here and on it	Form 1120-POL,	<b>&gt;</b> \$	
4	Did the filing organization file l	Form 1120-POL for this year?		. <i>.</i>	· · · Yes X No
5	organization made payments amount of political contribution	and employer identification number (EIN) of a For each organization listed, enter the amounts received that were promptly and directly defined action committee (PAC). If additional space is	int paid from the filing of the contract of th	organization's funds. Also political organization, suc	e filing
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds (f 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)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2016

Part II-A Complete if section 501	the organization (h)).	is exempt under se	ction 501(c)(3) and	d filed Form 5768 (e	lection under
	<u> </u>	s to an affiliated group (and	d list in Part IV each affil	liated group member's nai	ne.
L	• •	hare of excess lobbying ex			,
		d box A and 'limited contro			
(The term	Limits on Lobbyin	g Expenditures is amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ures to influence public	opinion (grass roots lobby	ing)		
b Total lobbying expenditu	res to influence a legis	lative body (direct lobbying	g)		
c Total lobbying expenditu	ires (add lines 1a and	1b)			
d Other exempt purpose e	expenditures				
e Total exempt purpose e	xpenditures (add lines	1c and 1d)			
f Lobbying nontaxable am	nount Enter the amoun	it from the following table i	n 		
If the amount on line 1e, co		The lobbying nontaxable		* ,	*
Not over \$500,000				1	
Over \$500,000 but not over \$	1,000,000	5100,000 plus 15% of the excess	over \$500,000	* * * * * * * * * * * * * * * * * * * *	
Over \$1,000,000 but not over	\$1,500,000	5175,000 plus 10% of the excess	s over \$1,000,000	, ,	.,
Over \$1,500,000 but not over	\$17,000,000	3225,000 plus 5% of the excess	over \$1,500,000		
Over \$17,000,000		51,000,000			
g Grassroots nontaxable a	amount (enter 25% of I	ne 1f)			
h Subtract line 1g from line	e 1a If zero or less, en	ter -0			
i Subtract line 1f from line	e 1c If zero or less, ent	er -0			
j If there is an amount oth section 4911 tax for this	ner than zero on either year?	line 1h or line 1i, did the oi	ganization file Form 472	20 reporting	Yes No
(Son	ne organizations that	Year Averaging Period L made a section 501(h) el ow. See the separate inst	ection do not have to		
	Lobby	ing Expenditures During	4-Year Averaging Per	iod	
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))	A CONTROL OF THE CONT	The second secon			
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e)) · · · ·					
f Grassroots lobbying expenditures					<del></del>
BAA		<u></u>		Schedule C (Forn	n 990 or 990-EZ) 2016

Page 3

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

No. 1 and the second of the se		1)	(b)	
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Aı	nount
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			ı	
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				-
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				<del></del>
i Other activities?				
j Total Add lines 1c through 1				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		~ ~ ~ ~	, .,	
b If 'Yes,' enter the amount of any tax incurred under section 4912	T	-,3	mm	
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		***************************************		
d if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	22 . 2		. ^^	· · · · · · · · · · · · · · · · · · ·
Partill-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)		<del></del>	
section 501(c)(6).	(0)(0)	, 01		
				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?				X
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior ye	ear? .		3	1 X
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501				
(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	Part I	ill-A,	line 3, is	)
1 Dues, assessments and similar amounts from members		1		218,870.
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		15,349.
<b>b</b> Carryover from last year		2 b		
c Total		2 c		15,349.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	[	3		31,838.
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.
Part VS 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.

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service Name of the organization

0 Open to Public Inspection
Employer identification number

	KITSAP COUNTY ASSOCIATION (	OF REALTORS		۹	1-0723769
Par	Organizations Maintaining Dono	r Advised Funds or Oth	ner Similar Fu		
ı uı	Complete if the organization answer	ered 'Yes' on Form 990, I	Part IV, line 6		
		(a) Donor advised	funds	(b) Fund	ds 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 are the organization's property, subject to the organization's				Yes No
6	Did the organization inform all grantees, donors, for charitable purposes and not for the benefit of impermissible private benefit?	and donor advisors in writing the donor or donor advisor, or	hat grant funds car for any other purp	n be used only ose conferring	· · · DYes No
Pår	Conservation Easements. Complete if the organization answer	ered 'Yes' on Form 990, I	Part IV, line 7		
1	Purpose(s) of conservation easements held by the	ne organization (check all that a	apply)		
	Preservation of land for public use (e.g., reci	reation or education)	Preservation of	of a historically im	portant land area
	Protection of natural habitat		Preservation of	of a certified histo	ric structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization	held a qualified conservation c	ontribution in the f	orm of a conserv	ation easement on the
	last day of the tax year			₩ Held	d at the End of the Tax Year
	Total number of conservation easements			<u> </u>	d at the End of the Tax Teal
	Total acreage restricted by conservation easeme			) <del></del>	<del></del>
	Number of conservation easements on a certified			<del>+</del> -	<del></del>
	Number of conservation easements included in (	·	` '	·	
•	structure listed in the National Register			. 2 d	
3	Number of conservation easements modified, tratax year ►	insferred, released, extinguishe	ed, or terminated b	y the organizatio	n during the
4	Number of states where property subject to cons	ervation easement is located >	•		
5	Does the organization have a written policy rega and enforcement of the conservation easements				Yes No
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violatio	ns, and enforcing	conservation eas	ements during the year
7	Amount of expenses incurred in monitoring, insp ▶\$	ecting, handling of violations, a	and enforcing cons	ervation easemei	nts during the year
8	Does each conservation easement reported on land section 170(h)(4)(B)(ii)?			170(h)(4)(B)(ı)	Yes No
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote to t conservation easements	ts conservation easements in it he organization's financial state	s revenue and exp ements that describ	ense statement, pes the organizat	and balance sheet, and ion's accounting for
Par	Complete if the organization answers	ctions of Art, Historical ered 'Yes' on Form 990, I	Treasures, or Part IV, line 8	Other Simila	ar Assets.
1 8	If the organization elected, as permitted under S art, historical treasures, or other similar assets h in Part XIII, the text of the footnote to its financia	eld for public exhibition, educat	tion, or research in	tatement and bal furtherance of po	ance sheet works of ublic service, provide,
ı	If the organization elected, as permitted under S historical treasures, or other similar assets held f following amounts relating to these items	FAS 116 (ASC 958), to report i	n its revenue state	ment and balanc herance of public	e sheet works of art, service, provide the
	(i) Revenue included on Form 990, Part VIII, Iir	ne 1	. <i>.</i>		▶\$
	(ii) Assets included in Form 990, Part X				
2	If the organization received or held works of art, amounts required to be reported under SFAS 11	historical treasures, or other sir 6 (ASC 958) relating to these it	milar assets for fina tems	ancial gain, provi	de the following
	Revenue included on Form 990, Part VIII, line 1				►\$
ı	Assets included in Form 990, Part X				►\$

•						
	AP COUNTY ASSO			91-07		Page :
Part III Organizations Mainta	ining Collections	of Art, Histo	orical Treasures, o	r Other Similar As	sets (conti	nued)
<ul> <li>Using the organization's acquisition items (check all that apply)</li> </ul>	n, accession, and othe	er records, check	any of the following that	are a significant use of	its collection	
a Public exhibition		d Loan	or exchange programs			
b Scholarly research		e Other				
c Preservation for future genera	tions					
4 Provide a description of the organi	zation's collections an	d explain how th	ey further the organization	on's exempt purpose in		
5 During the year, did the organizati to be sold to raise funds rather that	on solicit or receive do in to be maintained as	nations of art, hi part of the organ	storical treasures, or other	er sımılar assets	Yes	No
Part IV Escrow and Custodia line 9, or reported an a	I Arrangements. mount on Form 99	Complete if t 90, Part X, lin	he organization ans e 21.	wered 'Yes' on For	ກ 990, Part	IV,
1 a Is the organization an agent, truste		<u> </u>		sets not included		
on Form 990, Part X?					Yes	∐No
b If 'Yes,' explain the arrangement in	n Part XIII and complet	e the following to	able			
					Amount	
c Beginning balance				. 1c		
d Additions during the year				1 d		
e Distributions during the year				. 1e		
f Ending balance				1f		
2 a Did the organization include an an	nount on Form 990, Pa	ırt X, line 21, for	escrow or custodial acco	ount liability?	Yes	No
b If 'Yes,' explain the arrangement ii	n Part XIII Check here	if the explanation	n has been provided on	Part XIII	<del></del>	П
Part V Endowment Funds.	Complete if the org	anization ans	wered 'Yes' on Forr	n 990, Part IV, line	10.	
	(a) Current year	(b) Prior yea	(c) Two years bac	k (d) Three years back	(e) Four ye	ears back
1 a Beginning of year balance						
<b>b</b> Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships			·	<del></del>	<del>                                     </del>	
e Other expenditures for facilities and programs					<del>                                     </del>	
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage	of the current year en	d balance (line 1	g, column (a)) held as	<del></del>		
a Board designated or quasi-endowi		્ર	. , ,,			
b Permanent endowment ►	8	<del></del>				
c Temporarily restricted endowment	▶	96				
The percentages on lines 2a, 2b,		00%				
3 a Are there endowment funds not in organization by	the possession of the	organization tha	t are held and administer	red for the	Yes	s No
(i) unrelated organizations			<i></i>		. 3a(i)	
(ii) related organizations					. 3a(ii)	
<b>b</b> If 'Yes' on line 3a(ii), are the relate	ed organizations listed	as required on S	chedule R?		. 3b	
4 Describe in Part XIII the intended	uses of the organization	n's endowment	funds			
Part VI Land, Buildings, and	Equipment.					
Complete if the organiz	zation answered "	es' on Form	990, Part IV, line 11	a See Form 990, F	'art X, line 1	10.
Description of property		t or other basis vestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book	value
1a Land		29 903		,	2	0 003

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land	29,903.			29,903.
<b>b</b> Buildings	115,074.		83,984.	31,090.
c Leasehold improvements				
d Equipment	24,081.		22,420.	1,661.
e Other				
otal. Add lines 1a through 1e (Column (d) must equa	al Form 990. Part X. colu	mn (B), line 10c)		62,654

BAA

Schedule D (Form 990) 2016

Schedule D (Form 990) 2016

Page 3

. Complete if the organization answered ' (a) Description of security or category (including name of security)	(b) Book value		aluation Cost or end-of-year market value
(1) Financial derivatives		1	
(2) Closely-held equity interests			
(3) Other		<del>                                     </del>	
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
<u>·····</u>		<del></del>	
<del>(H)</del>		<del>                                     </del>	
(l)	· · · · · · · · · · · · · · · · · · ·		
Total (Column (b) must equal Form 990, Part X, column (B) line 12) ▶			
Part VIII Investments — Program Related.		1	
Complete if the organization answered	Yes' on Form 990.	Part IV. line 11c Se	ee Form 990. Part X. line 13
(a) Description of investment	(b) Book value		ation Cost or end-of-year market valu
(1)		<u> </u>	
(2)			
(3)			
(4)			
(5)		· · · · · · · · · · · · · · · · · · ·	
(6)		† ·	
(7)			
(8)			
(9)			
(10)		-	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13 ) ▶			
Complete if the organization answered " (a) De (1)	Yes' on Form 990, scription	Part IV, line 11d Se	ee Form 990, Part X, line 15 (b) Book value
(2)	·		
(3)			
(4)			
(5)			
(6)			
(7)			
(8)	<del></del>		
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B)	ine 15)		
Part X Other Liabilities. Complete if the organization answered 'Yes' on F	form 000 Part IV line 1	10 or 11f Coo Form 00	O Dort V line 25
(a) Description of liability	(b) Book value		U, Part A, line 25
(1) Federal income taxes	(b) Dook value		
(2) STATE AND NATIONAL DUES HELD IN TRU	JST 39,08	39.	
(3) UNCLAIMED PROPERTY		73.	
(4) PREPAID NWMLS SUPPORT	3,1:		
(5) RPAC FUNDS RECEIVED		20.	**
(6)			
(7)			
(8)			, , ,
(9)			
(10)			*
(11)			,
Total (Column (b) must equal Form 990, Part X, column (B) line 25)	► 42,2°		* > 2 *
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 footi	note to the organization's fina	ancial statements that reports	the organization's liability for uncertain
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 footitax positions under FIN 48 (ASC 740). Check here if the text of the footnote IBAA.	note to the organization's fina	ancial statements that reports	the organization's liability for uncertain

TEEA3303 08/15/16

4 a

4 b

Part XIII Supplemental Information.

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. . . . . .

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . .

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

BAA

Schedule D (Form 990) 2016

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#### **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.

2016

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

91-0723769 KITSAP COUNTY ASSOCIATION OF REALTORS A PDF COPY OF THIS RETURN WAS AVAILABLE TO ALL OFFICERS AND DIRECTORS

FOR REVIEW PRIOR TO FILING BY ELECTRONIC TRANSMISSION. ADDITIONALLY, PAPER COPIES OF THIS RETURN WERE AVAILABLE TO ATTENDING BOARD MEMBERS AT THE ORGANIZATION'S MONTHLY BOARD MEETING.

Pt VI, Line 11b COMPENSATION WAS REVIEWED BY THE BOARD OF DIRECTORS AND APPROVED AS

Pt VI, Line 15a RECORDED IN THE BOARD MINUTES. THE ORGANIZATION'S ARTICLES OF INCORPORATION ARE ON FILE WITH AND

AVAILABLE FROM THE WASHINGTON STATE SECRETARY OF STATE. THE CONFLICT OF INTEREST POLICY AND REVIEWED FINANCIAL STATEMENTS ARE AVAILABLE FOR REVIEW BY APPOINTMENT AT 3689 MUNSON STREET, SILVERDALE, WASHINGTON 98383.

Pt VI, Line 19 Pt VI, Line 6 THE ORGANIZATION IS A TRADE ASSOCIATION WITH DUES PAYING MEMBERS. THE OFFICERS AND DIRECTORS ARE ELECTED BY THE GENERAL MEMBERSHIP. FIVE

STATE DIRECTORS ARE ELECTED BY THE BOARD OF DIRECTORS. JACQUI CURTISS, ATTENDING PAST PRESIDENT, IS THE BRANCH MANAGER OF THE BROKERAGE WHERE PATRICIA MCGUIRE, DIERECTOR, AND THOR HOLM, DIRECTOR WORK. JERRY REID OWNS THE BROKERAGE WHERE DIRECTOR KIM WILSON WORKS. LEE AVERY, ATTENDING PAST PRESIDENT, IS THE BRANCH MANAGER OF THE BROKERAGE WHERE KATHY BERNDTSON, PRESIDENT ELECT, TREASURER MARCUS HOFFMAN, AND DIRECTORS ANNETTE NITZ, GARRY WANNER, AND SARAH CANFIELD WORK. FRANK WILSON, ATTENDING PAST PRESIDENT, IS THE BRANCH MANAGER OF THE BROKERAGE WHERE KJ LANGE, IMMEDIATE PAST PRESIDENT, AND DIRECTOR PENNY MCLAUGHLIN WORKS. MICHAEL ROCHON, DIRECTOR, IS THE BRANCH MANAGER OF THE BROKERAGE WHERE ROBERT CONTRERAS, DIRECTOR, DANA SOYAT, IMMEDIATE PAST PRESIDENT, AND BRYAN PETRO, ATTENDING PAST PRESIDENT WORK. DAVID JONES, ATTENDING PAST PRESIDENT, AND DIRECTORS STEVEN DERRIG, KATE WILSON, AND DINO DAVIS WORK FOR THE SAME BROKERAGE. JAMES HARRIS, ATTENDING PAST PRESIDENT, AND

AMY ALLEN, DIRECTOR, WORK FOR THE SAME BROKERAGE. DIRECTORS DOUG

HALLOCK AND JET WOELKE WORK FOR THE SAME BROKERAGE. Pt XI BOOK DEPRECIATION EXCEEDED TAX DEPRECIATION BY \$803.

Pt VI, Line 7a