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

 $\blacktriangleright$  Information about Form 990 and its instructions is at  $\underline{\textit{www.IRS.gov/form990}}$ 

OMB No 1545-0047

DLN: 93493210010316

Open to Public Inspection

A F	or the	2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-201	5									
<b>B</b> Ch	eck ıf ap	plicable C Name of organization SPACE COAST ASSOCIATION OF REALTORS INC		D Emplo	yer iden	tification number						
┌ Ad	ress cha			23-12	250368							
┌ Na	me chan	ge Doing business as										
┌ Inr	al retur	n		E Talanh								
_ Fir		Number and street (or P O box if mail is not delivered to street address) Room/suite  105 MCLEOD STREET  (2.2.1.) 4.5.2.0.4.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0										
	urn/term	illiated	(321) 452-9490									
Am	ended re	eturn City or town, state or province, country, and ZIP or foreign postal code MERRITT ISLAND, FL 32953		<b>G</b> Gross r	ocainte ¢	2,484,752						
Г Ар	olication	pending		G Gloss I	eceipts \$	2,404,732						
		F Name and address of principal officer	<b>H(a)</b> Is th			for						
		LEAH M SELIG 105 MCLEOD STREET		rdinates?		ΓYes ΓΝο						
		MERRITT ISLAND, FL 32954	<b>H(b)</b> Are a		nates	\[\text{Yes \text{\text{No}}}\]						
			If"N	o," attach	alıst (	see instructions)						
I la	x-exem <sub>l</sub>	pt status	H(c) Grou	ıp exempt	ion num	nber 🟲						
J W	ebsite	:► WWW SPACE321 COM										
<b>K</b> For	n of org	anization   Corporation   Trust   Association   Other ►	<b>L</b> Year of fo	rmation 19	959 <b>M</b> 9	State of legal domicile FL						
Pa	rt I	Summary										
	<b>1</b> Bri	refly describe the organization's mission or most significant activities										
	<u> </u>	OFESSIONAL TRADE ASSOCIATION PROVIDING SERVICES TO LOCAL R	EAL ESTATE	E PROFES	SSIONA	LS						
<u>နို</u>	-											
Governance	<b>2</b> C	heck this box 🔭 if the organization discontinued its operations or disposed of	more than 2	5% of its	net ass	ets						
	] . N	umber of voting members of the governing hady (Dort VI June 1a)		ı	a	1.2						
න් ග්		umber of voting members of the governing body (Part VI, line 1a) umber of independent voting members of the governing body (Part VI, line 1b)		ŀ	3 4	13						
Ħ		otal number of individuals employed in calendar year 2015 (Part V, line 2a)		· •	5	16						
Activities &		otal number of volunteers (estimate if necessary)		l	6	3,185						
∢	1	otal unrelated business revenue from Part VIII, column (C), line 12			7a	1,479,107						
		et unrelated business taxable income from Form 990-T, line 34		.	7b	154,050						
			Pric	or Year		Current Year						
	8	Contributions and grants (Part VIII, line 1h)			0	0						
Revenue	9	Program service revenue (Part VIII, line 2g)		1,957,	408	2,264,245						
9,0	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			484	-3,784						
五	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		227,	146	219,820						
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,185,	038	2,480,281						
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)			0	0						
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0	0						
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines		714,	4 2 8	684,400						
Expenses		5-10)		714,								
<u>\$</u>	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0	0						
五	b	Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright^0$										
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,384,		1,544,447						
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		2,098,	-	2,228,847						
	19	Revenue less expenses Subtract line 18 from line 12	•	86,	120	251,434						
Not Assets or Fund Balances			Beginning o	of Current	Year	End of Year						
SS et al.	20	Total assets (Part X, line 16)		4,699,	781	4,859,185						
A A	21	Total liabilities (Part X, line 26)		1,101,	368	1,017,390						
žŽ	22	Net assets or fund balances Subtract line 21 from line 20		2500	442	2 2 4 4 7 2 5						
Pa	rt II	Signature Block										

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

Sign	
Here	
i ici c	

Signature of officer

LEAH M SELIG EXECUTIVE OFFICER
Type or print name and title

Paid Preparer **Use Only**  Print/Type preparer's name ROMAN G CARRAWAY CPA

Preparer's signature ROMAN G CARRAWAY CPA

Firm's name F CARR RIGGS & INGRAM LLC

Firm's address ► 215 BAYTREE DRIVE SUITE 1

MELBOURNE, FL 329402195

May the IRS discuss this return with the preparer shown above? (see instruction For Paperwork Reduction Act Notice, see the separate instructions.

orm	1990 (2015)			Page <b>2</b>
Par	t IIII Statement of Program Se	<del>-</del>		
			this Part III	<u> </u>
1	Briefly describe the organization's miss			
'ROI	FESSIONAL TRADE ASSOCIATION PR	OVIDING SERVICES TO LO	CAL REAL ESTATE PROFESSIONA	ALS
2	Did the organization undertake any sign the prior Form 990 or 990-EZ?			
	If "Yes," describe these new services of	n Schedule O		
3	Did the organization cease conducting, services?	or make significant changes in	n how it conducts, any program	
	If "Yes," describe these changes on Sc	hedule O		
4	Describe the organization's program se expenses Section 501(c)(3) and 501(the total expenses, and revenue, if any	c)(4) organizations are require	d to report the amount of grants and	ces, as measured by d allocations to others,
4a	(Code ) (Expenses \$ PROVIDE COMMUNICATION, CONTINUING EDU REALTORS, MONITOR REALTOR ETHICS AND G	1,936,552 including gra CATION, SUPPLIES, MULTIPLE LISTIN OVERNMENT AFFAIRS		·
4b	(Code ) (Expenses \$	ıncludıng grar	nts of \$ ) (Revenue \$	)
<b>4</b> c	(Code ) (Expenses \$	ıncludıng grar	nts of \$ ) (Revenue \$	)
4d	Other program services (Describe in S (Expenses \$	Schedule O ) including grants of \$	) (Revenue \$	)
4e	Total program service expenses ▶	1,936,552		

Form 990 (2015)		Page <b>3</b>
Part IV Checklist of Required Schedules		
	Yes	No

	_		1 03	140
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	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	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			
а	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	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of	110		No
d	Its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	<u> </u>	
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 🕏	11d		N o
е	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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	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 $11e^{2}$ 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? <i>If "Yes," complete Schedule G, Part II</i>	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		N o
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		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		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? <i>If "Yes," complete Schedule J</i>	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, 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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
		28a		N o
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? 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? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	_
		Fo	orm <b>990</b>	(2015)

	990 (2015)			Page:
Pai	** 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
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 19			
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable  1b 0  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered			
	by this return			
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	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
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	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
Ь	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		
	Organizations that may receive deductible contributions under section 170(c).			
	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 		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	$\vdash$		
	file Form 8282?	7c		
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?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Νo
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		
9a	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			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
Б	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	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			
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? <b>Note.</b> 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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Se	ction 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 13			
	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 13			
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		N o
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	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Cod	e.)
			Yes	No
L0a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
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	Yes	
l1a	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			
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
L3	Did the organization have a written whistleblower policy?	13	Yes	
<b>L4</b>	Did the organization have a written document retention and destruction policy?	14	Yes	
<b>L</b> 5	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?			
а	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)			
L6a	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		Νo
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		
	ction C. Disclosure			
L7	List the States with which a copy of this Form 990 is required to be filed► FL			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			

State the name, address, and telephone number of the person who possesses the organization's books and records ►LEAH SELIG 105 MCLEOD STREET MERRITT ISLAND, FL 32953 (321) 452-9490 Part VII

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0 in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

Name and Title	(B)	l		(C				(D)	(E)	(F)
	A verage hours per week (list any hours for related	more pers and	than on is	(do one bot rect	not box h ar or/tr	checl x, unle n office rustee	ess er :)	Reportable compensation from the organization (W- 2/1099-	Reportable compensation from related organizations (W- 2/1099-	Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	` MÍSC)	MISC)	organization and related organizations
(1) DENNIS BASILE DIRECTOR	2 00	x						0	0	(
(2) STEVE ROMANO DIRECTOR	2 00	х						0	0	(
(3) DANIEL BARBER DIRECTOR	2 00	х						0	0	(
(4) LYNNETTE HENDRICKS PRESIDENT ELECT	2 00	х						0	0	(
(5) MITCH RIBAK  IMMEDIATE PAST PRESIDENT	2 00	x						0	0	(
(6) KAZ CISOWSKI DIRECTOR	2 00	х						0	0	(
(7) LYNN JONES TREASURER	3 00	х						0	0	(
(8) RON EGOROFF SECRETARY	2 00	х						0	0	(
(9) LEAH M SELIG EXECUTIVE DIRECTOR	37 50	х		х				107,019	0	15,295
(10) LYNN WHELPLEY PRESIDENT	2 00	х						0	0	(
(11) NONA SWANN DIRECTOR	2 00	х						0	0	(
(12) CAROL ROBERTSON DIRECTOR	2 00	х						0	0	(
(13) JASON BUCCI DIRECTOR	2 00	х						0	0	(
(14) MICHAEL ARTELLI DIRECTOR	2 00	х						0	0	(

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

	(A) Name and Title	Name and Title  A verage hours per week (list any hours  A verage more than one box, un person is both an offi any hours  A verage more than one box, un person is both an offi and a director/truste					unless officer	3	( <b>[</b> Repor comper from organiza	rtable nsation i the tion (W-	(E) Reportable compensation from related organizations (W-	(F) Estimate amount of c compensa from the	ther tion e
		for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)	organizatior related organizati	
1b c d	Sub-Total								10	7,019	0	1!	5,295
2	Total number of individuals (in \$100,000 of reportable compe	cluding but not	limited	to the	se l	ıste	d abov	e) w	ho receive	d more th	nan		
												Yes	No
3	Did the organization list any <b>f</b> oon line 1a? <i>If "Yes," complete S</i>	•				key		yee,	, or highes	t compen			
4	For any individual listed on line organization and related organ	e 1a, is the sum	of repo	rtabl	есо	- mpe	nsatio				on from the	3	No
5	Individual	a receive or acc	rue cor	nner	• satu	• on fr	om an	V linr	elated org			4	No
-	services rendered to the organ											5	No
Se	ection B. Independent Co	ntractors											
1	Complete this table for your five compensation from the organization												
		(A) lame and business						<u> </u>			(B) scription of services	(C) Compensa	tion
										ļ			

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  $\blacktriangleright$  0

Part V	/##	Statement o						
		Check if Schedu	ile O contains a respoi	nse or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Grants mounts	1a	Federated camp	paigns 1a					
ant un	ь	Membership du	es <b>1b</b>					
9 E.	c	Fundraising eve	ents <b>1c</b>					
ffs,	d	Related organiz	ations 1d					
, Gi nila		Government grants						
ins, Sin	-	_						
utic Ier	f	similar amounts no						
ਜੂ <u>ਦੇ</u>	g	Noncash contribution	ons included in lines					
nd nd	h	Total. Add lines	s 1a-1f					
C								
Program Service Revenue and Other Sim	2a	MEMBERSHIP DUES	S & FFFS		2 211 526	860.883	1 350 644	
	_	EDUCATION				•	1,550,044	
		LISTING FEES			•	32,313	200	
	d			331390	200		200	
	e			+				
	f	All other progra	ım service revenue					
ું. જુ				L				
_	⊢ <u> </u>				2,264,245			
	-	and other simila	aramounts)		687			68
	4		•	· · · · ·	10.017		10.017	
Program Service Revenue Contributions, Girs, and Other Similar A	5	Royalties			10,817		10,817	
	63	Gross rents		, ,				
		G1033 Tellt3	· 					
	Ь	Less rental expenses	0	0				
	c	Rental income or (loss)	66,160	5,646				
	d		me or (loss)		71,806	71,806		
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory						
	ь	Less cost or other basis and		4.471				
		sales expenses		,				
	_	Gain or (loss)	c)	· ·	-4 471	-4 471		
۸.				· · · · · •	1,171	1,1,7		
łevenu(		events (not incl \$ of contributions	uding reported on line 1c)					
- l	1a F M M F R G A F M G M G M G M G M G M G M G M G M G M	See Part IV, lin	e 18 a					
를	ь	Less direct exp		gns . 1a				
-				events 🛌				
	9a	Gross income fi See Part IV, lin						
	ь	Less direct exp	penses b				(B) (C) Unrelated business revenue 8860,882 1,350,644 52,519 200 74,819 1,092 42,496 18,659 131	
and				vities				
	10a	Gross sales of returns and allo	wances .					
			loss) from sales of inv	entory 🛌				
		Miscellaneous	Revenue					
	11a 	SUPPLIES				4 005	,	
	Ь	LATE FEES						
		MISCELLANEO		531390	18,790	18,659	131	
				-	137,197			
	**	iotai revenue.	see instructions .	· · · · •	2,480,281	1,000,487	1,479,107	687

## 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 th	ıs Part IX		<u> </u>	<u> </u>				
	ot include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> 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								
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	122,315	105,293	17,022					
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	436,787	377,153	59,634					
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	18,692	15,801	2,891					
9	Other employee benefits	70,550	56,440	14,110					
10	Payroll taxes	36,056	30,649	5,407					
11	Fees for services (non-employees)								
а	Management								
b	Legal	10,422	10,422						
с	Accounting	23,625	23,625						
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)								
12	Advertising and promotion	22,627	22,627						
13	Office expenses	156,147	139,096	17,051					
14 15	Information technology								
15 16	Royalties	100.660	05 400	14.200					
16 17	Occupancy	109,669	95,400	14,269					
17 18	Payments of travel or entertainment expenses for any federal,	66,395	60,429	5,966					
18	state, or local public officials								
19	Conferences, conventions, and meetings								
20	Interest	13,758		13,758					
21	Payments to affiliates	100.000	112.000	F7.040					
22 23	Depreciation, depletion, and amortization	169,688	112,669	57,019					
23 24	Insurance	1,857	1,486	371					
<b>4</b> -1	miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)								
а	INCOMETAX	45,291	45,291						
b	MLS ACCESS FEES	472,836	472,836						
c	REPAIRS & MAINTENANCE	156,766	125,413	31,353					
d	MEMBER SERVICES	106,352	106,352						
е	All other expenses	189,014	135,570	53,444					
25	Total functional expenses. Add lines 1 through 24e	2,228,847	1,936,552	292,295	0				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)								

Form 990 (2015) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X  $\,$  .  $\,$  . (B) (A) End of year Beginning of year Cash-non-interest-bearing . . . . 580,383 756,334 1 1 321,035 324,048 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net . . 3 Accounts receivable, net . . . . . 22,663 33,994 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9)voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6

Şe						6	
Asse	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			55,291	8	39,585
	9	Prepaid expenses and deferred charges			81,160	9	50,512
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	5,174,407			
	Ь	Less accumulated depreciation	10b	1,938,584	3,405,983	10c	3,235,823
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11 .			217,597	12	407,219
	13	Investments—program-related See Part IV, line 11 .		13			
	14	Intangible assets			14,579	14	10,580
	15	Other assets See Part IV, line 11			1,090	15	1,090
	16	Total assets.Add lines 1 through 15 (must equal line 34)			4,699,781	16	4,859,185
	17	Accounts payable and accrued expenses	183,927	17	85,859		
	18	Grants payable				18	
	19	Deferred revenue			505,629	19	561,598
	20	Tax-exempt bond liabilities				20	
_	21	Escrow or custodial account liability Complete Part IV o	fSched	iule D		21	
Liabilities	22	Loans and other payables to current and former officers, key employees, highest compensated employees, and dis					
喜		persons Complete Part II of Schedule L				22	
ä	23	23 Secured mortgages and notes payable to unrelated third parties		411,812	23	360,799	
	24	Unsecured notes and loans payable to unrelated third pa	rties			24	
	25	Other liabilities (including federal income tax, payables t and other liabilities not included on lines 17-24) Complete Part X of Schedule D	o relate	ed third parties,			
					0		9,134
	26	Total liabilities. Add lines 17 through 25			1,101,368	26	1,017,390
S & S		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.	re ► 🔽	and complete			
an I	27	Unrestricted net assets			3,598,413	27	3,841,795
ස ධ	28	Temporarily restricted net assets				28	
und Balance	29	Permanently restricted net assets				29	
or Fu		Organizations that do not follow SFAS 117 (ASC 958), checomplete lines 30 through 34.	eck he	re ▶ ┌ and			
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment	fund .			31	
	32	Retained earnings, endowment, accumulated income, or o	ther fu	nds		32	
Ř	33	Total net assets or fund balances			3,598,413	33	3,841,795
_	34	Total liabilities and net assets/fund balances	<u>.</u> .	<u></u> .	4,699,781	34	4,859,185
						Form <b>990</b> (2015)	

1 01111	330 (2013)				raye 12
Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
		<del></del>			,
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,4	180,281
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,2	228,847
3	Revenue less expenses Subtract line 2 from line 1	3		2	251,434
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) $\cdot$ .	4		3,5	598,413
5	Net unrealized gains (losses) on investments	5			-8,052
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			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3,8	341,795
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. ୮</u>
				Yes	No
1	Accounting method used to prepare the Form 990				
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 revial separate basis, consolidated basis, or both	ewed on			
	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 sepbasis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign of the audit, review, or compilation of its financial statements and selection of an independent accountant		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	За		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		

As Filed Data - DLN: 93493210010316

**SCHEDULE C** 

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Information about Schedule C (Form 990 or 990-EZ) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

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

SPACE COAST	ASSOCIATION	OF	REALTORS INC	

Name of the organization

Employer identification number

23-1250368

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

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV					
2						
Polit	ical expenditures					
•	•					
		\$	0			
3						
Volu	nteer hours					

Pai	t I-B Complete if the organization is exempt under section 501(c)(3).	
1	Enter the amount of any excise tax incurred by the organization under section 4955	\$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
<b>4</b> a		

4a
Was a correction made?
Yes No
b If "Yes," describe in Part IV

┌ Yes ┌ No

For

	'		
art I-C	Complete if the organization is exempt under section 501(c), except section 5	01(	c)(3).
Enter	r the amount directly expended by the filing organization for section 527 exempt function activities	\$	

2
Enter the amount of the filing organization's funds contributed to other organizations for section 527

	mpt function activities	
•		0
		\$ 0
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶	\$ 
4		

Did the filing organization fileForm 1120-POL for this year?

5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing
	organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the
	amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a
	separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	( <b>b)</b> Address	<b>(c)</b> EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

Paperwork Reduction Act Notice, se	e the instructions for Form 990 or 990-	EZ. Ca	t No 50084S	Schedule C (	Form 990 or 990-EZ) 2	0

ochedule C (i	01111 3 3 0 0 1 3 3 0 EZ / 2 0 1 3	Page 4
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (	election
	under section 501(h)).	

A Check ► If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ► If the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures		(a) Filing organization's	(b) Affiliated
(The term "expenditures" means amounts paid or incu	rred.)	totals	group totals

Total lobbying expenditures to influence public opinion (grass roots

**1a** lobbying)

f b Total lobbying expenditures to influence a legislative body (direct lobbying)

 $f{c}$  Total lobbying expenditures (add lines 1a and 1b)

 $oldsymbol{d}$  O ther exempt purpose expenditures

Total exempt purpose expenditures (add lines 1c and 1d)  ${f e}$ 

f Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-

Subtract line 1f from line 1c If zero or less, enter -0-

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

┌ Yes ┌

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period					
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2012	<b>(b)</b> 2013	<b>(c)</b> 2014	<b>(d)</b> 2015	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e 	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Part II-B		rganization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT		Page 3
or each "Yes" r		ugh 1: below, provide in Part IV a detailed description of the lobbying	(	a)	(b)
tivity.			Yes	No	Amount
legislatio	on, including any attemp	ganization attempt to influence foreign, national, state or local ot to influence public opinion on a legislative matter or referendum,			
a	the use of		1	1	1
olunteers?	1				
<b>b</b> Paid star	] ff or management (inclu	de compensation in expenses reported on lines 1c through 1i)?			
С			1		
edıa advertıs	sements?				
d	<u> </u>				
ailings to me	mbers, legislators, or th	ne public?			
e Publicati	lons, or published or bro	padcast statements?			I
<b>f</b> Grants t	 o other organizations foi	r lobbying purposes?			
					<u> </u>
<b>g</b> Direct co	ontact with legislators, t	their staffs, government officials, or a legislative body?		<u> </u>	1
<b>h</b> Rallies, o	demonstrations, semina	rs, conventions, speeches, lectures, or any similar means?			
<b>i</b> ther activitie	es?				
1	I				
<b>j</b> otal Addline	s 1c through 1ı				
		e the organization to be not described in section 501(c)(3)?			4
		y tax incurred under section 4912 y tax incurred by organization managers under section 4912		 	
		d a section 4912 tax, did it file Form 4720 for this year?		 	
art III-A		rganization is exempt under section 501(c)(4), section	501(c	)(5).	or section
	501(c)(6).				Yes No
Were sub	bstantıally all (90% or r	more) dues received nondeductible by members?		ĺ	<b>1</b> No
Did the o	organization make only i	n-house lobbying expenditures of \$2,000 or less?			<b>2</b> No
Did the d	organization agree to ca	rry over lobbying and political expenditures from the prior year?		-	<b>3</b> No
art III-B		rganization is exempt under section 501(c)(4), section either (a) BOTH Part III-A, lines 1 and 2, are answered			
	line 3, is answere	ed "Yes."			
ues, assessn	nents and sımılar amour	nts from members			
1 Section	655,099 162(e) nondeductible lo	obbying and political expenditures (do not include amounts of political	1	I	
	s for which the section		ı		
urrent year					
2a					
<b>b</b> arryover from	ı last year				
2b					
<b>c</b> otal					
2c					
A ggrega	te amount reported in so	ection 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3		
notices were		n line 2c exceeds the amount on line 3, what portion of the excess ver to the reasonable estimate of nondeductible lobbying and			
	nization agree to carryov iditure next year?	ver to the reasonable estimate of holideductible lobbying and			
Taxable	amount of Johnwing and	political expenditures (see instructions)	5	I	
	Supplemental Inf			<u> </u>	
Part TV					
	lescriptions required for	Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gr	oup list)	, Part I	I-A, lines 1 and
Provide the d 2 (see instru	lescriptions required for ctions), and Part II-B, Iii	Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gr ne 1 Also, complete this part for any additional information	oup list)	, Part I	I-A, lines 1 and
Provide the d 2 (see instru	descriptions required for ctions), and Part II-B, lii urn Reference	Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gr			

Schedule C (Form 990 or 990EZ) 2015

DLN: 93493210010316

OMB No 1545-0047

**SCHEDULE D** 

(Form 990)

Department of the Treasury

#### **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.

Revenue Service	Information about Schedule D	(Form 990) and its instructions is at <u>www.ir</u>	s.gov/form990.	Inspection
			Employer identi	fication number
LL CUMST MSSUCIA	TION OF KLALTOKS INC		23-1250368	
				nts.
Comple	ete if the organization answere			
Total numbe	er at and of year	(a) Donor advised funds	(b)Funds and	other accounts
	•			
year)	ande of contributions to (during			
Aggregate v	alue of grants from (during year)			
Aggregate v	alue at end of year			
			nor advised	┌ Yes
used only for c	haritable purposes and not for the			Eva Eva
		ato if the organization answered "Ves"	on Form 000 Day	Yes No
		<u> </u>	on Form 990, Pa	it IV, iiile 7.
			n historically impor	tant land area
☐ Protection	of natural habitat	Preservation of a	certified historic st	ructure
☐ Preservation	on of open space			
		held a qualified conservation contribution in	the form of a conse	rvation
easement on th	ne last day of the tax year		Hold at	the End of the Year
Total number o	f conservation easements			the End of the Year
		ents	2b	
			2c	
Number of cons	servation easements included in (c	e) acquired after 8/17/06, and not on a		
	<del>-</del>			
		nsferred, released, extinguished, or terminat	ed by the organızat	ion during the
Number of stat	es where property subject to cons	ervation easement is located ►		
			idling of	Yes No
Staff and volun year	teer hours devoted to monitoring, i	inspecting, handling of violations, and enforc	ing conservation e	asements during the
<u> </u>				
•		ecting, handling of violations, and enforcing c	conservation easen	nents during the year
Does each con	servation easement reported on lir	ne 2(d) above satisfy the requirements of se	ction 170(h)(4)	Yes No
In Part XIII, de balance sheet,	escribe how the organization report and include, if applicable, the text	of the footnote to the organization's financia	ıd expense stateme	nt, and
	<del>_</del>		or Othor Simil	ar Assats
Comple	ete if the organization answere	ed "Yes" on Form 990, Part IV, line 8.	or other similar	ai Assets.
works of art, his	storical treasures, or other similar	assets held for public exhibition, education,	or research in furtl	
works of art, his	storical treasures, or other similar	assets held for public exhibition, education,		
i) Revenue inclu	ıded on Form 990, Part VIII, line 1	L	<b>►</b> \$	
) Assets include	ed ın Form 990, Part X		<b>►</b> \$	
If the organizat	tion received or held works of art, h			rovide the
Revenue includ	led on Form 990, Part VIII, line 1		<b>►</b> \$	
	Total number of the organic Complete Vyear)  Aggregate vyear)  Aggregate vyear)  Aggregate vyear)  Aggregate voused only for conferring imposed only for conferring impose	reaches of the organization re coast association of Realtors inc recoast association answere  Total number at end of year  Aggregate value of grants from (during year)  Aggregate value at end of year  Did the organization inform all donors and donor a funds are the organization's property, subject to to Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?  **II** Conservation Easements.* Complete in Preservation of land for public use (e.g., recre Protection of natural habitat Preservation of open space  Complete lines 2a through 2d if the organization is easement on the last day of the tax year  Total number of conservation easements  Number of conservation easements included in (historic structure listed in the National Register  Number of conservation easements modified, train tax year  Number of states where property subject to conservations, and enforcement of the conservation estendance in the National Register  Number of states where property subject to conservations, and enforcement of the conservation estendance in the National Register  Number of states where property subject to conservations, and enforcement of the conservation estable in the National Register  Number of states where property subject to conservation estable organization have a written policy regar violations, and enforcement of the conservation estable in the National Register  Preservation of the conservation estable in the National Register  Preservation of the conservation estable in the National Register  Number of states where property subject to conservation estable organization and the reconservation estable in the National Register  Preservation of the National Register  Preservation of the National Register  Preservation of the National Register  Preservation	Total number at end of year  Did the organization sequence of the organization answered "Yes" on Form 990, Part IV, line 6.  Total number at end of year  Aggregate value of contributions to (during year)  Aggregate value at end of year  Did the organization inform all donors and donor advisors in writing that the assets held in do funds are the organization inform all grantees, donors, and donor advisors in writing that grant fundiused only for charitable purposes and not for the benefit of the donor or donor advisor, or for a conferring impermissible private benefit?  Purpose(s) of conservation easements. Complete if the organization answered "Yes"  Purpose(s) of conservation easements. Complete if the organization answered "Yes"  Preservation of land for public use (e.g., recreation or education) Preservation of a Protection of natural habitat Preservation of an attended in (a)  Preservation of preservation easements  Total acreage restricted by conservation easements  Number of conservation easements in cluded in (c) acquired after \$/17/06, and not on a histonic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminat tax year   Number of states where property subject to conservation easements is holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcement of the conservation easements is holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcement of the conservation easements is holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcement of the conservation easements in holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcement of the conservation easements. In its revenue are balance sheet, and include, if applicable, the text of the footnote to the organization's financia the organization exceuded, as permitted under SFAS 116 (ASC 958),	Employer identic 22-1250368  ***ECONST ASSOCIATION OF REALIONS INC  ***ECONST ASSOCIATION OF REALIONS INC  ***TECONST ASSOCIATION OF REALIONS INC  ***TECONST ASSOCIATION OF REALIONS INC  ***Complete if the organization answered "Yes" on Form 990, Part IV, line 6.  **Total number at end of year

**b** Assets included in Form 990, Part X

Part	1111	Organizations Maintaining (continued)	Collections of A	rt, His	storical	Trea	asures,	or Ot	her Similar A	ssets	
		the organization's acquisition, accetion items (check all that apply)	ession, and other rec	ords, cł						e of its	
а	ΓP	ublic exhibition		d	l Lo	an or e	exchange	progra	ms		
b	┌ s	cholarly research		e	┌ ot	her					
C	ΓP	reservation for future generations									
4	Provid Part X	de a description of the organization's (III	s collections and exp	laın hov	w they fur	ther t	he organız	atıon's	exempt purpose	: IN	
	asset	g the year, did the organization solic s to be sold to raise funds rather tha	an to be maintained a							i	
Part	BIV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		Form	990, Pai	rt IV,	line 9, o	r repo	orted an amour	nt on Forr	n 990,
		organization an agent, trustee, cus led on Form 990, Part X?	todıan or other ınterr	mediary	for contr	ıbutıo	ns or othe	rasse	ts not <b>ryes</b>	i	
ь	If"	Yes," explain the arrangement in Pa	ort XIII and complete	the fol	llowing ta	ble			Am	ount	
c		inning balance	·		3			1c			
d		ditions during the year						1d			
e		tributions during the year						1e			
f		ding balance						1f			
2a		ie organization include an amount or	n Form 990. Part X. li	ine 21.	for escro	worc	ustodial a	ccount	t liability? <b>「Yes</b>	. □ No	
	D 14 C.	o organization morade an amount of	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	101 00010		abcoular a		, ,	,	
b	If"Ye	s," explain the arrangement in Part	XIII Check here if t	he expl	anation h	as be	en provide	d ın Pa	art XIII		Γ
	t V	Endowment Funds. Complete									
		·	(a)Current year		nor year				<b>d)</b> Three years back		ears back
1a	Begin	ning of year balance									
b	Contr	nbutions									
C	Net ir Iosse	nvestment earnings, gains, and s									
d	Grant	s or scholarships									
е		r expenditures for facilities rograms									
f	- A dmı	nistrative expenses									
g		fyear balance									
2	Provid	de the estimated percentage of the d	current vear end bala	nce (lır	ne 1a. col	umn (	a)) held as				
		designated or quasi-endowment	,	•	3,	,	,,				
b		anent endowment <b>-</b>									
c	Temp	orarıly restricted endowment ►	- h l d l d 0 0 0/								
За	A re th	ercentages on lines 2a, 2b, and 2c s nere endowment funds not in the pos ization by		ızatıon	that are h	neld ar	nd admınıs	tered	for the	Yes	No
	<b>(i)</b> un	related organizations					•			a(i)	140
	If"Ye	lated organizations	ations listed as requi	red on S	Schedule	R? .			<u> </u>	3b	<u> </u>
4 Pari		Land, Buildings, and Equip		.nuowili	ieni iunus	•					
		Complete if the organization a  Description of property			90, Part (a)		ine 11a.S (b)	1	Accumulated		ok value
					(investme		(othe		(c) depreciation		
<b>1</b> a L	and			$\cdot$				433,970	1		433,970
b E	Buildin	gs			1	44,308	3,	869,603	1,380,07	72	2,633,839
		old improvements		·  _			1	297,315	+		96,905
		nent		·  _				429,211	358,10	02	71,109
<b>e</b> (	ther			.1			1		I	1	

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

3,235,823

See Form 990, Part X, line 12.			
(a) Description of security or category (including name of security)		<b>(b)</b> Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
(1)Financial derivatives			
(2)Closely-held equity interests (3)Other			
(A) CHARLES SCHWAB MUTUAL FUND		407,219	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	►	407,219	
Part VIII Investments—Program Related.  Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11c. <sub>See</sub>	Form 990, Part X, line 13.
(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year market value
			Cost of end-of-year market value
Total (Column (h) must equal Form 000, Part V col (P) line 12	<b>P</b>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. Complete if the organization	· L	Form 990, Part IV, line 11	
(a) Descr	ription		(b) Book value
Total (Column (h) must equal Form 990, Part V, col (R) line 1	(5)		
			► art IV, line 11e or 11f.
Part X Other Liabilities. Complete if the organise See Form 990, Part X, line 25.	anızatıon answere	·	
Part X Other Liabilities. Complete if the organise See Form 990, Part X, line 25.		·	
Part X Other Liabilities. Complete if the organise See Form 990, Part X, line 25.  1. (a) Description of liability	(b) Book valu	·	
Part X Other Liabilities. Complete if the organise See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	(b) Book valu	2	
Part X Other Liabilities. Complete if the organise See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	(b) Book valu	117	
Part X Other Liabilities. Complete if the organise See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	(b) Book valu	117	
Part X Other Liabilities. Complete if the organise See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	(b) Book valu	117	
Part X Other Liabilities. Complete if the organise See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	(b) Book valu	117	
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Part X Other Liabilities. Complete if the organise See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	(b) Book valu	117	
See Form 990, Part X, line 25.	(b) Book valu	117	
Part X Other Liabilities. Complete if the organise See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	(b) Book valu	117	
Part X Other Liabilities. Complete if the organise See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	(b) Book valu	117	
Part X Other Liabilities. Complete if the organise See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes  STATE INCOME TAX	(b) Book valu	117	

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue   Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	2,476,700
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments   2a   -8,052		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	-8,052
3	Subtract line <b>2e</b> from line <b>1</b>	3	2,484,752
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	-4,471
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	2,480,281
Part	Reconciliation of Expenses per Audited Financial Statements With Expense Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s per	Return.
1	Total expenses and losses per audited financial statements	1	2,233,318
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	4,471
3	Subtract line <b>2e</b> from line <b>1</b>	3	2,228,847
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	o
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18 )	5	2,228,847

#### 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
PART X, LINE 2	THE ORGANIZATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAX UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE THEREFORE, ONLY INCOME FROM BUSINESS UNRELATED TO THE ORGANIZATION'S CHARITABLE PURPOSE IS SUBJECT TO FEDERAL OR STATE INCOME TAX THE ORGANIZATION FOLLOWS THE ACCOUNTING GUIDANCE FOR UNCERTAINTY IN INCOME TAXES USING THE PROVISIONS OF FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ASC 740, INCOME TAXES USING THAT GUIDANCE, TAX POSITIONS INITIALLY NEED TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS WHEN IT IS MORE-LIKELY-THAN-NOT THE POSITION WILL BE SUSTAINED UPON EXAMINATION BY THE TAX AUTHORITIES AS OF DECEMBER 31, 2015, THE ORGANIZATION HAD NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS ADDITIONALLY, THE ORGANIZATION HAD NO INTEREST AND PENALTIES RELATED TO INCOME TAXES WITH FEW EXCEPTIONS, THE ORGANIZATION IS NO LONGER SUBJECT TO US FEDERAL, STATE, AND LOCAL INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE 2012
PART XI, LINE 4B - OTHER ADJUSTMENTS	LOSS ON SALE OF FIXED ASSETS -4,471
PART XII, LINE 2D - OTHER ADJUSTMENTS	LOSS ON SALE OF FIXED ASSETS 4,471

Part XIII Supplemental Info	Part XIII Supplemental Information (continued)				
Return Reference	Explanation				

Schedule D (Form 990) 2015

DLN: 93493210010316

OMB No 1545-0047

Open to Public Inspection

#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

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

Name of the organization **Employer identification number** SPACE COAST ASSOCIATION OF REALTORS INC 23-1250368

990 Schedule O, Supplemental Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ASSOCIATION HAS MEMBERS
FORM 990, PART VI, SECTION A, LINE 7A	AN ANNUAL ELECTION IS HELD EVERY SEPTEMBER CANDIDATES FOR THE BOARD SUBMIT A RESUME WHICH IS POSTED WITH THE BALLOT MEMBERS VOTE ELECTRONICALLY
FORM 990, PART VI, SECTION A, LINE 7B	RECOMMENDATIONS OF THE BOARD THAT ARE SUBJECT TO MEMBERSHIP APPROVAL ARE SUBMITTED TO THE MEMBERSHIP, CLEARLY STATING WHAT THE MEMBERS ARE VOTING ON EACH MEMBER IS ENTITLED TO ONE VOTE A QUORUM OF 10% IS REQUIRED TO CONDUCT THE VOTE UNLESS OTHERWISE STATED IN THE BYL AWS, A SIMPLE MAJORITY OF THE VOTES CAST IS REQUIRED FOR THE RECOMMENDATION TO BE APPROVED
FORM 990, PART VI, SECTION B, LINE 11	THE EXECUTIVE OFFICER RECEIVES THE FORM 990 FROM THE OUTSIDE ACCOUNTING FIRM, REVIEWS THE INFORMATION AND SIGNS THE FORM GIVING THE TAX RETURN PREPARER THE AUTHORIZATION TO FILE TH E TAX RETURN ELECTRONICALLY A COPY OF THE FORM 990 IS KEPT IN THE OFFICE FOR REVIEW
FORM 990, PART VI, SECTION B, LINE 12C	AT THE BEGINNING OF EACH BOARD OF DIRECTORS' MEETING, THE PRESIDENT READS A CONFLICT OF IN TEREST STATEMENT AT THAT TIME EACH DIRECTOR WITH A KNOWN CONFLICT WOULD DISCLOSE THAT CON FLICT AND THE DIRECTORS WOULD VOTE WHETHER IT IS AN ACTUAL CONFLICT OR NOT IF IT IS DETER MINED TO BE A CONFLICT OF INTEREST, THAT DIRECTOR WOULD NOT PARTICIPATE IN ANY DISCUSSION RELATIVE TO THE CONFLICT
FORM 990, PART VI, SECTION B, LINE 15	EVERY THREE YEARS THE BOARD OF DIRECTORS REVIEWS THE EMPLOYMENT CONTRACT OF THE CEO DURIN  G THAT PROCESS THE SALARY OF THE CEO IS REVIEWED AND BASED ON HISTORICAL JOB PERFORMANCE A  ND SALARY STATISTICS FROM THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES AND/OR SALARY STA  TISTICS FROM THE NATIONAL ASSOCIATION OF REALTORS AND/OR FLORIDA ASSOCIATION OF REALTORS  ON AN ANNUAL BASIS THE BUDGET AND FINANCE COMMITTEE RECOMMENDS TO THE BOARD OF DIRECTORS C  OST OF LIVING ADJUSTMENTS TO THE CEO SALARY PURSUANT TO THE EMPLOYMENT CONTRACT ALL SALAR  Y ADJUSTMENTS ARE REVIEWED AND APPROVED BY THE BUDGET AND FINANCE COMMITTEE AND THE BOARD  OF DIRECTORS THE CEO REVIEWS OFFICER AND KEY EMPLOYEE PERFORMANCE ANNUALLY
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS ARE ON THE ASSOCIATION'S WEBSITE. THE PREVIOUS 3 YEARS' IRS FORM 9 90 ARE AVAILABLE IN A BINDER FOR INSPECTION UPON REQUEST. PUBLIC INSPECTION OF OTHER FINAN CIAL STATEMENTS ARE AVAILABLE BY WRITTEN REQUEST OF THE PARTY, SUBJECT TO ADVICE OF CPA AN D ATTORNEY