Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

DLN: 93493272000456

Open to Public Inspection

A F	or the	2015 ca	endar year, or tax year be	eginning 01-01-2015 $$, and ending 12-3	31-2015					
		pplicable	C Name of organization THE REAL ESTATE BOARD OF	:			D Emplo	yer ide	entification number	
	dress ch	_	NEW YORK INC				13-1	20148	0	
	me char	_	Doing business as							
	tıal retur	rn	Number and street (or P O	box if mail is not delivered to street address) R	oom/suite		E Teleph	one nun	nber	
Fin ret	iai urn/tern	nınated	570 LEXINGTON AVENUE	,			(212	532-	3100	
☐ Am	ended r	return		ce, country, and ZIP or foreign postal code						
Гар	plication	pending	NEW YORK, NY 10022				G Gross	receipts	\$ 13,633,195 ————————————————————————————————————	
			F Name and address	of principal officer	H(a) Is this			n for	
			JOHN BANKS 570 LEXINGTON AVI	ENUE	ши		dinates?		□Yes □No □Yes □No	
			NEW YORK, NY 1002	2	ן הייני	Are al includ		inates	Yes No	
	v-evem	ıpt status	□ F01/6)/2) ☑ F01/6)/	6) ◀ (insert no)	,				(see instructions)	
				6) ¬ (insert no) 4947(a)(1) or 527	H(c) Group	exemp	tion nu	mber ►	
			W REBNY COM							
			Corporation Trust As	sociation Other 🕨	L	Year of for	nation 1	896 N	State of legal domicile NY	
Pa	rt I		mary	nission or most significant activities						
Governance	P L A l T C N E	JBLIC II ND ENC O OPPO EED TO	MPROVEMENTS AND OP OURAGE THE ENACTME SE THOSE THAT WOULD	THEIR RELATIONS WITH EACH OTHE POSE UNNECESSARY OR WASTEFUL NT OF JUST AND REASONABLE LAW D BE UNJUST AND UNREASONABLE S DECISIONS 7 TO HELP REAL EST	EXPENDIT S AND ORD 6 TO SUPP	TURES O DINANCE LY MEMI	F PUBLI S AFFE BERS W	C FUN CTING ITH IN	IDS 5 TO PROMOTE GREAL ESTATE AND IFORMATION THEY	
		`heck th	is hov W if the organizat	ion discontinued its operations or dispo	nsed of more	than 25	% of its	net as	e e a t e	
ij	- "	, , , , , , , , , , , , , , , , , , ,	io box P ₁ in the organization			2 (11411 23	70 01 100		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Activities &	I		-	overning body (Part VI, line 1a)			•	3	148	
⋖	1		· · · · · · · · · · · · · · · · · · ·	nbers of the governing body (Part VI, lir	•		•	4	145	
	I			ed in calendar year 2015 (Part V, line interior in calendar year 2015)			•	5 6	53	
	1			rom Part VIII, column (C), line 12				7a	419,443	
	b Ne	et unrela	ted business taxable inco	me from Form 990-T, line 34				7b	4,459	
						Prior	Year		Current Year	
o)	8			/III, line 1h)			1,050,		0	
Revenue	9 10			/III, line 2g)			12,212, 340,	-	13,458,796	
Œ.	11		•	nn (A), lines 5, 6d, 8c, 9c, 10c, and 11e				624	27,070	
	12				(must equal Part VIII, column (A), line					
	42	12)		I/Dart IV asluma (A) lima 1 2)			13,626,		13,598,316	
	13 14			I (Part IX, column (A), lines 1-3). (Part IX, column (A), line 4)			50,	000	0	
	15		es, other compensation, e	—		5,788,534		6,554,618		
Expenses		5-10)			3,766	334				
∓	16a b			art IX, column (A), line 11e)					0	
Δ	17		ndraising expenses (Part IX, col expenses (Part IX, colum	umn (D), lines 25) = 3 n (A), lines 11a-11d, 11f-24e)		7,307,704 6,7				
	18			7 (must equal Part IX, column (A), line	<u> </u>		13,146,	-	6,740,925 13,295,543	
	19	Reven	ue less expenses Subtrac	ct line 18 from line 12			479	882	302,773	
Not Assets or Fund Balances					Beg	jinning of	Current	Year	End of Year	
teger Teger	20	Totala	assets (Part X, line 16)		🗀		16,270,	593	15,636,900	
유 전 문	21	Total I	iabilities (Part X, line 26)				10,887,	692	9,721,826	
	22			btract line 21 from line 20			5,382	901	5,915,074	
Unde my k	r pena nowled arer ha	lties of place and the sany kr	velief, it is true, correct, and ownedge ** iture of officer	ve examined this return, including acco nd complete Declaration of preparer (o		ficer) is b	ased on			
			or print name and title	Draparoda cianativa	l Data	T	. —	ртты		
Paid	d		rınt/Type preparer's name OHN R MANI	Preparer's signature JOHN R MANI	Date 2016-09	-28 Chec self-e	k 🔽 ıf employed	PTIN P0052	3779	
	_u pare	r 🗏	ım's name 🕨 JOHN R MANI (CPA		Firm'	s EIN 🟲 1	6-16478	399	
	Onl	1 F	ırm's address ► 292 MADISON A			Phon	e no (97:	3) 694-0)172	
			NEW YORK NY							

	990 (2	015)				Page 2
Par		Statement of Program	•			-
_		Check if Schedule O contains describe the organization's m		to any line in this Part	111	<u> </u>
1 TO THE MEM AND ENA WOU	O UNITI MUTUA BERS I OPPOS CTMEN	E IN COMMON ORGANIZATI LINTERESTS OF ITS MEMBI N THEIR RELATIONS WITH E SE UNNECESSARY OR WASTI T OF JUST AND REASONABL JNJUST AND UNREASONABL	ON THOSE PROFES ERS 3 TO FORMUL ACH OTHER AND T EFUL EXPENDITUR E LAWS AND ORDI LE 6 TO SUPPLY M	ATE AND MAINTAIN THE PUBLIC 4 TO A ES OF PUBLIC FUND: NANCES AFFECTING IEMBERS WITH INFO	D IN REAL ESTATE 2 TO PR I ETHICAL STANDARDS FOR DVOCATE NECESSARY PUBI S 5 TO PROMOTE AND ENC G REAL ESTATE AND TO OPP RMATION THEY NEED TO MA IENT LICENSING STANDARE	THE GUIDANCE OF ITS LIC IMPROVEMENTS OURAGE THE OSE THOSE THAT AKE SOUND BUSINESS
2		e organization undertake any s or Form 990 or 990-EZ? .				─────────────────────────────────────
	If"Yes	," describe these new service:	s on Schedule O			
3	servic	e organization cease conductin		_	onducts, any program	「Yes ▼No
4	Descri expens		service accomplishi 1(c)(4) organization	s are required to repor	nree largest program services, t the amount of grants and allo	
4a	PROMO NEW Y INVES EDUCA PROFE DEPAR INDUS EXPER ANNUA MAINT PROFE INFOR MEDIA MEMBI IN WR LISTIN FROM MANDA EXCLU	OTING PUBLIC AND INDUSTRY POLICI ORKS ECONOMY, ENCOURAGING THIFORS AND RESIDENTS AND FACILITATION PROGRAMS, INCLUDING STATE SSIONAL SKILLS, AND COURSES TO MEMENT, ALSO AT MEMBERS DISPOSALITRY, TOPICS HAVE INCLUDED RESIDIT IS ALSO ON HAND TO FIELD A WIDE ALD INCLUDED RESIDIT IS ALSO ON HAND TO FIELD A WIDE ALD INCLUDED RESIDIT IS ALSO ON HAND TO FIELD A WIDE ALD INCLUDED RESIDITATION OF FOR AND	ES FIRST REAL ESTATE ES THE ORGANIZATION E DEVELOPMENT AND RE TING PROPERTY MANAGE -CERTIFIED REQUIRED (MAINTAIN THE ETHICAL S, UNDERTAKES PROJECT ENTIAL CONVERSION TRIST ERANGE OF INQUIRIES IDERED REAL ESTATES A REAL ESTATE-RELATED IND LETIVE BOROUGHS, AS WE DISPUTES WHETHER BET EACCEPTABLE TO BOTH IN OCCUR, THE PARTIES ME HAT ARE MEMBERS OF IN AL PROPERTY LOCATED IN NG ENGAGED AS AN EXC NATED IN THE SAID JURISI	TRADE ASSOCIATION IT WE FREQUENTLY SPEAKS BEFOR NOVATION OF COMMERCIA MENT MEMBERS HAVE ACCOURSES FOR LICENSING, ITANDARDS OF RELATIONS IS TO INVESTIGATE CURREST OF THE SUBJECT ON SUBJECT OF THE SUBJECT ON SU) (Revenue \$ ORKS ON BEHALF OF THE MUTUAL IN DRE GOVERNMENT BODIES WITH THE L AND RESIDENTIAL PROPERTY, ENHA CESS TO THE BOARDS VARIOUS REAL CONTINUING EDUCATION COURSES A BETWEEN PROFESSIONALS AND WITH RIT RESIDENTIAL AND COMMERCIAL I RVATION TECHNIQUES IN HIGH-RISE HES A NUMBER OF IMPORTANT PERIOR R B DURST LIBRARY, LOCATED AT TH YORK CITY TRADE ASSOCIATION ASI JP-TO-DATE COMPUTERIZED OWNERS IN LISTINGS AND CURRENT PROPERT I MEMBERS AND THEIR FIRMS OR BE MEDIATION ONCE THE PARTIES REA BITRATION THE REBNY LISTING SER IGE DIVISION AND NON-MEMBER FIRM HORIZED BY THE RESIDENTIAL BOAR MEMBER MUST INITIATE AN OFFER OR R MEMBER OF THE RLS SYSTEM WHO R	PRIMARY GOALS OF EXPANDING ANCING THE CITYS APPEAL TO ESTATE PROFESSIONAL AND SEMINARS TO HONE ITHE PUBLIC THE RESEARCH SSUES OF IMPORTANCE TO THE OFFICE BUILDINGS A ZONING IDICALS, INCLUDING THE HE MIDTOWN OFFICE, IDE FROM SCORES OF SHIP AND MORTGAGE IT MAPS THE BOARD PROVIDES TWEEN MEMBERS AND NON-CH AN AGREEMENT, IT IS PUT VICE (RLS) IS A SHARING OF MIS THAT RECEIVE REVENUE D OF DIRECTORS THIS SYSTEM OF CO-BROKERAGE OF ALL
4b	(Code) (Expenses s	b	including grants of \$) (Revenue \$	
4c	(Code) (Expenses s	b	including grants of \$) (Revenue \$	
4d		program services (Describe i	n Schedule O) including grants o	of\$) (Revenue \$)
4e	Total	program service expenses 🕨	13,295,543	3		

Form 990 (2	2015)
Part IV	Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I \Box	3	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	Yes	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νo
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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

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Par	t 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			
	Chesh in Constants of Constants a response or more to any mile in this raise is a re-		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 77			
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	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
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		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	35		
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OB		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
d	file Form 8282?	7c		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	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			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Fo	orm 990	(2015)

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

6-	Check if Schedule O contains a response or note to any line in this Part VI	• •		•	• • •	^
56	ection A. Governing Body and Management				Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a	148			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	145			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2	Yes	
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents since filed?			4		No
5	Did the organization become aware during the year of a significant diversion of the o	rganız	ation's assets?	5		Νo
6	Did the organization have members or stockholders?			6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?	verto (elect or appoint one or	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?		nembers, stockholders,	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written activear by the following	ions ur	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No
Se	ection B. Policies (This Section B requests information about policies not	requi	red by the Internal R	evenu	ıe Cod	e.)
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		Νo
	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization	ion's e	xempt purposes?	10b		
l1a	Has the organization provided a complete copy of this Form 990 to all members of it the form?	ts gov	erning body before filing	11a		No
	Describe in Schedule O the process, if any, used by the organization to review this F					
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13 .			12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts?			12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done		olicy? <i>If "Yes," describe</i>	12c	Yes	
L3	Did the organization have a written whistleblower policy?			13	Yes	
L4	Did the organization have a written document retention and destruction policy? .			14	Yes	
L 5	Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the					
а	The organization's CEO, Executive Director, or top management official			15a		Νo
b	Other officers or key employees of the organization	•		15b		Νo
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
L6a	Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?			16a		Νo
b	If "Yes," did the organization follow a written policy or procedure requiring the organ participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	e step	s to safeguard the	16b		
Se				00		
_	ection C. Disclosure					
L7	List the States with which a copy of this Form 990 is required to be filed					
L7 L8						

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

State the name, address, and telephone number of the person who possesses the organization's books and records ►TRACEY MALLIN 570 LEXINGTON AVENUE NEW YORK, NY 10022 (212) 532-3100

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	tion (han d in is l	one b both	ox, an c	heck unless officer stee)	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee or director		2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations				
See Additional Data Table										
										Form 990 (2015)

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

(A) Name and Title	(B) A verage hours per week (list any hours	Posi more t perso and a	tion (han d n is l	ne b both	οοχ, ι an o	unless fficer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Mey employee Key employee Officel Institutional Trustee Individual trustee or director		Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations		
See Additional Data Table										
1b Sub-Total			•			P				
c Total from continuation sheetd Total (add lines 1b and 1c) .	s to Part VII, S			٠.	٠			4,013,635	+	72,131
2 Total number of individuals (in \$100,000 of reportable compe	cluding but not	ımıted t	o the	se l		labov	e) wł	no received more th	an	

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

	Yes	No
3		No
4	Yes	
5		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
BLUMTECHOLOGY CONSULTING	CONSULTING	347,764
135 SAXON WOODS ROAD WHITE PLAINS, NY 10605		
WILSON ELSER MOSKOVITZ EDELMAN	LOBBYISTS	246,343
150 EAST 42ND STREET NEW YORK, NY 10017		
STROOCK & STROOCK & LAVAN LLP	LEGAL SERVICES	204,742
180 MAIDEN LANE NEW YORK, NY 10038		
GALILEO TECHNOLOGY CONSULTING	CONSULTANT	173,820
51 CAMBRIDGE AVENUE MILFORD, CT 06460		_
HARBINGER STRATEGIES LLC	CONSULTANT	145,249
1701 PENNSYLVANIA AVENUE NW STE 300 WASHINGTON, DC 20006		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \blacktriangleright 5

Part V	/##	Statement o			th Dt \/III			F
	12		ule O contains a respo	ise or note to any III	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
हे है	1a	Federated cam						
ons, Gifts, Grants Similar Amounts	Ь	Membership du	es 1b					
S G	С	Fundraising eve	ents 1 c					
Giffs, illar Aı	d	Related organiz	zations 1d					
m:G	e	Government grant	s (contributions) 1e					
ë is	f	All other contribution	ons, gifts, grants, and 1f					
tributio Other	•	sımılar amounts no	ot included above					
Ē	g	Noncash contribute 1a-1f \$	ons included in lines					
Contributions, and Other Sim	h	Total. Add lines	s 1 a - 1 f	📦				
				Business Code				
Ĭ	2a	MEMBERS DUES			9,417,180	9,417,180		
£4.	ь	ANNUAL BANQUET			1,957,009	1,957,009		
<u>-</u>	С	EDUCATION, SEMIN	IAR,LUNCHEON		674,887	674,887		
er Er	d	MEMBERSHIP MEE	TINGS		488,420	488,420		
ۍ 3	e	BANQUET JOURNA	L	541800	267,000		267,000	
Program Serwce Revenue	f	All other progra	am service revenue		654,300	511,275	143,025	
ž	g	Total. Add lines	s 2a-2f		13,458,796			
	3	and other similarity	ome (including dividen ar amounts) stment of tax-exempt bond	proceeds >	117,934			117,934
	5	·	(ı) Real	(II) Personal				
	6a	Gross rents Less rental						
	b	expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
	7a	Gross amount from sales of assets other than inventory	(1) Securities 29,395	(II) O ther				
	b	Less cost or other basis and sales expenses	34,879					
	C	Gain or (loss)	-5,484 ss)		-5,484			-5,484
Other Revenue	8a	Gross income f events (not inc \$	rom fundraising luding s reported on line 1c)		3,10			5,16.
	ь	less directex	a penses b					
J	c		(loss) from fundraising	events 🛌				
	9a	Gross income f See Part IV, lir	rom gaming activities ne 19 a					
	ь	Less direct ex	penses b					
	С		(loss) from gamıng actı	vities				
	10a	Gross sales of returns and allo	owances .					
	1		a oods sold b (loss) from sales of inv	entory 🛌				
		Miscellaneous		Business Code				
	11a	ARBITRATION	I FEES & OTHER		15,740	15,740		
		MEETING ROC		900099	5,400		5,400	
	С	SALE OF LABE		900004	4,018		4,018	
	d	All other reven	ue		1,912	1,912		
	e		s 11a-11d	🕨	27,070			
	12	Total revenue.	See Instructions .	🕨	13,598,316	13,066,423	419,443	112,450

	990 (2015)				Page 10
	Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns				_
	Check if Schedule O contains a response or note to any line in t	hıs Part IX			
	ot include amounts reported on lines 6b, o, 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	3,714,831			
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	1,613,249			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	446,241			
9	Other employee benefits	477,429			
10	Payroll taxes	302,868			
11	Fees for services (non-employees)				
а	Management				
b	Legal	316,900			
c	Accounting	22,200			
d	Lobbying	330,986			
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	16,990			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	497,220			
14	Information technology	571,077			
15	Royalties				
16	Occupancy	1,033,782			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	179,599			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	359,890			
23	Insurance	62,752			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	SPECIAL PROJECT	615,620			
b	RESIDENTIAL LSTG SERVICE	528,139			
c	ANNUAL BANQUET EXPENSE	521,977			
d	EDUCATION & SEMINAR EXP	429,565			
e	All other expenses	1,254,228			
25	Total functional expenses. Add lines 1 through 24e	13,295,543	0	0	0
26	Joint costs.Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2015) Page 11 Part X **Balance Sheet** (A) (B) Beginning of year End of year 512,817 1,056,504 1 1 2 5.643.971 2 4.335.385 Savings and temporary cash investments Pledges and grants receivable, net 3 3 160.451 4 4 67.043 5 Loans and other receivables from current and former officers, directors, trustees. key employees, and highest compensated employees. Complete Part II of 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 7 12,026 8 15,869 8 3,848,462 4,297,409 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis 3,980,199 10a Complete Part VI of Schedule D b 10b 2.988.628 1,255,614 10c 991,571 Less accumulated depreciation 2,804,677 11 2,782,185 11 -1,247,121 12 -1,247,121 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . 14 14 15 3.279.696 15 3.338.055 16 Total assets. Add lines 1 through 15 (must equal line 34) 16,270,593 16 15,636,900 4,504,651 3,738,854 17 **17** 18 18 4.353.436 19 3,895,531 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . 23 24 24 Unsecured notes and loans payable to unrelated third parties . . . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 2,029,605 25 2,087,441 10,887,692 26 9,721,826 26 **Total liabilities.**Add lines 17 through 25 . . . Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete Balance lines 27 through 29, and lines 33 and 34. 5.382.901 5.915.074 27 27 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ö 30 30 Net Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 33 5,382,901 33 5,915,074

Total liabilities and net assets/fund balances

15.636.900

16.270.593

34

	1990 (2013)				Page ⊥ ∡
Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI		•		୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		13,	598,316
2	Total expenses (must equal Part IX, column (A), line 25)	2		13,	295,543
3	Revenue less expenses Subtract line 2 from line 1	3			302,773
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			382,901
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			420,451
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			915,074
Par	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990	_			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or a separate basis, consolidated basis, or both	reviewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a basis, consolidated basis, or both	separate			
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for over of the audit, review, or compilation of its financial statements and selection of an independent accoun		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, exp Schedule O	laın ın			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth Single Audit Act and OMB Circular A-133?	ın the	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		

MEMBER AT LA

Software ID: Software Version:

EIN: 13-1201480

Name: THE REAL ESTATE BOARD OF

NEW YORK INC

(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and a	tion (han o n is b	ne b ooth ctor/	ox, u an of /trus	nless ficer tee)		(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	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-1415C)	2/1099-MISC)	organization and related organizations	
MARY ANN TIGHE	0 50	х		х				0	0	0	
CHAIRPERSON	0 50		-								
JOHN ZUCCOTTI PAST CHAIRPE		x						0	0	0	
BURTON RESNICK	0 50										
PAST CHAIRPE		x						0	0	0	
WILLIAM RUDIN	0 50										
VICE CHAIRPE		X		X				0	0	0	
DANIEL BRODSKY	0 50										
VICE CHAIRPE		X		X				0	0	0	
STEPHEN ROSS	0 50										
PAST CHAIRPE		X						0	0	0	
ELIZABETH STRIBLING	0 25	.,									
MEMBER BD GO		X						0	0	0	
SCOTT ALPER	0 25								0		
MEMBER BD GO		×						0	0	Ů	
DONALD ZUCKER	0 50	l x		×				0	0	0	
VICE PRESIDE								Ů		Ů	
JOSEPH GROTTO	0 25	l x						0	0	0	
MEMBER BD GO								_		_	
ALAN WIENER	0 50	x		x				0	0	0	
VICE CHAIRPE	0.50										
JOEL PICKET TREASURER	0 50	x		х				0	0	0	
LESLIE WOHLMAN HIMMEL	0 50										
ASSISTANT TR		X		X				0	0	0	
LEONARD LITWIN	0 50	,		Ų					0		
HONORARY CHA		X		X				0	0	0	
DOUGLAS DURST SECRETARY	0 50	х		х				0	0	0	
LEONARD BOXER	0 50										
REBNY COUNSE		х		Х				0	0	0	
JOHN SANTORA	0 50										
MEMBER AT LA		X						0	0	0	
H HENRY ELGHANAYAN	0 50										
MEMBER AT LA		X						0	0	0	
KENNETH FISHER	0 50	,,									
MEMBER AT LA		X						0	0	0	
STEPHEN GREEN	0 50	X						0	0	0	
MEMBER AT LA								Ů	0	Ů	
DAVID GREENBAUM	0 50	×						0	0	0	
MEMBER AT LA	0 50										
PETER KALIKOW MEMBER AT LA		x						0	0	0	
ROBERT KNAKAL	0 50										
VICE PRESIDE		x		Х				0	0	0	
JEFFERY LEVINE	0 50	-									
MEMBER AT LA		X						0	0	0	
PAMELA LIEBMAN	0 50										
		X	1	1	1	İ	1	0	0	0	

Compensated Employees, and Inde		ntracto						I	I	1 1
(A) Name and Tıtle	(B) A verage hours per week (list any hours	Posit more the perso and a	ion (han o n is b	ne b oth	ox,ι an o	ınless fficer	5	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
			6) ří				
JONATHAN MECHANIC MEMBER AT LA	0 50	х						0	0	0
HOWARD MILSTEIN	0 50									
MEMBER AT LA		X						0	0	0
FREDERICK PETERS	0 50			,						
VICE PRESIDE		X		Х				0	0	0
DIANE RAMIREZ MEMBER AT LA	0 50	х						0	0	0
ADAM ROSE	0 50	x		х				0	0	0
VICE PRESIDE		_ ^						Ů.	0	0
SHELDON SOLOW	0 50	×						0	0	0
MEMBER AT LA	0.50							,	-	
ROBERT SPEYER	0 50	×		Х				0	0	0
CHAIRMAN	0 50									
DANIEL TISHMAN		х						0	0	0
MEMBER AT LA FRED WILPON	0 50									
MEMBER AT LA		Х						0	0	0
J DEAN AMRO	0 25	x						0	0	0
MEMBER BD GO	0 25									
LAWRENCE COHEN		х						0	0	0
GARY BARNETT	0 50									
MEMBER AT LA		Х						0	0	0
ASSISTANT SE	0 50	x		х				0	0	0
ALBERT BEHLER	0 25	V						0	0	0
MEMBER BD GO		X						0	0	0
ALEC BRACKENRIDGE MEMBER BD GO	0 25	x						0	0	0
DONALD CAPOCCIA	0 50									
MEMBER AT LA		Х						0	0	0
PHILIP EISENBERG	0 25							_	_	
MEMBER BD GO		×						0	0	0
DAUN PARIS MEMBER BD GO	0 25	х						0	0	0
MICHAEL COLACINO MEMBER BD GO	0 25	х						0	0	0
GARY DEBODE	0 25	X						0	0	0
MEMBER BD GO	0 25									
PETER DICAPUA MEMBER BD GO		x						0	0	0
JEFFREY FEIL	0 25	х						0	0	0
MEMBER BD GO HAROLD A FETNER	0 50									
MEMBER AT LA		х						0	0	0
BENJAMIN FOX MEMBER BD GO	0 25	x						0	0	0
K THOMAS ELGHANAYAN	0 50							_	^	
MEMBER AT LA		X						0	0	0
					_					

Compensated Employees, and Inde		ntracto	rs					I	1	1
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more t perso and a	ion (han o n is b	ne b oth	ox, ι an o	ınless fficer	5	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trusties or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
ABIGAIL ELBAUM	0 25	X						0	0	0
MEMBER BD GO										
LAURENCE GLUCK	0 25	×						0	0	0
MEMBER BD GO	0.50									
SCOTT RECHLER	0 50	×						0	0	0
MEMBER AT LA	0 50									
JEFFREY GURAL		x						0	0	0
MEMBER AT LA	0 25									
PETER HAUSPURG		x						0	0	0
MEMBER BD GO	0.25									
ANDREW HEIBERGER	0 25	x						0	0	0
MEMBER BD GO	0 25									
WARREN HELLER		x						0	0	0
MEMBER BD GO	0 25									
DOTTIE HERMAN		х						0	0	0
MEMBER BD GO	0 25									
SAMUEL IRLANDER		x						0	0	0
GEORGE KAUFMAN	0 50									
MEMBER AT LA		x						0	0	0
GEORGE KLEIN	0 25									
MEMBER BD GO		Х						0	0	0
GEORGE KLETT	0 25									
MEMBER BD GO		X						0	0	0
DAVID J KOEPPEL	0 25									
MEMBER BD GO		X						0	0	0
JONATHAN RESNICK	0 25									
MEMBER BD GO		X						0	0	0
JARED KUSHNER	0 25							_	_	_
MEMBER BD GO		X						0	0	0
KEVIN LALEZARIAN	0 25	, , , , , , , , , , , , , , , , , , ,								
MEMBER BD GO		X						0	0	0
RICHARD LEFRAK	0 25	x						0	0	0
MEMBER BD GO		_ ^						Ů	0	
DAVID LEVINSON	0 50	×						0	0	0
MEMBER AT LA								Ů		
HOWARD LORBER	0 25	x						0	0	0
WILLIAM MACKLOWE	0 25						-			
MEMBER BD GO		X						0	0	0
ANTHONY MALKIN	0 25									
MEMBER BD GO		Х						0	0	0
DAMON HEMMERDINGER	0 25	V								
MEMBER BD GO		X						0	0	0
EDWARD MINSKOFF	0 25	х						0	0	0
MEMBER BD GO		ļ								
RON MOELIS	0 25	×						0	0	0
MEMBER BD GO		<u> </u>					_			
JOSEPH MOINIAN	0 25	x						0	0	0
MEMBER BD GO										

Compensated Employees, and Inde (A) Name and Title	(B) Average hours per week (list	Posit more ti perso	ion (c han o n is b	ne bo	ox,ι an o	ınless fficer	;	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation
	any hours for related organizations below dotted line)	and Individual trustee or director	Institutional Trustee	₽		employee	Former	organization (w- 2/1099-MISC)	organizations (W- 2/1099-MISC)	from the organization and related organizations
WILLIAM MONTANA MEMBER BD GO	0 25	х						0	0	0
BRUCE MOSLER	0 25	l x						0	0	0
MEMBER BD GO										
JOSHUA MUSS MEMBER BD GO	0 25	х						0	0	0
MARIO J PALUMBO MEMBER BD GO	0 25	х						0	0	0
CAROLE PITTELMAN	0 25	x						0	0	0
MEMBER BD GO		<u> </u>						Ů		
GREGORY R REIMERS	0 25	x						0	0	0
MEMBER BD GO		^						Ů		<u> </u>
SCOTT RESNICK MEMBER BD GO	0 25	x						0	0	0
PETER G RIGUARDI	0 25									
MEMBER BD GO		X						0	0	0
ANDREW H ROOS MEMBER BD GO	0 25	х						0	0	0
GARY JACOB	0 25									
MEMBER BD GO		Х						0	0	0
ABY ROSEN	0 25	×						0	0	0
MEMBER BD GO								·		
HOWARD J RUBENSTEIN MEMBER AT LA	0 50	х						0	0	0
ROSS MOSKOWITZ	0 25	х						0	0	0
MEMBER BD GO	0 25									
DAVID LOWENFELD MEMBER BD GO		х						0	0	0
HARVEY SCHULWEIS	0 25	,,						0	0	
MEMBER BD GO		Х						U	0	0
JOHN POWERS	0 25	x						0	0	0
MEMBER BD GO		^						Ŭ	· ·	Ů
ANDREW J SINGER MEMBER BD GO	0 25	х						0	0	0
JOSEPH J SITT	0 25	х						0	0	0
MEMBER BD GO	0 25									
DARCY STACOM MEMBER BD GO		х						0	0	0
STUART SUNA	0 25	х						0	0	0
MEMBER BD GO JED WALENTAS	0 50									
MEMBER AT LA		Х						0	0	0
KEVIN WANG MEMBER BD GO	0 25	х						0	0	0
DAVID LICHTENSTEIN	0 25	<u> </u>								_
MEMBER BD GO		Х	L					0	0	0
HALL WILLKIE MEMBER BD GO	0 25	х						0	0	0
YOUNG WOO	0 25									
MEMBER BD GO		Х						0	0	0

Compensated Employees, and Ind (A) Name and Title	(B) Average	Posit	ion (d					(D) Reportable	(E) Reportable	(F) Estimated amount of other compensation
	hours per week (list	more ti perso	n ıs b	oth	an o	fficer	5	compensation from the	compensation from related	
	any hours for related	and a	dire					organization (W- 2/1099-MISC)	organizations (W- 2/1099-MISC)	from the organization and
	organizations	유를	5	Officei	<u>\$</u>		Former	2/1033 14130)	2/1033 14130/	related
	below dotted line)		Institutional	Ψ	emplo) ee	Š Š	좥			organizations
	,	ជ្≕	ona		9	₩ S				
		Individual trustee or director	₫		9	Highest compensat employee				
		åi	Trustee			18 B				
			Ľ			2				
MARYANNE GILMARTIN	0 50	l x						0	0	0
MEMBER AT LA		,						Ů	ů	
ALLEN GOLDMAN	0 25	×						0	0	0
MEMBER BD GO		^						Ů	0	0
ATSUSHI NAKAJIMA	0 25	x						0	0	0
MEMBER BD GO		^							0	0
ERIC HADAR	0 25							_	_	_
MEMBER BD GO		X						0	0	0
RICHARD CLARK	0 50									
MEMBER AT LA		X						0	0	0
NEIL RUBLER	0 25									
MEMBER BD GO		X						0	0	0
DAVID SIGMAN	0 25									
MEMBER BD GO		Х						0	0	0
EUGENE WEBB	0 25									
MEMBER BD GO		х						0	0	0
LARY WOLF	0 25									
		х						0	0	0
MEMBER BD GO	0 25									
CHARLES COHEN		x						0	0	0
MEMBER BD GO	0 25									
ROBERT FREEDMAN		x						0	0	0
MEMBER BD GO	0.25									
STEVEN KENNY	0 25	X						0	0	0
MEMBER BD GO										
JASON PIZER	0 25	l x						0	0	0
MEMBER BD GO										
ROGER SILVERSTEIN	0 25	l x						0	0	0
MEMBER BD GO										
CHARLES DOREGO	0 50	×						0	0	0
MEMBER AT LA		^						Ŭ.	· ·	
LAWRENCE B BENENSON	0 25							0	0	0
MEMBER BD GO		X							0	0
JERRY L COHEN	0 25	,,								
MEMBER BD GO		X						0	0	0
BERTRAM F FRENCH	0 25							_	_	_
MEMBER BD GO		X						0	0	0
DAN J GRONICH	0 25									
MEMBER BD GO		X						0	0	0
JAMES D KUHN	0 25									
MEMBER BD GO		X						0	0	0
ANDREW MACARTHUR	0 25									
MEMBER BD GO		х						0	0	0
MICHAEL PHILLIPS	0 50									
MEMBER AT LA		×						0	0	0
	0 25									
MARTIN PIAZZOLA		х						0	0	0
MEMBER BD GO	0 25	-					-			
DAVID PICKET		×						0	0	0
MEMBER BD GO	0.25						_			
EDWARD RIGUARDI	0 25	×						0	0	0
MEMBER BD GO										

Compensated Employees, and Ind		ntracto	rs			•	-	 I	l	1 1
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more to perso	ion (d han o n is b	ne b oth	ox,ι an o	ınless fficer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
DANIEL ROSE MEMBER BD GO	0 25	х						0	0	0
JACK RUDIN MEMBER BD GO	0 25	х						0	0	0
LARRY A SILVERSTEIN	0 25									
PAST CHAIRPE		X						0	0	0
JERRY I SPEYER MEMBER BD GO	0 25	х						0	0	0
NORMAN STURNER	0 25	х						0	0	0
MEMBER BD GO BERNARD WARREN	0 25									_
MEMBER BD GO		х						0	0	0
JANNO LIEBER	0 50	X						0	0	0
MEMBER AT LA	0 25									
HELENA DURST MEMBER BD GO		×						0	0	0
ERIC FEUERSTEIN MEMBER BD GO	0 25	х						0	0	0
D ERIC HABERMANN	0 25	х						0	0	0
MEMBER BD GO MELANIE MEYERS	0 25									
MEMBER BD GO		x						0	0	0
WENDY MOSLER MEMBER BD GO	0 25	х						0	0	0
JAY A NEVELOFF	0 25	х						0	0	0
JAMES WACHT	0 25	X						0	0	0
MEMBER BD GO								Ů	0	0
JAMES NELSON MEMBER BD GO	0 25	x						0	0	0
MARC HOLIDAY	0 50	х						0	0	0
JUSTIN ELGHANAYAN	0 25	X						0	0	0
MEMBER BD GO FREDERICK MAREK	0 25							_		
MEMBER BD GO		x						0	0	0
ROBERT SHAPIRO MEMBER BD GO	0 25	x						0	0	0
SCOTT SOLOMON MEMBER BD GO	0 25	х						0	0	0
PHILIP WATERMAN	0 25	X						0	0	0
MEMBER BD GO LAURIE ZUCKER	0 25									
MEMBER BD GO		х						0	0	0
PAUL PARISER MEMBER BD GO	0 25	х						0	0	0
STEVEN SPINOLA PRESIDENT	40 00			х				852,896	0	15,796
JOHN BANKS	40 00			x				622,035	0	5,300
PRESIDENT								022,033		3,300

Form 990, Part VII - Compensation Compensated Employees, and Ind	n of Officers, ependent Coi	Direct otracto	ors, ers	Tru	ste	es, k	(ey	Employees, High	nest	
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th perso and a	ion (nan o n is b	ne b oth	ox, ι an o	ınless fficer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
JAMES WHELAN	40 00			x				495,394	0	5,745
SENIOR VP	40 00					-				
WILLIAM AUERBACH	40 00			×				349,058	0	5,618
MICHAEL SLATTERY	40 00									
SENIOR VP				х				237,998	0	9,831
JOHN DOYLE SENIOR VP	40 00			х				207,633	0	7,986
JOSEPH BARBACCIA SENIOR VP	40 00			х				176,145	0	2,392
MARYANN AVILES VP	40 00			х				154,159	0	3,354
ANGELA PINSKY SENIOR VP	40 00			х				145,119	0	2,904
MARY GIBBS	40 00			х				111,440	0	2,643
EILEEN SPINOLA SENIOR VP	40 00			х				35,237	0	622
JAMIE MCSHANE	40 00					x		201,084	0	4,079
SENIOR VP	40 00				-					
TRACEY MALLIN CONTROLLER						x		175,477	0	3,551
FREDDIE SARABIA DIRECTOR - R	40 00					х		142,846	0	0
AMANDA WOOD SENIOR VP	40 00					х		107,114	0	2,310
SCINION AL										

DLN: 93493272000456

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Inspection

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 the organization **Employer identification number** THE REAL ESTATE BOARD OF **NEW YORK INC** Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures Volunteer hours Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes 3 Was a correction made? ☐ Yes If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 3 Did the filing organization file Form 1120-POL for this year? 4 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) A mount paid from filing organization's funds If none, enter - 0-	contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-
(1) REAL ESTATE BD POLITICAL ACTION COM ACTION COMMITTEE	570 LEXINGTON AVENUE NEW YORK, NY 10022	13-3098933		
2				
3				
4				
5				
6				

ŀ	e C (Form 990 or 990-EZ) 2015						Page 2
1	CI-A Complete if the organization is under section 501(h)).	exempt under	section 501(c)(3) and f	ilec	l Form 5768	(election
c	ck 🕨 🗆 if the filing organization belongs to an af		list in Part IV ea	ch affiliated g	roup	member's name	e, address, EIN,
c	expenses, and share of excess lobbying ck F if the filing organization checked box A a		l" provisions app	olv			
	Limits on Lobbying			·· /		(a) Filing	(b) Affiliated
	(The term "expenditures" means					organization's totals	group totals
	al lobbying expenditures to influence public opinions bying)	on (grass roots					
	oring) al lobbying expenditures to influence a legislative	e body (direct lobb	yıng)				
t	al lobbying expenditures (add lines 1a and 1b)						
h	ner exempt purpose expenditures						
t	al exempt purpose expenditures (add lines 1c and	d 1d)					
b	bying nontaxable amount Enter the amount from	the following table	ın both columns				
t	he amount on line 1e, column (a) or (b) is:	e lobbying nontaxal	ole amount is:				
t	over \$500,000 20°	% of the amount on li	ne 1e				
_	r \$500,000 but not over \$1,000,000 \$1	00,000 plus 15% of the	e excess over \$500 (000			
		75,000 plus 10% of the	<u> </u>				
		25,000 plus 5% of the		<u></u>			
		,000,000					
_	h \$17,000,000 \$1,	,000,000					
a	ssroots nontaxable amount (enter 25% of line 1f	·)					
h	otract line 1g from line 1a If zero or less, enter -0) -					
b	otract line 1f from line 1c If zero or less, enter -0	-					
	here is an amount other than zero on either line 1 orting section 4911 tax for this year?	h or line 11, did the	organization file	Form 4720			
,,	orting section 4911 tax for this year?		Г	Yes	_ N	o	
			<u>'</u>		,		
	4-Year Aver	aging Period U	Inder section	501(h)			
	(Some organizations that made a sec	tion 501(h) el	ection do not	have to co			e five
	columns below. See the	separate instr	uctions for li	nes 2a thro	oug	h 2f.)	
	Lobbying Expend	itures During	4-Year Avera	ging Perio	d		
	Calendar year (or fiscal year beginning in)	(a)2012	(b) 2013	(c) 2014		(d) 2015	(e) Total
2	bbying nontaxable amount						
_	, , ,				\dashv		
	bbying ceiling amount						
_	50% of line 2a, column(e))				\dashv		
o	otal lobbying expenditures						
_					十		
r	assroots nontaxable amount						
0	50% of line 2a, column(e)) stal lobbying expenditures						

Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	(b)
tivity.	╝	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes		
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			
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?			

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

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-B 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	9,326,680
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).		
а	Current year	2a	605,033
b	Carryover from last year	2b	
C	Total	2c	605,033
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	659,203
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	-54,170

Supplemental Information Part IV

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

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DLN: 93493272000456

13-1201480

OMB No 1545-0047

Open to Public

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

NEW YORK INC

THE REAL ESTATE BOARD OF

Supplemental Financial Statements ► Complete if the organization answered "Yes," on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection **Employer identification number**

Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in dofunds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant functions only for charitable purposes and not for the benefit of the donor or donor advisor, or for	onor advised					
year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in do funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant fund used only for charitable purposes and not for the benefit of the donor or donor advisor, or for						
Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in do funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant fund used only for charitable purposes and not for the benefit of the donor or donor advisor, or for						
Did the organization inform all donors and donor advisors in writing that the assets held in do funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant fund used only for charitable purposes and not for the benefit of the donor or donor advisor, or for						
funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant functions of the donor or donor advisor, or for the benefit of the donor or donor advisor, or for						
used only for charitable purposes and not for the benefit of the donor or donor advisor, or for	165 NO					
conferring impermissible private benefit?						
rt II Conservation Easements. Complete if the organization answered "Yes"	on Form 990, Part IV, line 7.					
Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in	a certified historic structure					
easement on the last day of the tax year						
Total number of conservation easements	Held at the End of the Yea					
Total acreage restricted by conservation easements	2b					
Number of conservation easements on a certified historic structure included in (a)	2c 2c					
Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d					
Number of conservation easements modified, transferred, released, extinguished, or termina	ted by the organization during the					
tax year -						
Number of states where property subject to conservation easement is located 🛌						
Does the organization have a written policy regarding the periodic monitoring, inspection, ha violations, and enforcement of the conservation easements it holds?						
Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year						
<u> </u>						
Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing \$\blue{\textbf}\$ \$	conservation easements during the yea					
Does each conservation easement reported on line 2(d) above satisfy the requirements of so (B)(i) and section $170(h)(4)(B)(ii)$?	ection 170(h)(4)					
	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					
Organizations Maintaining Collections of Art, Historical Treasures Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	, or Other Similar Assets.					
If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its rev works of art, historical treasures, or other similar assets held for public exhibition, education	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items					
If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue works of art, historical treasures, or other similar assets held for public exhibition, education 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	-					
If the organization received or held works of art, historical treasures, or other similar assets following amounts required to be reported under SFAS 116 (ASC 958) relating to these item	for financial gain, provide the					
Revenue included on Form 990, Part VIII, line 1	b. #					

b Assets included in Form 990, Part X

Par	t III	Organizations Maintaining (continued)	Collections of A	Art, His	stori	cal 1	Treasure	es, or O	ther Sim	ilar A	ssets	
3		the organization's acquisition, accition items (check all that apply)	ession, and other red	cords, c	heck	any of	f the follow	ing that a	ire a signifi	cant us	e of its	
а	ГР	ublic exhibition		d	Γ	Loar	n or exchai	nge progr	ams			
b	Г s	cholarly research		е	\vdash	Oth	er					
c	_	reservation for future generations										
4	·	de a description of the organization'	s collections and ex	nlaın ho	w the	, furth	ner the ora	anızatıon	's evemnt n	urnosa	ın	
•	Part >	KIII					_			Juipose		
5		g the year, did the organization soli s to be sold to raise funds rather th								┌ Yes	┌ No	
Par	rt IV	Escrow and Custodial Arra		as part	or the	orgai	ilizacion s c	Jonection		, 103	, 110	
		Complete if the organization a Part X, line 21.		n Form	990,	Part	IV, line 9	9, or rep	orted an	amour	nt on Forn	n 990,
1a		e organization an agent, trustee, cus led on Form 990, Part X?	todian or other intei	rmediary	/ for c	ontrib	outions or o	other ass		┌ Yes	┌ No	
b	If"	Yes," explain the arrangement in Pa	art XIII and complet	te the fo	llowin	g tabl	le			Am	ount	
c	Beg	ginning balance						1c				
d	A d	ditions during the year						1d				
e		tributions during the year						1e				
f		ding balance						1f	1			
2a		ne organization include an amount o	n Form 990, Part X,	line 21,	fores	crow	or custodi	al accou	nt liability?	┌ Yes	┌ No	
b	If"Ye	es," explain the arrangement in Part Endowment Funds. Comple										Γ
L.C.	1 C V	Endownient i dids. Comple	(a)Current year		rior yea				(d)Three yea		(e)Four ye	ars back
	Begir	nning of year balance	(, ,	(=):	, , , ,				(,,		(-) / -	
b	_	ributions										
c	Net i losse	nvestment earnings, gains, and										
d	Gran	ts or scholarships										
е		r expenditures for facilities irograms										
f	A dmi	nistrative expenses										
g		of year balance										
2		de the estimated percentage of the	current vear end hal	lance (lu	ne 1a	colu	mn (a)) hel	ld as				
a		I designated or quasi-endowment 🕨	carrency car ena bar	unee (m	nc 19,	Colu	····· (u // iici	u u 5				
_		-										
b		anent endowment 🕨										
С	•	orarily restricted endowment Fercentages on lines 2a, 2b, and 2c	should equal 100%									
3a	organ	nere endowment funds not in the post ization by related organizations	_					nınıstered	l for the	3a	Yes	No
		lated organizations									(ii)	
b		s" on 3a(II), are the related organiz					?			. 3	Bb	
4	Desci	ribe in Part XIII the intended uses o	of the organization's	endown	nent fu	ınds					•	
Pai	rt VI	Land, Buildings, and Equip	ment.	_			_	_				
		Complete if the organization and Description of property	inswered 'Yes' to		ost or	(a)	asıs Cost	1a.See F (b) or other ba (other)	Accı	Part X umulated preciation	(d)Boo	k value
	Land				(mve	Junen	·/	(other)	+			
		gs										
		old improvements		·			_	1,346,0	74	1,002,4	25	343,649
		nent						2,634,1	_	1,986,2		647,922
				·			_	2,034,1		1,700,2		077,322
		lines 1a through 1e (Column (d) mus			ımn (E	B), line	10(c).) -			. ▶		991,571
				, 30,4	(2	,,c	\ - /·/	- •			 D (Form 99	

Part VII	Investments—Other Securities. Con See Form 990, Part X, line 12.	nplete if the organiz	zation answered 'Y	es' on Form 990, Part IV, line 11b
	(a) Description of security or category (including name of security)		(b) Book value	(c)Method of valuation Cost or end-of-year market value
	l derivatives			
(3)Other	-held equity interests			
	nn (b) must equal Form 990, Part X, col (B) line 12)	F		
Part VIII	Investments—Program Related. Complete if the organization answered	'Yes' on Form 990,	Part IV, line 11c.s	iee Form 990. Part X. line 13.
	(a) Description of investment		(b) Book value	(c) Method of valuation
				Cost or end-of-year market value
Part IX	on (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization	answered 'Yes' on Fo	orm 990, Part IV, line	11d See Form 990, Part X, line 15
	(a) Descri		,	(b) Book value
	RED COMPENSATION FUND OM SUBSIDIARY			1,393,084
	RED 457-B FUND			694,357
(4) DUE FR	OM AFFILIATES			3,49:
Total. (Colu	mn (b) must equal Form 990, Part X, col.(B) line 15	5.)		▶ 3,338,05!
Part X	Other Liabilities. Complete if the orga See Form 990, Part X, line 25.	nization answered	'Yes' on Form 990,	Part IV, line 11e or 11f.
1.	(a) Description of liability	(b) Book value		
Federal inc	ome taxes			
DEFERRED	COMPENSATION	1,393,0	84	
DEFERRED	457-B FUND	694,3	57	
		05.75		
			\dashv	
			\dashv	
Total (Colum	on (h) must equal Form 900. Part V. col (B) line 35.	▶ 2.087.4	41	
	nn (b) must equal Form 990, Part X, col (B) line 25)	2,00.71		

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	eturn
1	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	1	12 121 221
_	Total revenue, gains, and other support per audited financial statements		12,121,231
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII)............ <mark>2d</mark> 420,451		
e	Add lines 2a through 2d	2e	229,400
3	Subtract line 2e from line 1	3	11,891,831
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4 c	1,706,485
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	13,598,316
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s per	Return.
1	Total expenses and losses per audited financial statements	1	11,589,058
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	11,589,058
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4c	1,706,485
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	13,295,543

Part XIII Supplemental Information

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

Return Reference	Explanation
SCHEDULE D, PAGE 3, PART X	THE BOARD ADOPTED THE NEW ACCOUNTING FOR UNCERTAINTY IN INCOME TAX GUIDANCE WHICH CLARIFIES THE ACCOUNTING AND RECOGNITION FOR TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN ITS INCOME TAX RETURNS THE BOARD'S INCOME TAX FILINGS ARE SUBJECT TO AUDIT BY VARIOUS TAXING AUTHORITIES THE BOARD'S OPEN AUDIT PERIODS ARE 2012 TO 2015 IN EVALUATING THE BOARD'S TAX PROVISIONS AND ACCRUALS, FUTURE TAXABLE INCOME, THE REVERSAL OF TEMPORARY DIFFERENCES, INTERPRETATIONS AND TAX STRATEGIES ARE CONSIDERED MANAGEMENT OF THE BOARD BELIEVES THAT THEIR ESTIMATES ARE APPROPRIATE BASED ON THE CURRENT FACTS AND CONDITIONS
SCHEDULE D, PAGE 4, PART XI, LINE 2D	MINIMUM PENSION ADJUSTMENT 420,451
SCHEDULE D, PAGE 4, PART XI, LINE 4B	EDUCATION COSTS 429,565 LEASE FORMS COSTS 3,938 BANQUET PRINTING 70,665 DIARY COSTS 207,528 ANNUAL BANQUET COSTS 521,977 GOLF & TENNIS COSTS 72,256 MEMBERSHIP MEETINGS COSTS 393,556 ARBITRATION COSTS 7,000
SCHEDULE D, PAGE 4, PART XII, LINE 4B	EDUCATION COSTS 429,565 LEASE FORMS COSTS 3,938 BANQUET PRINTING 70,665 DIARY COSTS 207,528 ANNUAL BANQUET COSTS 521,977 GOLF & TENNIS COSTS 72,256 MEMBERSHIP MEETINGS COSTS 393,556 ARBITRATION COSTS 7,000

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2015

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DLN: 93493272000456

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

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.

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization THE REAL ESTATE BOARD OF

▶ Information about Schedule J (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

Inspection **Employer identification number**

NEW YORK INC 13-1201480 **Questions Regarding Compensation** Part I Yes No 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 Housing allowance or residence for personal use First-class or charter travel Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in 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 1b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the filing 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 Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 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 Receive a severance payment or change-of-control payment? Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Yes **4**c Participate in, or receive payment from, an equity-based compensation arrangement? Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 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 The organization? 5a 5b Any related organization? If "Yes," on line 5a or 5b, describe in Part III 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 The organization? 6a 6b Any related organization? If "Yes," on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns (B)(I)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
	Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation			
See Additional Data Table							

Schedule J (Form 990) 2015

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

Trovide the information, explanation, or descriptions required for rate 1, this section and description and descriptions required for rate 1, this section and description and					
Return Reference	Explanation				
SCHEDULE J, PAGE 1, PART I, LINE 4	STEVEN SPINOLA 0 10,000 0 MICHAEL SLATTERY 0 5,000 0 JOHN DOYLE 0 3,750 0				

Schedule J (Form 990) 2015

Software ID: Software Version:

EIN: 13-1201480

Name: THE REAL ESTATE BOARD OF

NEW YORK INC

(A) Name and Title		(B) Breakdown c	of W-2 and/or 1099-MIS	.SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
(., ,		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1STEVEN SPINOLAPRESIDENT	(1)			6,861	15,796	73,959	868,692	
1JOHN BANKSPRESIDENT	(1)			-	5,300	16,427	627,335	
2JAMES WHELANSENIOR VP	(1)		-	704	5,745	45,630	501,139	
3WILLIAM AUERBACHCFO	(1)		-	3,359	5,618	18,431	354,676	
4MICHAEL SLATTERY SENIOR VP	(1)			1,025	9,831	19,022	247,829	
5JOHN DOYLESENIOR VP	(1)			418	7,986	19,979	215,619	
6 JOSEPH BARBACCIA SENIOR VP	(1)				2,392	14,063	178,537	
7MARYANN AVILESVP	(1)		-	169	3,354	6,967	157,513	
8JAMIE MCSHANESENIOR VP	(1)			383	4,079	53,443	205,163	
9TRACEY MALLIN CONTROLLER	(1)			265	3,551	29,041	179,028	

DLN: 93493272000456

Schedule L

(Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

2015

OMB No 1545-0047

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Department of the Treasury Internal Revenue Service

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

Name of the org								En	nploye	r identi	ficatio	n number	r
NEW YORK INC									3-120				
							(4), and 501(c					406	
	ne of disqualif						25a or 25b, or fied person an			z, Part cription		<u>400</u> (d) Corr	ected?
1 (a) Nan	ie oi disquaiii	ieu pe	213011	(b) ive	•	ganızatıon	ned person and	"	•	saction	~'	Yes	No
												103	110
2 Enter the a	mount of tax	ıncur	red by orga	nization ma	anagers or dis	qualified pers	ons during the	yearı	under	section			
4958 .										> \$			
3 Enter the a	mount of tax	, ıf an	y, on line 2	, above, rei	mbursed by t	he organizatio	n			> \$			
	ans to and					0 FZ D+\/	l 20 E-		0 D-	+ T\/	- 26 -		
					on Form 99 90, Part X, lin		line 38a, or Fo)rm 99	U, Par	t IV, IIn	e 26, 0	orittie	
						,-,-							
(a) Name of	(b) Relation		(c)	(d) Loan		(e)Orıgınal	(f) Balance	(g)	In	(h)	(i)Wrı	tten
ınterested	rested with Purpose of			principal	due			Appro		agreen	nent?		
person		organızatı	on?	amount				by boa					
				То	From	1		Yes	No	Yes	No	Yes	No
					110111					1.55	"	1	
otal			▶ \$										
					iterested F								
Cor	mplete if the				"Yes" on Fo	orm 990, Pai	rt IV, line 27						
(a) Name of i			Relationshi		(c) A mount	of assistance	(d) Type	ofassı	stance	e (e)	Purpos	se of ass	ıstance
perso	n	ıntei	rested pers organiza										
			organiza		+					I			
					1								
					1								
					<u> </u>								
					†								
					1								
					1		1			 			

Part IV	Business	Transactions	Involvina	Interested	Persons

(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization revenues?		
			Yes	No	
				No	
BRD OF GOVENORS	217,662	LEGAL COUNSEL		No	
BRD OF GOVENORS	57,998	GOLF FACILITIES		No	
BRD OF GOVENORS	33,324	COURSE INSTRUCTOR	Yes		
SPOUSE TO PRES	56,792	EMPLOYMENT		No	
IN-LAW OF PRES	132,850	EMPLOYMENT		No	
				No	
BRD OF GOVENORS	498,440	LEGAL COUNSEL		No	
	between interested person and the organization BRD OF GOVENORS BRD OF GOVENORS BRD OF GOVENORS SPOUSE TO PRES IN-LAW OF PRES	between interested person and the organization BRD OF GOVENORS 217,662 BRD OF GOVENORS 57,998 BRD OF GOVENORS 33,324 SPOUSE TO PRES 56,792 IN-LAW OF PRES 132,850	between interested person and the organization BRD OF GOVENORS 33,324 COURSE INSTRUCTOR SPOUSE TO PRES 132,850 EMPLOYMENT IN-LAW OF PRES	between interested person and the organization BRD OF GOVENORS SPOUSE TO PRES 132,850 EMPLOYMENT	

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2015

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SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Name of the organization **Employer identification number** THE REAL ESTATE BOARD OF NEW YORK INC 13-1201480

Return Reference	Supplemental Information Explanation
FORM 990 - ORGANIZATION'S MISSION	1 TO UNITE IN COMMON ORGANIZATION THOSE PROFESSIONALLY ENGAGED IN REAL ESTATE 2 TO PROTECT AND PROMOTE THE MUTUAL INTERESTS OF ITS MEMBERS 3 TO FORMULATE AND MAINTAIN ETHICAL STANDARDS FOR THE GUIDANCE OF ITS MEMBERS IN THEIR RELATIONS WITH EACH OTHER AND THE PUBLIC 4 TO ADVOCATE NECESSARY PUBLIC IMPROVEMENTS AND OPPOSE UNNECESSARY OR WASTEFUL EXPENDITURES OF PUBLIC FUNDS 5 TO PROMOTE AND ENCOURAGE THE ENACTMENT OF JUST AND REASONABLE LAWS AND ORDINANCES AFFECTING REAL ESTATE AND TO OPPOSE THOSE THAT WOULD BE UNJUST AND UNREASONABLE 6 TO SUPPLY MEMBERS WITH INFORMATION THEY NEED TO MAKE SOUND BUSINESS DECISIONS 7 TO HELP REAL ESTATE PROFESSIONALS MEET STATE GOVERMENT LICENSING STANDARDS
FORM 990, PAGE 2, PART III, LINE 4A	PROFESSIONALS AND WITH THE PUBLIC THE RESEARCH DEPARTMENT, ALSO AT MEMBERS DISPOSAL, UNDE RTAKES PROJECTS TO INVESTIGATE CURRENT RESIDENTIAL AND COMMERCIAL ISSUES OF IMPORTANCE TO THE INDUSTRY, TOPICS HAVE INCLUDED RESIDENTIAL CONVERSION TRENDS AND ENERGY CONSERVATION T ECHNIQUES IN HIGH-RISE OFFICE BUILDINGS A ZONING EXPERT IS ALSO ON HAND TO FIELD A WIDE R ANGE OF INQUIRIES THIS DEPARTMENT PUBLISHES A NUMBER OF IMPORTANT PERIODICALS, INCLUDING THE ANNUAL DIARY & MANUAL, WHICH IS CONSIDERED REAL ESTATES ALMANAC REBNY'S SEYMOUR B DUR ST LIBRARY, LOCATED AT THE MIDTOWN OFFICE, MAINTAINS THE LARGEST COLLECTION OF REAL ESTATE -RELATED INFORMATION OF ANY NEW YORK CITY TRADE ASSOCIATION ASIDE FROM SCORES OF PROFESSI ONAL JOURNALS, PERIODICALS AND REPORTS ON INDUSTRY TOPICS, IT CONTAINS UP-TO-DATE COMPUTER IZED OWNERSHIP AND MORTGAGE INFORMATION FILES ON PROPERTIES IN ALL FIVE BOROUGHS, AS WELL AS ASSESSED VALUATION LISTINGS AND CURRENT PROPERTY MAPS THE BOARD PROVIDES MEDIATION WHE IN NECESSARY TO SETTLE DISPUTES WHETHER BETWEEN MEMBERS, BETWEEN MEMBERS AND THEIR FIRMS OR BETWEEN MEMBERS AND NON-MEMBERS A QUALIFIED MEDIATOR THAT IS ACCEPTABLE TO BOTH PARTIES WILL HANDLE THE MEDIATION ONCE THE PARTIES REACH AN AGREEMENT, IT IS PUT IN WRITING SHOU LD AN AGREEMENT NOT OCCUR, THE PARTIES MAY SUBMIT TO BINDING ARBITRATION THE REBNY LISTIN G SERVICE (RLS) IS A SHARING OF LISTINGS AVAILABLE TO ALL REBNY FIRMS THAT ARE MEMBERS OF THE RESIDENTIAL BROKERAGE DIVISION AND NON-MEMBER FIRMS THAT RECEIVE REVENUE FROM THE SALE OR RENTAL OF RESIDENTIAL PROPERTY LOCATED IN THE JURISDICTIONS AUTHORIZED BY THE RESIDENT IAL BOARD OF DIRECTORS THIS SYSTEM MANDATES THAT WITHIN 24 HOURS OF BEING BNGAGED AS AN E XCLUSIVE AGENT, EVERY RLS MEMBER MUST INITIATE AN OFFER OF CO-BROKERAGE OF ALL EXCLUSIVE S ALLE OR RENTAL LISTINGS LOCATED IN THE SAID JURISDICTIONS TO EVERY OTHER MEMBER OF THE RLS SYSTEM WHO HAS EXPRESSED IN WRITING AN INTEREST IN RECEIVING SUCH LISTINGS, UNLESS DIRECTE D NOT TO DO SO BY THE SELLER
FORM 990, PAGE 6, PART VI, LINE 2	STEVEN SPINOLA EILEEN SPINOLA PRESIDENT SENIOR VP FAMILY RELATIONSHIF
FORM 990, PAGE 6, PART VI, LINE 6	THE REAL ESTATE BOARD OF NEW YORK HAS VARIOUS MEMBER CLASSIFICATIONS
FORM 990, PAGE 6, PART VI, LINE 7A	CONFLICT
FORM 990, PAGE 6, PART VI, LINE 7B	THE FOLLOWING MEMBER CLASSIFICATIONS HAVE VOTING RIGHTS OF DECISIONS OF THE GOVERNING BODY TO APPROVAL, BROKER A, MANAGEMENT A, OWNER A, BROKER B, MANAGEMENT B, OWNER AAA, OWNER B, INSTITUTIONAL OWNER, APPRAISER A
FORM 990, PAGE 6, PART VI, LINE 11B	THE FEDERAL FORM 990 IS REVIEWED AND APPROVED BY THE PRESIDENT AND CHIEF FINANCIAL OFFICER PRIOR TO FILING
FORM 990, PAGE 6, PART VI, LINE 12C	CONFLICT OF INTEREST POLICY SENT ON AN ANNUAL BASIS AND THEN IT IS REVIEWED BY THE CFO
FORM 990, PAGE 6, PART VI, LINE 19	GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC THROUGH THE PUBLISHED ANNUAL DIARY AN D THE ORGANIZATION'S WEBSITE IN THE MEMBERS SECTION
FORM 990, PART XI, LINE 9	MINIMUM PENSION ADJUSTMENT 420,451 EDUCATION COSTS -429,565 LEASE FORMS COSTS -3,938 BANQU ET PRINTING -70,665 DIARY COSTS -207,528 ANNUAL BANQUET COSTS -521,977 GOLF & TENNIS COSTS -72,256 MEMBERSHIP MEETINGS COSTS -393,556 ARBITRATION COSTS -7,000 EDUCATION COSTS 429,5 65 LEASE FORMS COSTS 3,938 BANQUET PRINTING 70,665 DIARY COSTS 207,528 ANNUAL BANQUET COST S 521,977 GOLF & TENNIS COSTS 72,256 MEMBERSHIP MEETINGS COSTS 393,556 ARBITRATION COSTS 7,000 TOTAL 420,451

DLN: 93493272000456

OMB No 1545-0047

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SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization THE REAL ESTATE BOARD OF NEW YORK INC

Employer identification number

13-1201480

(a)	(b)	(c)	(d)	(e)		(f)		
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets		Direct controlling entity		
Part II Identification of Related Tax-Exempt Org	 	 the organization an	 swered "Yes" (on Form 990, Pa	rt IV.	line 34 because it	had on	e
or more related tax-exempt organizations dur		(c)	(d)	(e)		(f)		g)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code sect	tion Public charity (if section 501	status (c)(3))	Direct controlling entity	Section (13) co	า 512(b
							Yes	No
(1)THE REBNY FOUNDATION INC 570 LEXINGTON AVENUE	GRANTS	NY	501C3	PF		N/A		No
NEW YORK, NY 10022 13-3317104						14,77		
(2)TAXPAYERS FOR AN AFFORDABLE NY INC 570 LEXINGTON AVENUE	SOCIAL WEL	NY	501C4			N/A		No
NEW YORK, NY 10022 13-3606190						N/A		
(3)PUTTING NEW YORKERS TO WORK INC 570 LEXINGTON AVENUE	SOCIAL WEL	NY	501C4			N/A		No
NEW YORK, NY 10022 27-3710229						N/A		
(4)REAL ESTATE BOARD POLITICAL ACTION COMMITTEE570 LEXINGTON AVENUE	PAC	NY	527			N/A		No
NEW YORK, NY 10022 13-3098933						N/A		
(5)TAXPAYERS FOR AN AFFORDABLE NY PAC 570 LEXINGTON AVENUE	PAC	NY	527			N/A		No
NEW YORK, NY 10022 13-4040882						N/ A		
(6)JOBS FOR NEW YORK INC 570 LEXINGTON AVENUE	PAC	NY	527			N/A		No
NEW YORK, NY 10022 46-2319872						IV/ A		

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "	Yes"	on Form 990,	Part IV,	, line 34
	because it had one or more related organizations treated as a partnership during the tax year.				

(a) Name, address, and EIN of related organization	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop alloca	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	parti	ral or l iging	(k) Percentage ownership
			32.7			Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section (b)(i contro entit	13) olled ty?
(1)RESIDENTIALNYC INC 570 LEXINGTON AVENUE NEW YORK, NY 10022 26-0290087	R/E LSTNG	NY	REBNY	C CORP			Yes	No No

Part V Transactions With Related Organizations Complete if the organization answ	vered "Yes" on Form	990, Part IV, line	34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
f 1 During the tax year, did the orgranization engage in any of the following transactions with one or more	related organizations li	sted in Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No
b Gift, grant, or capital contribution to related organization(s)				1b		No
c Gift, grant, or capital contribution from related organization(s)				1c		No
d Loans or loan guarantees to or for related organization(s)				1d		No
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				1g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1i		No
j Lease of facilities, equipment, or other assets to related organization(s)				1j		No
L. Lanca of family has a suppressed an abban analytic form unlabed a suppression (a)				1k		No
k Lease of facilities, equipment, or other assets from related organization(s)				11		No
Performance of services or membership or fundraising solicitations for related organization(s)				1m		No
m Performance of services or membership or fundraising solicitations by related organization(s)				1n	Voc	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				\vdash		
• Sharing of paid employees with related organization(s)				10	Yes	
p Reimbursement paid to related organization(s) for expenses				1р		No
q Reimbursement paid by related organization(s) for expenses				1q		No
r Other transfer of cash or property to related organization(s)				1r		No
s Other transfer of cash or property from related organization(s)				1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must comple	te this line, including co	vered relationships	and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount in	volved	
L)REAL ESTATE BOARD POLITICAL ACTION COMMITTEE	0	90,490	INVOICES			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

	revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships (b) (c) (d) (e) (f) (d) (h) (i) (i)													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?	_	(k) Percentage ownership	
			314)	Yes	No			Yes	No		Yes	No		
												1 1		
			•		•							_		

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2015

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Additional Data

Software ID:

Software Version:

EIN: 13-1201480

Name: THE REAL ESTATE BOARD OF

NEW YORK INC

Form 990, Schedule R, Part II - Identification of Rela	ted Tax-Exempt (Organizations					
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Sectio (b)(contr enti	n 512 13) olled
						Yes	No
THE REBNY FOUNDATION INC 570 LEXINGTON AVENUE NEW YORK, NY 10022 13-3317104	GRANTS	NY	501C3	PF	N/A		No
TAXPAYERS FOR AN AFFORDABLE NY INC 570 LEXINGTON AVENUE NEW YORK, NY 10022 13-3606190	SOCIAL WEL	NY	501C4		N/A		No
PUTTING NEW YORKERS TO WORK INC 570 LEXINGTON AVENUE NEW YORK, NY 10022 27-3710229	SOCIAL WEL	NY	501C4		N/A		No
REAL ESTATE BOARD POLITICAL ACTIONCOMMITTEE 570 LEXINGTON AVENUE NEW YORK, NY 10022 13-3098933	PAC	NY	527		N/A		No
TAXPAYERS FOR AN AFFORDABLE NY PAC 570 LEXINGTON AVENUE NEW YORK, NY 10022 13-4040882	PAC	NY	527		N/A		No
JOBS FOR NEW YORK INC 570 LEXINGTON AVENUE NEW YORK, NY 10022 46-2319872	PAC	NY	527		N/A		No