

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2020

Department of the Treasury
Internal Revenue Service

▶ 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.

Open to Public Inspection

A For the **2020** calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization EMERALD COAST ASSOCIATION OF REALTORS, INC.		D Employer identification number 23-7420154
	Doing business as		E Telephone number 850-243-6145
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 4,134,583.
	10 HOLLYWOOD BLVD SE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code FORT WALTON BEACH, FL 32548		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
F Name and address of principal officer: KEITH DEAN SAME AS C ABOVE		If "No," attach a list. See instructions	
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (6) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ EMERALDCOASTREALTORS.COM			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1964	M State of legal domicile: FL

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROVIDING MULTIPLE LISTING SERVICE, EDUCATION AND SUPPORT TO PROFESSIONAL MEMBERS IN THE LOCAL		
	2 Check this box <input type="checkbox"/> 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	20
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	20
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	17
	6 Total number of volunteers (estimate if necessary)	6	150
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,962,428.	3,332,153.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	61,794.	86,350.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	117,393.	207,012.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,141,615.	3,625,515.
	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 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	1,166,620.	1,165,126.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,768,686.	1,773,336.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,935,306.	2,938,462.
19 Revenue less expenses. Subtract line 18 from line 12	206,309.	687,053.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	4,469,018.	5,123,121.
	22 Net assets or fund balances. Subtract line 21 from line 20	1,163,247.	1,123,229.
		3,305,771.	3,999,892.

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	Signature of officer		Date		
	KEITH DEAN, CEO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	TIMOTHY FULMER	TIMOTHY FULMER	11/12/21	<input type="checkbox"/>	P00173708
Firm's name ▶ CARR, RIGGS & INGRAM, LLC			Firm's EIN ▶ 72-1396621		
Firm's address ▶ 500 GRAND BOULEVARD, SUITE 210 MIRAMAR BEACH, FL 32550			Phone no. 850.837.3141		

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: TO PROVIDE MEMBERS WITH RESOURCES TO ACHIEVE AN EXEMPLARY LEVEL OF PROFESSIONALISM, INTEGRITY, AND ETHICAL BUSINESS PRACTICE, WHILE ENRICHING THE QUALITY OF LIFE IN THE COMMUNITY.

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

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

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 \$ 1,421,907. including grants of \$) (Revenue \$ 3,418,503.) MLS, EDUCATION, OTHER MEMBER SERVICES

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

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

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,421,907.

EMERALD COAST ASSOCIATION OF REALTORS, INC.

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

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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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	X
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	X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	26	X
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? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
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? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. 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? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	X

Note: All Form 990 filers are required to complete Schedule O

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	26
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	X

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

		Yes	No
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 17		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X	X	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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		X
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b		X
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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
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?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
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		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f		X
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?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
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? 13a		
Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 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		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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? 15		X
If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16		X
If "Yes," complete Form 4720, Schedule O.			

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on 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 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 on Schedule O.		
	1a	20	
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b	20	
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
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?	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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 on Schedule O		X

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?		X
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?		X
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
12c			
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	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?		X
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 **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 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 on Schedule O)
- 19** Describe on 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 **THE ORGANIZATION - 850-243-6145**
10 HOLLYWOOD BLVD, FORT WALTON BEACH, FL 32548

EMERALD COAST ASSOCIATION OF REALTORS, INC.

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. 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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KITTY TAYLOR PRESIDENT	3.00	X		X			0.	0.	0.	
(2) TOM MIESEN PRESIDENT ELECT	1.00	X		X			0.	0.	0.	
(3) MICHELE BAILEY VICE PRESIDENT	1.00	X		X			0.	0.	0.	
(4) TANNER PEACOCK TREASURER	1.00	X		X			0.	0.	0.	
(5) MELINDA VAZQUEZ ASSISTANT TREASURER	1.00	X		X			0.	0.	0.	
(6) NINA MCCASLIN-HORN IMMEDIATE PAST PRESIDENT	1.00	X					0.	0.	0.	
(7) AMANDA GRANDY DIRECTOR	1.00	X					0.	0.	0.	
(8) BEN ACOCK DIRECTOR	1.00	X					0.	0.	0.	
(9) BRYAN MCAILEY DIRECTOR	1.00	X					0.	0.	0.	
(10) BRYAN WHITEHEAD DIRECTOR	1.00	X					0.	0.	0.	
(11) DAWN JOHNSON DIRECTOR	1.00	X					0.	0.	0.	
(12) DENEEN SUFNAR DIRECTOR	1.00	X					0.	0.	0.	
(13) JOE CAPELOTTI DIRECTOR	1.00	X					0.	0.	0.	
(14) KATHIE O'DELL DIRECTOR	1.00	X					0.	0.	0.	
(15) KATHY WILHELM DIRECTOR	1.00	X					0.	0.	0.	
(16) PATTI MANKOFF DIRECTOR	1.00	X					0.	0.	0.	
(17) PAULA SHERMAN DIRECTOR	1.00	X					0.	0.	0.	

EMERALD COAST ASSOCIATION OF REALTORS, INC.

Form 990 (2020)

23-7420154 Page **9**

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	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					
	g Noncash contributions included in lines 1a-1f	1g \$					
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a MEMBER SERVICE	Business Code 561000	1,755,474.	1,755,474.			
	b MEMBER DUES	561000	1,285,308.	1,285,308.			
	c OTHER PROGRAM SERVICE	561000	200,059.	200,059.			
	d COMMITTEES	561000	52,166.	52,166.			
	e INFORMATION SYSTEM	561000	39,146.	39,146.			
	f All other program service revenue						
	g Total. Add lines 2a-2f		3,332,153.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		44,497.	44,497.			
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	530,698.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	488,845.				
	c Gain or (loss)	7c	41,853.				
d Net gain or (loss)		41,853.	41,853.				
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a		227,235.				
			20,223.				
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory		207,012.			207,012.		
Miscellaneous Revenue	11 a _____	Business Code					
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			3,625,515.	3,418,503.	0.	207,012.	

EMERALD COAST ASSOCIATION OF REALTORS, INC.

Form 990 (2020)

23-7420154 Page **10**

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 ...				
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	223,496.	96,027.	127,469.	
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	704,103.	302,524.	401,579.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	41,056.	17,640.	23,416.	
9 Other employee benefits	129,130.	55,482.	73,648.	
10 Payroll taxes	67,341.	28,934.	38,407.	
11 Fees for services (nonemployees):				
a Management				
b Legal	7,760.		7,760.	
c Accounting	109,514.		109,514.	
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 Sch O.)				
12 Advertising and promotion				
13 Office expenses	112,386.		112,386.	
14 Information technology	263,489.	263,489.		
15 Royalties				
16 Occupancy	207,075.		207,075.	
17 Travel	57,739.	45,706.	12,033.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	131,525.		131,525.	
23 Insurance	14,989.		14,989.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MLS EXPENSE	317,135.	317,135.		
b COMMITTEES	144,648.	144,648.		
c PROFESSIONAL DEVELOPMEN	119,593.	119,593.		
d CREDIT CARD FEES	72,377.		72,377.	
e All other expenses	215,106.	30,729.	184,377.	
25 Total functional expenses. Add lines 1 through 24e	2,938,462.	1,421,907.	1,516,555.	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)

EMERALD COAST ASSOCIATION OF REALTORS, INC.

Form 990 (2020)

23-7420154 Page **11**

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,649,267.	1	2,048,728.
	2 Savings and temporary cash investments	1,519,142.	2	1,860,909.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	28,304.	4	78,827.
	5 Loans and other receivables from 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	9,223.	9	2,050.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	2,702,146.		
	b Less: accumulated depreciation	1,576,556.		
	11 Investments - publicly traded securities	1,257,115.	10c	1,125,590.
	12 Investments - other securities. See Part IV, line 11		11	
	13 Investments - program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	5,967.	14	7,017.
16 Total assets. Add lines 1 through 15 (must equal line 33)	4,469,018.	15	5,123,121.	
Liabilities	17 Accounts payable and accrued expenses	102,156.	16	103,462.
	18 Grants payable		17	
	19 Deferred revenue	728,268.	18	796,252.
	20 Tax-exempt bond liabilities		19	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	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		21	
	23 Secured mortgages and notes payable to unrelated third parties		22	
	24 Unsecured notes and loans payable to unrelated third parties		23	
	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	332,823.	24	223,515.
	26 Total liabilities. Add lines 17 through 25	1,163,247.	25	1,123,229.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	3,294,065.	26	3,999,892.
	28 Net assets with donor restrictions	11,706.	27	0.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		28	
	30 Paid-in or capital surplus, or land, building, or equipment fund		29	
	31 Retained earnings, endowment, accumulated income, or other funds		30	
	32 Total net assets or fund balances	3,305,771.	31	3,999,892.
	33 Total liabilities and net assets/fund balances	4,469,018.	32	5,123,121.

Form **990** (2020)

EMERALD COAST ASSOCIATION OF REALTORS, INC.

Part XI Reconciliation 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	3,625,515.
2 Total expenses (must equal Part IX, column (A), line 25)	2	2,938,462.
3 Revenue less expenses. Subtract line 2 from line 1	3	687,053.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,305,771.
5 Net unrealized gains (losses) on investments	5	38,940.
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 on Schedule O)	9	-31,872.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	3,999,892.

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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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		X
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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b Were the organization's financial statements audited by an independent accountant?	2b	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> 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	X	
If the organization changed either its oversight process or selection process during the tax year, explain on 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		X
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 on Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2020

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

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.

Name of organization EMERALD COAST ASSOCIATION OF REALTORS, INC.	Employer identification number 23-7420154
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Part 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 Political campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities _____

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

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter 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 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 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) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. **Schedule C (Form 990 or 990-EZ) 2020**

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EMERALD COAST ASSOCIATION OF

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 (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	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.		
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.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

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)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(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					

EMERALD COAST ASSOCIATION OF

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

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	X	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		X

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a Current year	2a
b Carryover from last year	2b
c Total	2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4
5 Taxable amount of lobbying and political expenditures (See instructions)	5

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D
(Form 990)

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

2020

Open to Public Inspection

Name of the organization EMERALD COAST ASSOCIATION OF REALTORS, INC. **Employer identification number** 23-7420154

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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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 (for example, recreation or education) Preservation of a 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 Tax 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?

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)?

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 FASB 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 FASB 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 FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2020

EMERALD COAST ASSOCIATION OF REALTORS, INC.

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 make significant use of its collection items (check all that apply):
- | | |
|---|--|
| a <input type="checkbox"/> Public exhibition | d <input type="checkbox"/> Loan or exchange program |
| b <input type="checkbox"/> Scholarly research | e <input type="checkbox"/> Other _____ |
| c <input type="checkbox"/> Preservation for future generations | |
- 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
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| 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 on 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** Term 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 line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 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		157,928.		157,928.
b Buildings		1,361,757.	558,392.	803,365.
c Leasehold improvements				
d Equipment				
e Other		1,182,461.	1,018,164.	164,297.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,125,590.

EMERALD COAST ASSOCIATION OF REALTORS, INC.

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. (Col. (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. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(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	
(2) OTHER LIABILITIES	169,040.
(3) ACCRUED LIABILITIES	52,508.
(4) CAPITAL LEASE OBLIGATION	1,967.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	223,515.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

EMERALD COAST ASSOCIATION OF REALTORS, INC.

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	3,684,678.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	38,940.	
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	38,940.	
3	Subtract line 2e from line 1	3	3,645,738.	
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	-20,223.	
c	Add lines 4a and 4b	4c	-20,223.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,625,515.	

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	2,958,685.
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	0.	
3	Subtract line 2e from line 1	3	2,958,685.	
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	-20,223.	
c	Add lines 4a and 4b	4c	-20,223.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,938,462.	

Part XIII Supplemental Information.

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

PART X, LINE 2:

UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE, ECAR IS EXEMPT FROM TAXES ON INCOME OTHER THAN UNRELATED BUSINESS INCOME. UNDER THESE PROVISIONS, NO TAX IS PAID ON INCOME RECEIVED FROM ITS MEMBERS. ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS PROVIDED IN THE ACCOMPANYING FINANCIAL STATEMENTS. ECAR ANNUALLY FILES FORM 990 AS REQUIRED FOR NOTFORPROFIT ORGANIZATIONS.

ECAR UTILIZES THE ACCOUNTING REQUIREMENTS ASSOCIATED WITH 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

Part XIII Supplemental Information (continued)

MORE-LIKELY-THAN-NOT THE POSITIONS WILL BE SUSTAINED UPON EXAMINATION BY THE TAX AUTHORITIES.

IT ALSO PROVIDES GUIDANCE FOR DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE AND TRANSITION. AS OF DECEMBER 31, 2020, ECAR HAS NO UNCERTAIN TAX PROVISIONS THAT QUALIFY FOR RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. ECAR BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS PRIOR TO 2017.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

COST OF MERCHANDISE SOLD INCLUDED IN REVENUE -20,223.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

COST OF MERCHANDISE SOLD INCLUDED IN REVENUE -20,223.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2020

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization **EMERALD COAST ASSOCIATION OF REALTORS, INC.**

Employer identification number
23-7420154

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

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

Schedule J (Form 990) 2020

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Multiple horizontal lines for supplemental information.

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

2020

Open to Public
Inspection

Name of the organization EMERALD COAST ASSOCIATION OF REALTORS, INC.	Employer identification number 23-7420154
--	---

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

REAL ESTATE INDUSTRY.

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION HAS REALTOR MEMBERS AND AFFILIATE MEMBERS WHO PARTICIPANT
IN THE EDUCATION PROGRAMS, MULTIPLE LISTING SERVICE AND SUPRA KEY LOCKBOX
SYSTEM AND EVENTS. NO STOCKHOLDERS.

FORM 990, PART VI, SECTION A, LINE 7A:

MORE THAN 3,000 ASSOCIATION'S REALTOR MEMBERS ARE ALL ENCOURAGED TO VOTE
AND PARTICIPATE IN OUR BOARD'S ELECTION PROCESS. MEMBERS ARE INVITED
THROUGHOUT THE PROCESS TO EXAMINE THE INFORMATION ABOUT THE CANDIDATES AND
TO VOTE ONLINE. ALL OF THE INFORMATION ABOUT MEMBERS VYING FOR OPEN
POSITIONS IS POSTED ON OUR WEBSITE AND DISTRIBUTED TO OUR TOTAL MEMBERSHIP.

FORM 990, PART VI, SECTION A, LINE 7B:

ANY BY-LAW CHANGES MUST BE APPROVED BY MEMBERSHIP.

FORM 990, PART VI, SECTION B, LINE 11B:

THE CEO WILL REVIEW AND APPROVE THE FORM 990 BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

MEMBERS OF THE GOVERNING BODY AND WORK GROUPS MONITOR AND ARE ENCOURAGED TO
DISCLOSE ANY CONFLICTS AT EVERY MEETING. A CONFLICT INTEREST POLICY
ACKNOWLEDGEMENT FORM IS REQUIRED. THE MEMBERS OF THESE GROUPS ARE REQUIRED
TO SIGN.

Name of the organization EMERALD COAST ASSOCIATION OF REALTORS, INC.	Employer identification number 23-7420154
---	--

FORM 990, PART VI, SECTION B, LINE 15:

THE ORGANIZATION OBTAINS AND REVIEWS COMPREHENSIVE BENCHMARK DATA ON SALARIES AND BENEFITS FOR ALL EMPLOYEES PRIOR TO MAKING COMPENSATION AND BENEFIT DECISION.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MADE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE GO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

PRIOR YEAR AUDIT ADJUSTMENT	-31,872.
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FORM 990, PART XII, LINE 2C:

THE ORGANIZATION DID NOT CHANGE EITHER ITS OVERSIGHT PROCESS OR SELECTION PROCESS DURING THE TAX YEAR.

2021 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - EMERALD COAST ASSOCIATION OF REALTORS, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	BUILDINGS								
11	BUILDING	010177	SL	40.00	83,264.		83,264.	81,184.	0.
44	CONSTRUCTION I	021503	SL	40.00	9,701.		9,701.	4,127.	243.
45	CONSTRUCTION I	123102	SL	40.00	15,000.		15,000.	6,750.	375.
46	CONSTRUCTION I	110402	SL	40.00	2,000.		2,000.	908.	50.
47	CONSTRUCTION I	112902	SL	40.00	1,450.		1,450.	680.	36.
276	IMPROVEMENTS	021503	SL	40.00	20,054.		20,054.	8,562.	501.
277	NEW BUILDING	120304	SL	40.00	907,341.		907,341.	364,827.	22,684.
278	ARCHETECT FEES NEW BUILDING	120604	SL	40.00	79,420.		79,420.	31,938.	1,986.
284	BUILDING ADDITION	012005	SL	40.00	100,227.		100,227.	39,885.	2,506.
285	BUILDING	012705	SL	40.00	2,123.		2,123.	844.	53.
286	BUILDING	013105	SL	40.00	1,827.		1,827.	730.	46.
287	BUILDING	020405	SL	40.00	1,250.		1,250.	495.	31.
290	BUILDING	021005	SL	40.00	450.		450.	177.	11.
291	BUILDING	021705	SL	40.00	697.		697.	272.	17.
295	BUILDING	062105	SL	40.00	111.		111.	45.	3.
298	BUILDING	092605	SL	40.00	513.		513.	197.	13.
300	RAIN GUTTERS	112805	SL	40.00	2,725.		2,725.	1,026.	68.
301	BUILDING	113005	SL	40.00	490.		490.	183.	12.
302	BUILDING	120805	SL	40.00	449.		449.	167.	11.
303	BUILDING	122005	SL	40.00	360.		360.	135.	9.
304	BUILDING	041805	SL	40.00	150.		150.	61.	4.
305	BUILDING	042105	SL	40.00	250.		250.	96.	6.
316	ADDTL ITEMS FROM CAP EXPEND GL	123105	SL	40.00	1,407.		1,407.	526.	35.
317	KITCHEN CABINETS	020806	SL	40.00	2,878.		2,878.	1,056.	72.
318	WIRING IN THE EDUCATIONAL BLDG	050906	SL	40.00	3,947.		3,947.	1,475.	99.
319	GUTTERS	073007	SL	40.00	1,500.		1,500.	508.	38.
320	KITCHEN CABINETS	062110	SL	40.00	4,262.		4,262.	1,123.	107.
	KATHY SUBLET EDUCATION BUIDLING								
321	REMODEL	062912	SL	40.00	13,600.		13,600.	2,890.	340.
434	FWB RENOVATIONS	042717	SL	40.00	1,500.		1,500.	139.	38.
	FWB RENOVATIONS: SUBDIVISION OF								
435	OFFICES	101317	SL	40.00	6,000.		6,000.	488.	150.
437	FWB RENOVATIONS:CABINETS	120417	SL	40.00	5,100.		5,100.	395.	128.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2021 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

EMERALD COAST ASSOCIATION OF REALTORS, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
438	FWB RENOVATIONS: FLOORING	121217	SL	40.00	19,465.		19,465.	1,502.	487.
439	FWB RENOVATIONS: CABINETS	123117	SL	40.00	5,100.		5,100.	384.	128.
446	FWB RENOVATIONS	041118	SL	40.00	67,146.		67,146.	4,617.	1,679.
	* 990 PAGE 10 TOTAL BUILDINGS				1361757.		1361757.	558,392.	31,966.
	FURNITURE & FIXTURES								
3	CONFRENCE FURNITURE	103198	SL	7.00	1,319.		1,319.	1,319.	0.
6	CLCD INFOCUS	041896	SL	7.00	6,599.		6,599.	6,599.	0.
7	SOUND SYSTEM	092498	SL	7.00	902.		902.	902.	0.
14	HEAT PUMP	040100	SL	7.00	2,228.		2,228.	2,228.	0.
16	REFRIGERATOR	060700	SL	7.00	739.		739.	739.	0.
26	NETWORK SERV	080201	SL	5.00	7,912.		7,912.	7,912.	0.
28	DISHWASHER	122701	SL	7.00	324.		324.	324.	0.
30	BARRYS OFFICE	071602	SL	7.00	5,462.		5,462.	5,462.	0.
31	PAULAS OFFICE	110802	SL	7.00	1,732.		1,732.	1,732.	0.
32	PAT'S OFFICE F	110802	SL	7.00	826.		826.	826.	0.
33	JIM'S OFFICE FU	111902	SL	7.00	788.		788.	788.	0.
34	SUSANS OFFICE	111902	SL	7.00	1,187.		1,187.	1,187.	0.
35	PEALIE & SHE	112102	SL	7.00	1,132.		1,132.	1,132.	0.
36	GEOFF'S OFFICE	112602	SL	7.00	1,367.		1,367.	1,367.	0.
38	FILING CABINET F	122602	SL	7.00	709.		709.	709.	0.
66	42" LOCKING FILE CABINET	062002	SL	7.00	540.		540.	540.	0.
68	FILING CABINET SUSAN	122203	SL	7.00	578.		578.	578.	0.
74	OFFICE CHAIR	030601	SL	7.00	749.		749.	749.	0.
81	DESKS (2)	010203	SL	7.00	2,827.		2,827.	2,827.	0.
95	FLOOR SAFE	063087	SL	15.00	596.		596.	596.	0.
100	ALARM SYSTEM	021403	SL	5.00	1,000.		1,000.	1,000.	0.
101	STACK CHAIRS	052103	SL	7.00	966.		966.	966.	0.
102	PATS NEW DESK	010203	SL	5.00	1,000.		1,000.	1,000.	0.
104	FOLDING TABLES	061903	SL	7.00	815.		815.	815.	0.
107	COUNTER TOP	120604	SL	7.00	85.		85.	85.	0.
108	TV WALL MOUNT	120604	SL	7.00	89.		89.	89.	0.
109	SPLASH KIT	120604	SL	7.00	215.		215.	215.	0.
110	CONFRENCE TABLE	120604	SL	7.00	417.		417.	417.	0.
111	CABINETS CC	120604	SL	7.00	1,865.		1,865.	1,865.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2021 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

EMERALD COAST ASSOCIATION OF REALTORS, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
112	FURNITURE	120604	SL	7.00	4,500.		4,500.	4,500.	0.
113	SOFA, TABLE	120604	SL	7.00	5,100.		5,100.	5,100.	0.
115	CONFRENCE FURNITURE	120604	SL	7.00	9,500.		9,500.	9,500.	0.
116	FURNITURE F	120604	SL	7.00	9,839.		9,839.	9,839.	0.
119	DATA LINE	120604	SL	7.00	91.		91.	91.	0.
120	DATA LINE	120604	SL	7.00	91.		91.	91.	0.
121	DATA LINE	120604	SL	7.00	91.		91.	91.	0.
122	ELECTRICAL ?	120604	SL	7.00	99.		99.	99.	0.
123	DATA LINE	120604	SL	7.00	102.		102.	102.	0.
124	DATA LINE	120604	SL	7.00	102.		102.	102.	0.
125	DATA LINE	120604	SL	7.00	102.		102.	102.	0.
126	DATA LINE	120604	SL	7.00	106.		106.	106.	0.
127	LINE FOR CAM	120604	SL	7.00	107.		107.	107.	0.
128	LINE FOR CAM	120604	SL	7.00	142.		142.	142.	0.
129	INSTALLATION	120604	SL	7.00	199.		199.	199.	0.
130	BUILDING CH	120604	SL	7.00	250.		250.	250.	0.
169	5 X 8 APPLIQUE CUSTOM FLAG	010705	SL	5.00	300.		300.	300.	0.
170	TV FOR BREAK ROOM	010705	SL	5.00	458.		458.	458.	0.
171	TV FOR BARRY'S OFFICE	010705	SL	5.00	1,044.		1,044.	1,044.	0.
173	MONITOR FOR BARRY	011005	SL	5.00	428.		428.	428.	0.
175	TRAINING LAP TOP COMPUTER 2 OF 2	011005	SL	5.00	1,304.		1,304.	1,304.	0.
176	TRAINING LAP TOP 1 OF 2	011005	SL	5.00	1,495.		1,495.	1,495.	0.
178	FLOOR MATS @ 7	011105	SL	5.00	530.		530.	530.	0.
179	SECURITY SYSTEM AND ACCESS CONTROL	011205	SL	7.00	6,134.		6,134.	6,134.	0.
180	PICTURES AND POTTERY AND LAMP	011405	SL	7.00	969.		969.	969.	0.
182	BRUSHED SILVER LIDED BOX	011705	SL	7.00	25.		25.	25.	0.
183	STONE/METAL PLANT CONTAINER	011705	SL	7.00	29.		29.	29.	0.
184	BLACK & GOLD VASE	011705	SL	7.00	34.		34.	34.	0.
185	SMALL CHAIRSIDE TABLE	011705	SL	7.00	158.		158.	158.	0.
187	LARGE METAL/TILE MOSIAC	011705	SL	7.00	168.		168.	168.	0.
188	COAT RACK (FRONT ROOM)	011705	SL	7.00	190.		190.	190.	0.
189	BUTLERS TRAY TABLE	011705	SL	7.00	306.		306.	306.	0.
190	BLINDS(FRONT MEETING AND BARRY OFFICE)	011705	SL	7.00	550.		550.	550.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2021 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

EMERALD COAST ASSOCIATION OF REALTORS, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
191	2 BIRD PRINTS FRAMED (BOD ROOM)	011705	SL	7.00	742.		742.	742.	0.
192	1 HIGH BACK TYE CHAIR	011905	SL	7.00	210.		210.	210.	0.
193	4 TARA HIGH BACK CHAIRS	011905	SL	7.00	1,499.		1,499.	1,499.	0.
194	10 SEQUEL HIGHBACK CHAIRS-BOD ROOM	012105	SL	7.00	4,335.		4,335.	4,335.	0.
195	10 GUEST CHAIRS (BOD ROOM)	012105	SL	7.00	6,243.		6,243.	6,243.	0.
197	2 HIGH BACK BLACK STOOL FOR WALKIN	012705	SL	7.00	316.		316.	316.	0.
198	24 LNE INSTALL FOR LCD SPEAKERPHONE	012705	SL	7.00	2,277.		2,277.	2,277.	0.
199	ROUTER	013105	SL	5.00	172.		172.	172.	0.
200	BELKIN 4 PORT KVM SWITCH	013105	SL	5.00	206.		206.	206.	0.
201	10/10 8 PORT BLADE	013105	SL	5.00	364.		364.	364.	0.
202	HP PROCURVE SWITCH	013105	SL	5.00	1,714.		1,714.	1,714.	0.
203	3 TIER CART	020305	SL	7.00	112.		112.	112.	0.
205	DISPLAY RACK	020905	SL	7.00	495.		495.	495.	0.
206	2 9 POCKET DISPLY RACK	020905	SL	7.00	549.		549.	549.	0.
207	WIRELESS HEADPHONE SET	021505	SL	5.00	86.		86.	86.	0.
209	INTERGRADED ELECTRONIC EQUIPMENT ROTATING DISPLAY RACK (EDUCATION	021505	SL	7.00	117,569.		117,569.	117,569.	0.
210	FLIERS)	021805	SL	7.00	495.		495.	495.	0.
211	2ND KIM SYSTEM CONFERENCE TABLE (FRONT MEETING	031505	SL	5.00	1,239.		1,239.	1,239.	0.
212	ROOM)	032505	SL	7.00	2,107.		2,107.	2,107.	0.
213	NEW FRONT DESK	032505	SL	7.00	7,926.		7,926.	7,926.	0.
218	USB ADAPTER	041405	SL	5.00	32.		32.	32.	0.
219	PORTABLE 13" TV	042005	SL	5.00	63.		63.	63.	0.
221	WALL FOUNTAIN	042005	SL	15.00	24,523.		24,523.	24,523.	0.
224	3 UPC (2 WALK IN AND PEARLIE)	042905	SL	5.00	210.		210.	210.	0.
228	2 PC FOR WALK-IN STATIONS	042905	SL	5.00	1,200.		1,200.	1,200.	0.
229	GLASS COVERS FOR ALL DESKS	042905	SL	7.00	2,807.		2,807.	2,807.	0.
230	LEGAL TRAY FOR COPIER SQUARE RED, ORANGE GREEN BANANA	043005	SL	5.00	133.		133.	133.	0.
231	PRINT	050205	SL	7.00	187.		187.	187.	0.
232	SMALL PALM TREE SCENE	050205	SL	7.00	250.		250.	250.	0.
233	GREEN & RUST ABSTRACT (SUSAN'S DESK)	050205	SL	7.00	271.		271.	271.	0.
234	ABSTRACT W/YELLOW & RED (BREAK ROOM)	050205	SL	7.00	293.		293.	293.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2021 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

EMERALD COAST ASSOCIATION OF REALTORS, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
235	LARGE PALM TREE SCENE	050205	SL	7.00	293.		293.	293.	0.
236	2 BRIGHT GREEN PALM PRINTS	050205	SL	7.00	373.		373.	373.	0.
238	2 HAND COLOR SHELL PRINTS (JIM'S DESK)	050205	SL	7.00	585.		585.	585.	0.
239	2 LARGE GOLD, BEIGE, BLACK FLORALS	050205	SL	7.00	628.		628.	628.	0.
240	PICTURE OVER PAULA'S DESK	051905	SL	7.00	190.		190.	190.	0.
244	LINKSYS AND NETGEAR	053105	SL	5.00	191.		191.	191.	0.
245	CUSTOM MADE FRAMES	060405	SL	7.00	679.		679.	679.	0.
246	VANITY LIGHTS AND MOTION LIGHT INSTALLED	061405	SL	15.00	237.		237.	237.	0.
247	WASTEBASKET	061505	SL	5.00	105.		105.	105.	0.
248	FAX MACHINE	061505	SL	5.00	529.		529.	529.	0.
252	TABLE FOR CEO OFFICE	063005	SL	7.00	302.		302.	302.	0.
253	SPARE FLAGS FOR OUTSIDE POLES	070105	SL	5.00	315.		315.	315.	0.
254	LINKSYS WIRELESS ACCESS POINT	070605	SL	5.00	70.		70.	70.	0.
259	AVOCENT WIRELESS VGA EXTENDER	073105	SL	5.00	590.		590.	590.	0.
262	SINK TOP FOR BOD MEETING ROOM	092005	SL	15.00	1,972.		1,972.	1,969.	0.
263	SERVER RACK	093005	SL	5.00	318.		318.	318.	0.
264	UPS FOR AUDITORIUM AUDIO	093005	SL	5.00	685.		685.	685.	0.
269	WIRELESS REMOTE KB/MOUSE AUDITORIUM	103105	SL	5.00	170.		170.	170.	0.
270	RON'S CHAIR	111605	SL	7.00	438.		438.	438.	0.
271	RON'S DESK FURNITURE	111605	SL	7.00	1,520.		1,520.	1,520.	0.
275	TRACK LIGHTING FOR EDUCATION ROOM	123105	SL	7.00	53.		53.	53.	0.
279	7 19" LCD MONITORS	123005	SL	5.00	1,995.		1,995.	1,995.	0.
280	ACER LAPTOP	123005	SL	5.00	749.		749.	749.	0.
288	SIGN	020105	SL	7.00	437.		437.	437.	0.
292	STOOL	021805	SL	7.00	158.		158.	158.	0.
294	TABLE CABINETS BOD *BAL	042705	SL	7.00	10,525.		10,525.	10,525.	0.
306	ELECTRONIC EQUIP INSTALL	021505	SL	7.00	7,950.		7,950.	7,950.	0.
307	WALL ART	020805	SL	7.00	438.		438.	438.	0.
308	FRONTPAGE 98 / PUBLISHER	040905	SL	3.00	609.		609.	609.	0.
309	ACROBAT (3)	042905	SL	3.00	579.		579.	579.	0.
310	OFFICE MS SUPERPACK	052005	SL	3.00	522.		522.	522.	0.
311	TREND CLIENT/SERVER SUITE	052505	SL	3.00	769.		769.	769.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2021 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

EMERALD COAST ASSOCIATION OF REALTORS, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
312	FRONTPAGE	062905	SL	3.00	555.		555.	555.	0.
313	ONLINE VOTER SOFTWARE	092905	SL	3.00	2,250.		2,250.	2,250.	0.
314	CITATION CHECKER SOFTWARE	112105	SL	3.00	5,000.		5,000.	5,000.	0.
315	ADOBE 7.0 ASP UPLOAD	123005	SL	3.00	539.		539.	539.	0.
	ADJUSTED FROM AUDITOR TO RETAINED								
322	EARNINGS	123111	SL	.000	-4,262.		-4,262.		0.
325	BROOKTROUT FAXSERVER PLATFORM	030106	SL	7.00	3,270.		3,270.	3,270.	0.
327	VIDEO CAPTURE COMPUTER	033106	SL	5.00	3,299.		3,299.	3,299.	0.
330	VIDEO MIXER	103106	SL	5.00	1,039.		1,039.	1,039.	0.
331	CITRIX SOFTWARE LICENSE	012506	SL	3.00	2,600.		2,600.	2,600.	0.
332	SOFTWARE FOR VISTA MACHINE (RON)	022607	SL	3.00	822.		822.	822.	0.
	OFFICE ULTIMATE, PAINT SHOP PRO,								
333	ACROBAT	031907	SL	3.00	816.		816.	816.	0.
334	QUICKBOOKS UPGRADE	032207	SL	3.00	1,810.		1,810.	1,810.	0.
335	OPAC TRAINING SOFTWARE	043007	SL	3.00	2,774.		2,774.	2,774.	0.
336	PHOTOSHOP	072307	SL	3.00	644.		644.	644.	0.
337	GATEKEEPER REGISTRATIONS	080907	SL	3.00	6,482.		6,482.	6,482.	0.
338	5 RECEIPT SCANNERS	010307	SL	5.00	970.		970.	970.	0.
340	PC FOR GRAPHICS (SCOTT)	013107	SL	5.00	1,682.		1,682.	1,682.	0.
343	CONSULTING FEE FOR VTC	032607	SL	5.00	1,045.		1,045.	1,045.	0.
344	VISTA MACHINES FOR SUSAN AND JIM	050907	SL	5.00	3,231.		3,231.	3,231.	0.
	CALL TRACKING SOFTWARE FOR PHONE								
345	SYSTEM	052907	SL	3.00	1,608.		1,608.	1,608.	0.
347	VTC REGISTRATIONS AND INSTALLATION	062707	SL	5.00	161,477.		161,477.	161,477.	0.
348	OFFICE CHAIR	071007	SL	7.00	979.		979.	979.	0.
349	ULTRIUM TAPES (FOR BACK UPS)	122007	SL	5.00	1,140.		1,140.	1,140.	0.
351	SERVER-EMERALD	082007	SL	7.00	2,457.		2,457.	2,457.	0.
352	TANDBERG TAPE DRIVE	122007	SL	5.00	2,247.		2,247.	2,247.	0.
353	RECESSED EXTERIOR LIGHTING (MAIN)	020108	SL	7.00	940.		940.	940.	0.
354	ACROBAT PRO (GAD)	032008	SL	5.00	159.		159.	159.	0.
355	FLASH/WEB SERVER	040808	SL	5.00	699.		699.	688.	0.
356	REPLACEMENT EXCHANGE SERVER	042608	SL	5.00	2,277.		2,277.	2,277.	0.
357	MID-BACK CHAIR (GAD)	051408	SL	7.00	137.		137.	137.	0.
358	ACROBAT PRO	052708	SL	5.00	159.		159.	159.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2021 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

EMERALD COAST ASSOCIATION OF REALTORS, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
359	HP LASER PRINTER	062008	SL	5.00	338.		338.	338.	0.
360	HP 2015 LASER PRINTER (GAD)	062008	SL	5.00	338.		338.	338.	0.
361	ACER 22" LCD MONITOR (GAD)	062008	SL	5.00	229.		229.	229.	0.
364	HP LASER PRINTER (CIO)	072008	SL	5.00	358.		358.	358.	0.
365	NETGEAR SWITCH GSM7248	092008	SL	5.00	1,081.		1,081.	1,081.	0.
366	NETGEAR SWITCH GSM7224	092008	SL	5.00	592.		592.	592.	0.
367	NETGEAR SWITCH GSM7212	092008	SL	5.00	558.		558.	558.	0.
368	NETGEAR AGM731F/1 FIBER INTERFACE	092008	SL	5.00	256.		256.	256.	0.
369	NETGEAR AGM731F/2 FIBER INTERFACE	092008	SL	5.00	256.		256.	256.	0.
370	NETGEAR AGM731F/3 FIBER INTERFACE	092008	SL	5.00	256.		256.	256.	0.
371	NETGEAR AGM731F/4 FIBER INTERFACE	092008	SL	5.00	256.		256.	256.	0.
372	UPS BATTERY REPLACEMENT KITS	092308	SL	5.00	1,022.		1,022.	1,022.	0.
373	ADOBE ACROBAT	092308	SL	5.00	172.		172.	172.	0.
374	ADOBE ACROBAT	092308	SL	5.00	172.		172.	172.	0.
378	LAWN PUMP	092310	SL	7.00	575.		575.	575.	0.
379	A/C TRANE MAIN CONTROLLER	101210	SL	7.00	1,120.		1,120.	1,120.	0.
381	FUJI SCANNER (CFO)	032010	SL	5.00	521.		521.	521.	0.
382	SERVER-WEBSERVER	082010	SL	5.00	850.		850.	850.	0.
384	LAP TOP (COMMUNICATIONS)	111710	SL	5.00	509.		509.	509.	0.
385	PC COMPUTOR (IT #1)	122010	SL	5.00	659.		659.	659.	0.
386	PC COMPUTOR (IT #2)	122010	SL	5.00	659.		659.	659.	0.
387	PC COMPUTOR (IT #3)	122010	SL	5.00	659.		659.	659.	0.
388	PC COMPUTOR (ACCOUNTING)	122010	SL	5.00	659.		659.	659.	0.
389	PC COMPUTOR (COMMUNICATION)	122010	SL	5.00	659.		659.	659.	0.
390	PC COMPUTOR (CEO)	122010	SL	5.00	659.		659.	659.	0.
391	GAD FURNITURE	032211	SL	7.00	1,021.		1,021.	1,009.	0.
392	SUSAN'S LAPTOP	041311	SL	5.00	1,003.		1,003.	988.	0.
393	LAP TOP -ACCOUNTING	062011	SL	5.00	1,105.		1,105.	1,105.	0.
394	LAP TOP -AE	062011	SL	5.00	1,559.		1,559.	1,559.	0.
396	BACKUP SYSTEM	092011	SL	5.00	1,145.		1,145.	1,145.	0.
397	IPAD (CEO)	100711	SL	5.00	518.		518.	518.	0.
400	MONITOR (AE)	112011	SL	5.00	558.		558.	558.	0.
401	HP 8600 SERVER (RAP SERVER)	022012	SL	5.00	529.		529.	529.	0.
402	MC BOOK PRO #C1MHFP3UDU13	052012	SL	5.00	967.		967.	967.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2021 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

EMERALD COAST ASSOCIATION OF REALTORS, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
403	TRANE ZONE CONTROL ON A/C	061412	SL	5.00	2,200.		2,200.	2,200.	0.
404	2 FILE CABINETS (CEO OFFICE)	062712	SL	7.00	1,047.		1,047.	1,047.	0.
405	HP 8600 SERVER (PROXY)	092012	SL	5.00	1,537.		1,537.	1,537.	0.
406	SHREDDING MACHINE	110912	SL	5.00	638.		638.	638.	0.
407	PROJECTOR	022013	SL	5.00	773.		773.	773.	0.
408	LAP TOP DELL ULTRABOOK (CEO)	032013	SL	5.00	699.		699.	699.	0.
409	SHARP COLOR COPIER #MX-6240	062513	SL	5.00	12,455.		12,455.	12,455.	0.
410	SHARP BLACK / WHITE COPIER #MX-453	062513	SL	5.00	12,455.		12,455.	12,455.	0.
411	SECURITY CAMERA MS652013-13	081313	SL	5.00	572.		572.	572.	0.
412	CYBERPOWER 1000 @ 7	092013	SL	5.00	763.		763.	763.	0.
413	CYBERPOWER 1500 SERVERS @ 4	092013	SL	5.00	600.		600.	600.	0.
431	LEASED SHARP MX-7500N	010116	SL	5.00	27,583.		27,583.	27,583.	0.
440	RAPATTONI CLOUD SOFTWARE	012317	SL	7.00	28,500.		28,500.	15,945.	4,071.
441	FWB TABLES	051117	SL	7.00	6,410.		6,410.	3,358.	916.
442	FWB APPLIANCES	112917	SL	7.00	5,095.		5,095.	2,245.	728.
443	FWB FURNITURE: CHAIRS, UPHOLSTERY	071917	SL	7.00	61,490.		61,490.	30,012.	8,784.
444	FWB FURNITURE: WARDROBE	120617	SL	7.00	3,545.		3,545.	1,560.	506.
447	75 MOTIVATE NESTSTACK CHAIRS	051518	SL	7.00	21,075.		21,075.	8,029.	3,011.
448	25 MOTIVATE TABLE RECT.	051518	SL	7.00	17,700.		17,700.	6,744.	2,529.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES				738,910.		738,910.	667,209.	20,545.
	LAND								
10	LAND	010177	L		157,928.		157,928.		0.
	* 990 PAGE 10 TOTAL LAND				157,928.		157,928.	0.	0.
	MANAGEMENT AND GENERAL								
432	ANNEX OFFICE DESTIN - LEASEHOLD IMPROVEMENTS	010116	SL	5.00	142,857.		142,857.	142,857.	2.
433	ANNEX OFFICE DESTIN - FURNITURE & FIXTURES	032216	SL	7.00	114,192.		114,192.	77,487.	16,313.
445	ANNEX OFFICE DESTIN - LEASEHOLD IMPROVEMENTS	010117	SL	5.00	104,365.		104,365.	83,492.	20,873.
449	AC UNIT	031519	SL	7.00	47,444.		47,444.	12,426.	6,778.
	* 990 PAGE 10 TOTAL MANAGEMENT AND GENERAL				408,858.		408,858.	316,262.	43,966.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2021 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

EMERALD COAST ASSOCIATION OF REALTORS, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	OTHER								
168	INSTALL SIGN & CORRECT WIRING	010605	SL	7.00	134.		134.	134.	0.
293	SIGN - ROOF	032505	SL	15.00	1,234.		1,234.	1,234.	0.
296	SIGN (LABOR)	062105	SL	15.00	300.		300.	300.	0.
414	1/2 DEPOSIT LED SIGN	101311	SL	7.00	13,785.		13,785.	13,785.	0.
415	LED SIGN BALANCE	022812	SL	7.00	13,383.		13,383.	13,383.	0.
	* 990 PAGE 10 TOTAL OTHER				28,836.		28,836.	28,836.	0.
	* 990 PAGE 10 TOTAL -				2696289.		2696289.	1570699.	96,477.
	OTHER								
23	PAVING	123199	SL	15.00	1,149.		1,149.	1,149.	0.
282	GAZEBO	123005	SL	15.00	2,685.		2,685.	2,685.	0.
297	BUILDING	080405	SL	15.00	523.		523.	523.	0.
299	PARKING APPRAISAL	110705	SL	15.00	1,500.		1,500.	1,500.	0.
	* 990 PAGE 10 TOTAL OTHER				5,857.		5,857.	5,857.	0.
	* 990 PAGE 10 TOTAL -				5,857.		5,857.	5,857.	0.
	* GRAND TOTAL 990 PAGE 10 DEPR				2702146.		2702146.	1576556.	96,477.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone