Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No 1545-0047

2019

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
WEST HAWAII ASSOCIATION OF REALTORS

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
75-5660 KOPIKO PLACE SUITE A-2

City or town, state or province, country, and ZIP or foreign postal code
KAILUA KONA, HI 96740

D Employer identification number
99-0148021

E Telephone number
(808) 329-4874

G Gross receipts $ 395,245

F Name and address of principal officer
KARIN SHAW
C/O 75-5660 KOPIKO PLACE A-2
KAILUA KONA, HI 96740

H(a) Is this a group return for subordinates? ☐ Yes ☑ No
H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status ☐ 501(c)(3) ☑ 501(c) (6) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ KONAREALTORS COM

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1974 | **M** State of legal domicile HI

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
REALTOR ASSOCITION REPRESENTING THE WESTERN HALF OF THE ISLAND OF HAWAII

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	11
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	11
5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	4
6	Total number of volunteers (estimate if necessary)	6	60
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 39	7b	

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	321,825	316,514
	9	Program service revenue (Part VIII, line 2g)	69,246	59,639
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	980	1,306
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,520	5,884
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	393,571	383,343
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,378	17,395
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	155,472	145,667
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶13,433		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	169,569	228,638
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	329,419	391,700
	19	Revenue less expenses Subtract line 18 from line 12	64,152	-8,357

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	389,285	405,330
	21	Total liabilities (Part X, line 26)	212,842	240,170
	22	Net assets or fund balances Subtract line 21 from line 20	176,443	165,160

Part II Signature Block

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

Sign Here

****** 2020-08-06
Signature of officer Date

KARIN SHAW ASSOCIATION EXECUTIV
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
		2020-08-11		P00853901

Firm's name ▶ JAY MIYAKI CPA LLC | Firm's EIN ▶ 26-2451631

Firm's address ▶ 600 QUEEN ST SUITE C-4
HONOLULU, HI 968135113 | Phone no (808) 522-1042

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

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission

THE OBJECTIVES OF THE WEST HAWAII ASSOCIATION OF REALTORS ARE TO UNITE THOSE ENGAGED IN THE RECOGNIZED BRANCHES OF THE REAL ESTATE PROFESSION FOR THE PURPOSE OF EXERTING A BENEFICIAL INFLUENCE UPON THE PROFESSION AND RELATED INTERESTS TO PROMOTE AND MAINTAIN HIGH STANDARDS OF CONDUCT IN THE REAL ESTATE PROFESSION AS EXPRESSED IN THE CODE OF ETHICS OF THE NATIONAL ASSOCIATION OF REALTORS TO PROVIDE A UNIFIED MEDIUM FOR REAL ESTATE OWNERS AND THOSE ENGAGED IN THE REAL ESTATE PROFESSION WHEREBY THEIR INTERESTS MAY BE SAFEGUARDED AND ADVANCED TO FURTHER THE INTERESTS OF HOME AND OTHER REAL PROPERTY OWNERSHIP TO UNITE THOSE ENGAGED IN THE REAL ESTATE PROFESSION IN THIS COMMUNITY WITH THE HAWAII REALTORS AND THE NATIONAL ASSOCIATION OFREALTORS THEREBY FURTHERING THEIR OWN OBJECTIVES THROUGHOUT THE STATE AND NATION, AND OBTAINING THE BENEFITS AND PRIVILEGES OF MEMBERSHIP THEREIN TO DESIGNATE, FOR THE BENEFIT OF THE PUBLIC, THOSE INDIVIDUALS AUTHORIZED TO USE THE TERMS REALTOR, REALTOR-A

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ **Yes** ☑ **No**

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 342,447 including grants of $ 17,395) (Revenue $ 59,639)

See Additional Data

4b (Code) (Expenses $ including grants of $) (Revenue $)

4c (Code) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O)

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

4e **Total program service expenses ▶** 342,447

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**		No
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	**2**		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	**3**		No
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**		No
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**		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	**7**		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D,* Part III	**8**		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	**9**		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? *If "Yes," complete Schedule D, Part V*	**10**		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D,* Part VI	**11a**	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	**11b**		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	**11c**		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	**11d**		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	**11e**	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	**11f**		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	**12a**		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	**12b**		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	**13**		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	**14a**		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	**14b**		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	**15**		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	**16**		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	**17**		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	**18**		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	**19**		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	**20a**		No
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**	Yes	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
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		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L,* Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L,* Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L,*Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	1			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		

Part V **Statements Regarding Other IRS Filings and Tax Compliance** *(continued)*

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a** 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		**3a**		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*		**3b**		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		**4a**		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		**5b**		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		**7a**		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		**7c**		
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		**7e**		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		**7f**		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		**7h**		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		**8**		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?		**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		**9b**		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	**10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	**11a**			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
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		**13a**		
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	**13b**			
c	Enter the amount of reserves on hand	**13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*		**14b**		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N		**15**		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O		**16**		No

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	**1a** 11			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	**1b** 11			
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**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		**5**		No
6	Did the organization have members or stockholders? . . .		**6**	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . .		**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . .		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body? . . .		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body? . . .		**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O* . . .		**9**		No

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

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

Section 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 Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records
▶KARIN SHAW 75-5995 KUAKINI HIGHWAY SUITE 221 75-5995 KUAKNI HIGHWAY SUITE 221 KAILUA KONA, HI 96740 (808) 329-4874

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

● List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

● List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

● List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations

● List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations

● List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

See instructions for the order in which to list the persons above

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) KARIN SHAW ASSOCIATION	45 00			X				73,511	0	10,173
(2) ANDEE BEMROSE PRESIDENT	5 00	X		X				0	0	0
(3) RYAN DAWSON TREASURER	1 00	X						0	0	0
(4) MIKE DESPARD PAST PRESIDE	1 00	X						0	0	0
(5) LAURA FLEM DIRECTOR	1 00	X						0	0	0
(6) KRISTEN HANN DIRECTOR	1 00	X						0	0	0
(7) GETCHEN HOWARD TREASURER- E	1 00	X						0	0	0
(8) BLAKE KESSNER SECRETARY	1 00	X						0	0	0
(9) JOREEN KNOX DIRECTOR	1 00	X						0	0	0
(10) LOVETTE LLANTOS PRESIDENT EL	1 00	X						0	0	0
(11) KRISTIN MORELAND DIRECTOR	1 00	X						0	0	0
(12) SARAH LAYNE PEDRO VICE PRESIDE	1 00	X						0	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

	(D)	(E)	(F)
1b Sub-Total ▶			
c Total from continuation sheets to Part VII, Section A ▶			
d Total (add lines 1b and 1c) ▶	73,511		10,173

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts						
1a Federated campaigns	1a					
b Membership dues	1b	276,269				
c Fundraising events	1c					
d Related organizations	1d					
e Government grants (contributions)	1e					
f All other contributions, gifts, grants, and similar amounts not included above	1f	40,245				
g Noncash contributions included in lines 1a - 1f $	1g					
h **Total.** Add lines 1a-1f ▶			316,514			
Program Service Revenue	Business Code					
2a EDUCATION	900099		34,405	34,405		
b MEETINGS	900099		25,234	25,234		
c						
d						
e						
f All other program service revenue						
g **Total.** Add lines 2a–2f ▶			59,639			
Other Revenue						
3 Investment income (including dividends, interest, and other similar amounts) ▶			1,306	1,306		
4 Income from investment of tax-exempt bond proceeds ▶						
5 Royalties ▶						
	(i) Real	(ii) Personal				
6a Gross rents	6a					
b Less rental expenses	6b					
c Rental income or (loss)	6c					
d Net rental income or (loss) ▶						
	(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory	7a					
b Less cost or other basis and sales expenses	7b					
c Gain or (loss)	7c					
d Net gain or (loss) ▶						
8a Gross income from fundraising events (not including $ ________ of contributions reported on line 1c) See Part IV, line 18	8a	8,878				
b Less direct expenses	8b	5,951				
c Net income or (loss) from fundraising events ▶			2,927			
9a Gross income from gaming activities See Part IV, line 19	9a					
b Less direct expenses	9b					
c Net income or (loss) from gaming activities ▶						
10a Gross sales of inventory, less returns and allowances	10a	8,878				
b Less cost of goods sold	10b	5,951				
c Net income or (loss) from sales of inventory ▶			2,927	2,927		
Miscellaneous Revenue	Business Code					
11a OTHER	900099		30	30		
b						
c						
d All other revenue						
e **Total.** Add lines 11a–11d ▶			30			
12 **Total revenue.** See instructions ▶			383,343	63,902		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	17,395	17,395		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	73,511	33,080	29,404	11,027
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	36,022	36,022		
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	25,421	19,826	4,069	1,526
10 Payroll taxes	10,713	7,486	2,347	880
11 Fees for services (non-employees)				
a Management				
b Legal	5,626	5,626		
c Accounting	15,973	15,973		
d 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)	5,290	5,290		
12 Advertising and promotion	261	261		
13 Office expenses	16,285	16,285		
14 Information technology	15,640	15,640		
15 Royalties				
16 Occupancy	30,254	30,254		
17 Travel	30,472	30,472		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	53,066	53,066		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,784	1,784		
23 Insurance	756	756		
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a EDUCATION	38,413	38,413		
b BANK AND MERCHANT FEES	10,341	10,341		
c OTHER	4,477	4,477		
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	391,700	342,447	35,820	13,433
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet**

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

					(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing				1	
	2	Savings and temporary cash investments			373,693	2	392,885
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			6,294	4	5,272
	5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			141	9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	24,426			
	b	Less accumulated depreciation	10b	19,105	7,105	10c	5,321
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			2,052	15	1,852
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			389,285	16	405,330
Liabilities	17	Accounts payable and accrued expenses			11,397	17	16,728
	18	Grants payable				18	
	19	Deferred revenue			170,730	19	198,732
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D			30,715	25	24,710
	26	**Total liabilities.** Add lines 17 through 25			212,842	26	240,170
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.**					
	27	Net assets without donor restrictions			168,427	27	164,200
	28	Net assets with donor restrictions			8,016	28	960
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds				29	
	30	Paid-in or capital surplus, or land, building or equipment fund				30	
	31	Retained earnings, endowment, accumulated income, or other funds				31	
	32	Total net assets or fund balances			176,443	32	165,160
	33	Total liabilities and net assets/fund balances			389,285	33	405,330

Part XI **Reconcilliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	383,343
2	Total expenses (must equal Part IX, column (A), line 25)	2	391,700
3	Revenue less expenses Subtract line 2 from line 1	3	-8,357
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	176,443
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-2,926
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	165,160

Part XII **Financial Statements and Reporting**

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:

Software Version:

EIN: 99-0148021

Name: WEST HAWAII ASSOCIATION OF REALTORS

Form 990 (2019)

Form 990, Part III, Line 4a:

EDUCATION WE PROVIDE QUALITY CONTINUING EDUCATION COURSES FOR REALTORS WE OFFER A VARIETY OF EDUCATIONAL PROGRAMS, INCLUDING NAR DESIGNATION CLASSES SUCH AS ACCREDITED BUYER REPRESENTATIVE (ABR), AND GRADUATE REALTOR INSTITUTE (GRI) CLASSES WE ALSO OFFER STRATEGIES OF LISTING, FINANCE AND PURCHASE CONTRACT CLASSES FOR BOTH NEW AND EXPERIENCED AGENTS WE CONTINUE TO LOOK FOR ADDITIONAL CLASSES TO HELP OUR MEMBERS GET THE MOST FROM THEIR REAL ESTATE BUSINESS MOST OF OUR CONTINUING EDUCATION COURSES ARE ALSO AVAILABLE ONLINE KONAREALTORS COM OUR WEBSITE IS DESIGNED TO BE A GREAT RESOURCE FOR BOTH REALTORS, AND FOR THE GENERAL PUBLIC WE OFFER ONLINE PRODUCTS, USEFUL LINKS AND HELPFUL RESOURCES FOR OUR REALTOR MEMBERS MEMBERS OF THE GENERAL PUBLIC LOOKING FOR A REALTOR OR WANTING TO SEARCH THE PUBLIC PORTION OF HAWAII INFORMATION SERVICE CAN DO SO ON OUR WEBSITE THERE IS ALSO A LINK TO NATIONAL ASSOCIATION OF REALTORS WEBSITE, WITH FIELD GUIDES, STATISTICS AND OTHER GREAT TOOLS FOR REALTORS CARAVANS EVERY THURSDAY MORNING AT 8 15 AM, REALTORS MEET IN KONA TO NETWORK WITH EACH OTHER AND PREVIEW NEW PROPERTY LISTINGS WE BELIEVE THAT IN ORDER TO FULFILL THEIR FIDUCIARY DUTIES TO THEIR CLIENTS, PROFESSIONAL REALTORS NEED TO KNOW THE CURRENT INVENTORY OF AVAILABLE PROPERTIES ON THE MARKET THE SECOND WEDNESDAY OF EACH MONTH AT 8 30 A M , THERE IS A KAU CARAVAN FOR LISTINGS LOCATED IN THE SOUTHERN PART OF THE BIG ISLAND THERE IS ALSO A NORTH HAWAII CARAVAN FOR LISTINGS LOCATED IN THE NORTHERN PART OF THE BIG ISLAND OUR MEMBERS CAN VISIT THE KONA BOARD WEBSITE AT ANY TIME TO ENTER NEW LISTINGS AND TO PREVIEW THE CURRENT WEEKS CARAVAN LISTINGS BOARD STORE THE WEST HAWAII ASSOCIATION OF REALTORS STORE HAS A WIDE VARIETY OF PRODUCTS AVAILABLE FOR REALTORS, SUCH AS SIGNS, SENTRILOCK LOCKBOXES AND NUMEROUS OTHER ITEMS TYPICALLY NEEDED BY REALTORS FOR THEIR BUSINESS IF YOURE LOOKING FOR SOMETHING IN PARTICULAR, AND YOU DONT SEE IT IN OUR BOARD STORE, LET US KNOW AND WE MAY BE ABLE TO ORDER IT FOR YOU YOU CAN ALSO CHECK OUT THE PRODUCTS AVAILABLE AT THE ONLINE STORE ORDER YOUR PRODUCTS ONLINE AND HAVE THEM DELIVERED TO YOUR DOOR SPECIAL EVENTS WE HAVE MANY EVENTS THAT PROVIDE INFORMATION AND FUN AT THE SAME TIME FOR EXAMPLE, OUR PAU HANA EVENINGS ARE USUALLY GIVEN ON THE LAST WEDNESDAY OF EVERY MONTH WE INVITE A SPEAKER TO DISCUSS A CURRENT REAL ESTATE TOPIC OF INTEREST TO OUR MEMBERS FOLLOWED BY REFRESHMENTS AND THE OPPORTUNITY FOR NETWORKING CHECK OUT THE CALENDAR ON OUR WEBSITE FOR UPCOMING EVENTS LEGISLATIVE MONITORING WHAR HAS MEMBERS WHO MONITOR AND REPORT BACK ON VARIOUS LEGISLATIVE GROUPS AT THE COUNTY, STATE AND NATIONAL LEVELS SO THAT OUR MEMBERS CAN BE NOTIFIED AND CALLED TO ACTION WHEN ISSUES AFFECTING US ALL ARE RAISED LOCAL DISPUTE RESOLUTION ONE OF THE MOST IMPORTANT BENEFITS OF BEING A REALTOR IS THAT MEMBERS AND THEIR CLIENTS CAN BRING DISPUTES TO THE LOCAL BOARD OFFICE FOR RESOLUTION CONFERENCE ROOM WE HAVE A SEPARATE CONFERENCE ROOM AVAILABLE WITH ROOM FOR APPROX 20 PEOPLE CALL THE WEST HAWAII AOR OFFICE AT 329-4874 FOR RENTAL TERMS AND AVAILABILITY

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

Name of the organization
WEST HAWAII ASSOCIATION OF REALTORS

Employer identification number
99-0148021

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

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

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

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ____________

4 Number of states where property subject to conservation easement is located ▶ ____________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ ____________

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ ____________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ ____________

(ii) Assets included in Form 990, Part X ▶ $ ____________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ____________

b Assets included in Form 990, Part X ▶ $ ____________

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV **Escrow and Custodial Arrangements.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

			Amount
b	If "Yes," explain the arrangement in Part XIII and complete the following table		
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

Part V **Endowment Funds.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

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

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

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI **Land, Buildings, and Equipment.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		24,426	19,105	5,321
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* . . ▶				5,321

Part VII Investments—Other Securities.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3)Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* ▶	

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	24,710

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

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	383,343
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	383,343
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	383,343

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	391,700
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	391,700
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	391,700

Part XIII **Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 99-0148021
Name: WEST HAWAII ASSOCIATION OF REALTORS

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 4, PART XI, LINE 4B	CONTRIBUTIONS WITH RESTRICTIONS 0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

Name of the organization
WEST HAWAII ASSOCIATION OF REALTORS

Employer identification number
99-0148021

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☐ Yes ☑ No

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section (if applicable)	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of noncash assistance	**(h)** Purpose of grant or assistance
(1) VARIOUS			17,395				

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

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

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

	(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of noncash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of noncash assistance
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						

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

Return Reference	**Explanation**

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

Name of the organization
WEST HAWAII ASSOCIATION OF REALTORS

Employer identification number
99-0148021

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	THE OBJECTIVES OF THE WEST HAWAII ASSOCIATION OF REALTORS ARE TO UNITE THOSE ENGAGED IN THE RECOGNIZED BRANCHES OF THE REAL ESTATE PROFESSION FOR THE PURPOSE OF EXERTING A BENEFICIAL INFLUENCE UPON THE PROFESSION AND RELATED INTERESTS TO PROMOTE AND MAINTAIN HIGH STANDARDS OF CONDUCT IN THE REAL ESTATE PROFESSION AS EXPRESSED IN THE CODE OF ETHICS OF THE NATIONAL ASSOCIATION OF REALTORS TO PROVIDE A UNIFIED MEDIUM FOR REAL ESTATE OWNERS AND THOSE ENGAGED IN THE REAL ESTATE PROFESSION WHEREBY THEIR INTERESTS MAY BE SAFEGUARDED AND ADVANCED TO FURTHER THE INTERESTS OF HOME AND OTHER REAL PROPERTY OWNERSHIP TO UNITE THOSE ENGAGED IN THE REAL ESTATE PROFESSION IN THIS COMMUNITY WITH THE HAWAII REALTORS AND THE NATIONAL ASSOCIATION OFREALTORS THEREBY FURTHERING THEIR OWN OBJECTIVES THROUGHOUT THE STATE AND NATION, AND OBTAINING THE BENEFITS AND PRIVILEGES OF MEMBERSHIP THEREIN TO DESIGNATE, FOR THE BENEFIT OF THE PUBLIC, THOSE INDIVIDUALS AUTHORIZED TO USE THE TERMS REALTOR, REALTOR-ASSOCIATE AND REALTORS AS LICENSED, PRESCRIBED, AND CONTROLLED BY THE NATIONAL ASSOCIATION OF REALTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4A	EDUCATION WE PROVIDE QUALITY CONTINUING EDUCATION COURSES FOR REALTORS WE OFFER A VARIET Y OF EDUCATIONAL PROGRAMS, INCLUDING NAR DESIGNATION CLASSES SUCH AS ACCREDITED BUYER REPR ESENTATIVE (ABR), AND GRADUATE REALTOR INSTITUTE (GRI) CLASSES WE ALSO OFFER STRATEGIES O F LISTING, FINANCE AND PURCHASE CONTRACT CLASSES FOR BOTH NEW AND EXPERIENCED AGENTS WE C ONTINUE TO LOOK FOR ADDITIONAL CLASSES TO HELP OUR MEMBERS GET THE MOST FROM THEIR REAL ES TATE BUSINESS MOST OF OUR CONTINUING EDUCATION COURSES ARE ALSO AVAILABLE ONLINE KONAREA LTORS COM OUR WEBSITE IS DESIGNED TO BE A GREAT RESOURCE FOR BOTH REALTORS, AND FOR THE G ENERAL PUBLIC WE OFFER ONLINE PRODUCTS, USEFUL LINKS AND HELPFUL RESOURCES FOR OUR REALTO R MEMBERS MEMBERS OF THE GENERAL PUBLIC LOOKING FOR A REALTOR OR WANTING TO SEARCH THE PU BLIC PORTION OF HAWAII INFORMATION SERVICE CAN DO SO ON OUR WEBSITE THERE IS ALSO A LINK TO NATIONAL ASSOCIATION OF REALTORS WEBSITE, WITH FIELD GUIDES, STATISTICS AND OTHER GREAT TOOLS FOR REALTORS CARAVANS EVERY THURSDAY MORNING AT 8 15 AM, REALTORS MEET IN KONA TO NETWORK WITH EACH OTHER AND PREVIEW NEW PROPERTY LISTINGS WE BELIEVE THAT IN ORDER TO FU LFILL THEIR FIDUCIARY DUTIES TO THEIR CLIENTS, PROFESSIONAL REALTORS NEED TO KNOW THE CURR ENT INVENTORY OF AVAILABLE PROPERTIES ON THE MARKET THE SECOND WEDNESDAY OF EACH MONTH AT 8 30 A M , THERE IS A KAU CARAVAN FOR LISTINGS LOCATED IN THE SOUTHERN PART OF THE BIG IS LAND THERE IS ALSO A NORTH HAWAII CARAVAN FOR LISTINGS LOCATED IN THE NORTHERN PART OF TH E BIG ISLAND OUR MEMBERS CAN VISIT THE KONA BOARD WEBSITE AT ANY TIME TO ENTER NEW LISTIN GS AND TO PREVIEW THE CURRENT WEEKS CARAVAN LISTINGS BOARD STORE THE WEST HAWAII ASSOCIA TION OF REALTORS STORE HAS A WIDE VARIETY OF PRODUCTS AVAILABLE FOR REALTORS, SUCH AS SIGN S, SENTRILOCK LOCKBOXES AND NUMEROUS OTHER ITEMS TYPICALLY NEEDED BY REALTORS FOR THEIR BU SINESS IF YOURE LOOKING FOR SOMETHING IN PARTICULAR, AND YOU DONT SEE IT IN OUR BOARD STO RE, LET US KNOW AND WE MAY BE ABLE TO ORDER IT FOR YOU YOU CAN ALSO CHECK OUT THE PRODUCT S AVAILABLE AT THE ONLINE STORE ORDER YOUR PRODUCTS ONLINE AND HAVE THEM DELIVERED TO YOU R DOOR SPECIAL EVENTS WE HAVE MANY EVENTS THAT PROVIDE INFORMATION AND FUN AT THE SAME TI ME FOR EXAMPLE, OUR PAU HANA EVENINGS ARE USUALLY GIVEN ON THE LAST WEDNESDAY OF EVERY MO NTH WE INVITE A SPEAKER TO DISCUSS A CURRENT REAL ESTATE TOPIC OF INTEREST TO OUR MEMBERS FOLLOWED BY REFRESHMENTS AND THE OPPORTUNITY FOR NETWORKING CHECK OUT THE CALENDAR ON OU R WEBSITE FOR UPCOMING EVENTS LEGISLATIVE MONITORING WHAR HAS MEMBERS WHO MONITOR AND RE PORT BACK ON VARIOUS LEGISLATIVE GROUPS AT THE COUNTY, STATE AND NATIONAL LEVELS SO THAT O UR MEMBERS CAN BE NOTIFIED AND CALLED TO ACTION WHEN ISSUES AFFECTING US ALL ARE RAISED L OCAL DISPUTE RESOLUTION ONE OF THE MOST IMPORTANT BENEFITS OF BEING A REALTOR IS THAT MEM BERS AND THEIR CLIENTS CAN BRING DISPUTES TO THE LOCAL BOARD OFFICE FOR RESOLUTION CONFER ENCE ROOM WE HAVE A SEPARATE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4A	CONFERENCE ROOM AVAILABLE WITH ROOM FOR APPROX 20 PEOPLE CALL THE WEST HAWAII AOR OFFICE AT 329-4874 FOR RENTAL TERMS AND AVAILABILITY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 6	SECTION 1 THERE SHALL BE SEVEN CLASSES OF MEMBERS AS FOLLOWS (A) REALTOR MEMBERS REALTO R MEMBERS, WHETHER PRIMARY OR SECONDARY, SHALL BE (1) INDIVIDUALS WHO AS SOLE PROPRIETORS , PARTNERS, OR CORPORATE OFFICERS, OR BRANCH OFFICE MANAGERS, ARE ENGAGED ACTIVELY IN THE REAL ESTATE PROFESSION, INCLUDING BUYING, SELLING, EXCHANGING, RENTING OR LEASING, MANAGIN G, APPRAISING FOR OTHERS FOR COMPENSATION, COUNSELING, BUILDING, DEVELOPING OR SUBDIVIDING REAL ESTATE, AND WHO MAINTAIN OR ARE ASSOCIATED WITH AN ESTABLISHED REAL ESTATE OFFICE IN THE STATE OF HAWAII ALL PERSONS WHO ARE PARTNERS IN A PARTNERSHIP, OR ALL OFFICERS IN A CORPORATION WHO ARE ACTIVELY ENGAGED IN THE REAL ESTATE PROFESSION WITHIN THE STATE SHALL QUALIFY FOR REALTOR MEMBERSHIP ONLY, AND EACH IS REQUIRED TO HOLD REALTOR MEMBERSHIP IN A BOARD OF REALTORS WITHIN THE STATE WHETHER LICENSED AS BROKERS OR SALESPERSONS UNLESS OTHE RWISE QUALIFIED FOR INSTITUTE AFFILIATE MEMBERSHIP AS DESCRIBED IN SECTION I(C) OF ARTICLE IV IN THE CASE OF A REAL ESTATE FIRM, PARTNERSHIP, OR CORPORATION, WHOSE BUSINESS ACTIVI TY IS SUBSTANTIALLY ALL COMMERCIAL, ONLY THOSE PRINCIPALS ACTIVELY ENGAGED IN THE REAL EST ATE BUSINESS IN CONNECTION WITH THE SAME OFFICE, OR ANY OTHER OFFICES WITHIN THE JURISDICT ION OF THE ASSOCIATION IN WHICH ONE OF THE FIRM'S PRINCIPALS HOLDS REALTOR MEMBERSHIP, SHA LL BE REQUIRED TO HOLD REALTOR MEMBERSHIP UNLESS OTHERWISE QUALIFIED FOR INSTITUTE AFFILIA TE MEMBERSHIP AS DESCRIBED IN SECTION 1 (B) OF ARTICLE IV (AMENDED 1/01) NOTE REALTOR ME MBERS MAY OBTAIN MEMBERSHIP IN A SECONDARY ASSOCIATION IN ANOTHER STATE (2) INDIVIDUALS W HO ARE ENGAGED IN THE REAL ESTATE PROFESSION OTHER THAN AS SOLE PROPRIETORS, PARTNERS, COR PORATE OFFICERS, OR BRANCH OFFICE MANAGERS AND ARE ASSOCIATED WITH A REALTOR MEMBER AND ME ET THE QUALIFICATIONS SET OUT IN ARTICLE V (3) PRIMARY AND SECONDARY REALTOR MEMBERS AN INDIVIDUAL IS A PRIMARY MEMBER IF THE BOARD PAYS STATE AND NATIONAL DUES BASED ON SUCH MEM BER AN INDIVIDUAL IS A SECONDARY MEMBER IF STATE AND NATIONAL DUES ARE REMITTED THROUGH A NOTHER ASSOCIATION ONE OF THE PRINCIPALS IN A REAL ESTATE FIRM MUST BE A DESIGNATED REALT OR MEMBER OF THE ASSOCIATION IN ORDER FOR LICENSEES AFFILIATED WITH THE FIRM TO SELECT THE ASSOCIATION AS THEIR "PRIMARY" ASSOCIATION (4) DESIGNATED REALTOR MEMBERS EACH FIRM SHA LL DESIGNATE IN WRITING ONE REALTOR MEMBER WHO SHALL BE RESPONSIBLE FOR ALL DUTIES AND OBL IGATIONS OF MEMBERSHIP INCLUDING THE OBLIGATION TO MEDIATE PURSUANT TO ARTICLE 17 OF THE C ODE OF ETHICS AND THE PAYMENT OF ASSOCIATION DUES AS ESTABLISHED IN ARTICLE X OF THE BYLAW S THE "DESIGNATED REALTOR- AND MUST BE A SOLE PROPRIETOR, PARTNER, CORPORATE OFFICER, OR BRANCH OFFICE MANAGER ACTING ON BEHALF OF THE FIRM'S PRINCIPAL(S) AND MUST MEET ALL OTHER QUALIFICATIONS FOR REALTOR MEMBERSHIP ESTABLISHED IN ARTICLE V, SECTION 2, OF THE BYLAWS (5) CORPORATE OFFICERS (WHO MAY BE LICENSED OR UNLICENSED) OF A REAL ESTATE BROKERAGE FRAN CHISE ORGANIZATION WITH AT LEA

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 6	ST ONE HUNDRED FIFTY (150) FRANCHISEES LOCATED WITHIN THE UNITED STATES, ITS INSULAR POSSE SSIONS AND THE COMMONWEALTH OF PUERTO RICO, ELECTED TO MEMBERSHIP PURSUANT TO THE PROVISIO NS IN THE NAR CONSTITUTION AND BYLAWS SUCH INDIVIDUALS SHALL ENJOY THE RIGHT, PRIVILEGES AN OBLIGATIONS OF REALTOR MEMBERSHIP (INCLUDING COMPLIANCE WITH THE CODE OF ETHICS) EXCEPT OBLIGATIONS RELATED TO ASSOCIATION MANDATED EDUCATION, MEETING ATTENDANCE, OR INDOCTRINA TION CLASSES OR OTHER SIMILAR REQUIREMENTS, THE RIGHT TO USE THE TERM REALTOR IN CONNECTIO N WITH THEIR FRANCHISE ORGANIZATION'S NAME, AND THE RIGHT TO HOLD ELECTIVE OFFICE IN THE L OCAL ASSOCIATION, STATE ASSOCIATION AND NATIONAL ASSOCIATION (B) INSTITUTE AFFILIATE MEMB ERS INSTITUTE AFFILIATE MEMBERS SHALL BE INDIVIDUALS WHO HOLD A PROFESSIONAL DESIGNATION AWARD BY AN INSTITUTE, SOCIETY, OR COUNCIL AFFILIATED WITH THE NATIONAL ASSOCIATION OF REA LTORS THAT ADDRESSES A SPECIALTY AREA OTHER THAN RESIDENTIAL BROKERAGE OR INDIVIDUALS WHO OTHERWISE HOLD A CLASS OF MEMBERSHIP IN SUCH INSTITUTE, SOCIETY OR COUNCIL THAT CONFERS TH E RIGHT TO HOLD OFFICE ANY SUCH INDIVIDUAL, IF OTHERWISE ELIGIBLE, MAY ELECT TO HOLD REAL TOR MEMBERSHIP, SUBJECT TO PAYMENT OF APPLICABLE DUES FOR SUCH MEMBERSHIP (C) AFFILIATE M EMBERS AFFILIATE MEMBERS SHALL BE REAL ESTATE OWNERS AND OTHER INDIVIDUALS OR FIRMS WHO, WHILE NOT ENGAGED IN THE REAL ESTATE PROFESSION AS DEFINED IN PARAGRAPHS (A), (B) OR (C) O F THIS SECTION, HAVE INTERESTS REQUIRING INFORMATION CONCERNING REAL ESTATE, AND ARE IN SY MPATHY WITH THE OBJECTIVES OF THE ASSOCIATION 12 31 2018 AFFILIATE MEMBERSHIP SHALL ALSO BE GRANTED TO INDIVIDUALS LICENSED OR CERTIFIED TO ENGAGE IN REAL ESTATE PRACTICE WHO, IF OTHERWISE ELIGIBLE, DO NOT ELECT TO HOLD REALTOR MEMBERSHIP IN THE ASSOCIATION, PROVIDED T HE APPLICANT IS ENGAGED EXCLUSIVELY IN A SPECIALTY OF THE REAL ESTATE BUSINESS OTHER THAN BROKERAGE OF REAL PROPERTY (D) PUBLIC SERVICE MEMBERS PUBLIC SERVICE MEMBERS SHALL BE IN DIVIDUALS WHO ARE INTERESTED IN THE REAL ESTATE PROFESSION AS EMPLOYEES OF OR AFFILIATED W ITH EDUCATIONAL, PUBLIC UTILITY, GOVERNMENTAL OR OTHER SIMILAR ORGANIZATIONS, BUT ARE NOT ENGAGED IN THE REAL ESTATE PROFESSION ON THEIR OWN ACCOUNT OR IN ASSOCIATION WITH AN ESTAB LISHED REAL ESTATE BUSINESS (E) HONORARY MEMBERS HONORARY MEMBERS SHALL BE INDIVIDUALS N OT ENGAGED IN THE REAL ESTATE PROFESSION WHO HAVE PERFORMED NOTABLE SERVICE FOR THE REAL E STATE PROFESSION, FOR THE ASSOCIATION, OR FOR THE PUBLIC (F) STUDENT MEMBERS STUDENT MEM BERS SHALL BE INDIVIDUALS WHO ARE SEEKING AN UNDERGRADUATE OR GRADUATE DEGREE WITH A SPECI ALIZATION OR MAJOR IN REAL ESTATE AT INSTITUTIONS OF HIGHER LEARNING, AND WHO HAVE COMPLET ED AT LEAST TWO YEARS OF COLLEGE AND AT LEAST ONE COLLEGE LEVEL COURSE IN REAL ESTATE, BUT ARE NOT ENGAGED IN THE REAL ESTATE PROFESSION ON THEIR OWN ACCOUNT OR NOT ASSOCIATED WITH AN ESTABLISHED REAL ESTATE OFFICE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	BOARD REVIEWS AND APPROVES INCOME TAX RETURN

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15A	THE BOARD REVIEWS COMPARABLE COMPENSATION PRIMARILY FROM OTHER REALTOR ASSOCIATIONS OF COMPARABLE SIZE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15B	THE BOARD REVIEWS COMPARABLE COMPENSATION PRIMARILY FROM OTHER REALTOR ASSOCIATIONS OF COMPARABLE SIZE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	DOCUMENTS MADE AVAILABLE UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	UNRECONCILED DIFFERENCE -2,926