Form **990**

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see the separate instructions. DAA

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2018
Open to Public Inspection

For the 2018	calendar year, or tax year beginning , and ending			
3 Check if applicable	C Name of organization		D Employe	r Identification number
Address change	Longleaf Pine REALTORS, Inc.			
≒ `	Doing business as		56-1	086064
Name change	Number and street (or P O box if mail is not delivered to street address)	Room/sui		
Initial return	P.O. Box 53189		910-	323-1421
Final return/	City or town, state or province, country, and ZIP or foreign postal code			
J terminated	Fayetteville NC 28305		G Gross rec	eipts\$ 3,517,5
Amended return	F Name and address of principal officer	<u> </u>	0 0,000 100	
Application pending	Lisa Geddie	H(a) is	s this a group return for si	ubordinates? 💹 Yes 🛛 🛚
	PO Box 53189	H(b) A	Are all subordinates incli	uded? Yes
		1 ''''	If "No," attach a list	
	Fayetteville NC 28305	$-N_{\theta}$	rro, andorra not	(300 11.01.001010)
Tax-exempt status		527 0 4		
Website	www.fayettevillencrealtors.com		Group exemption number	
Form of organizatio	n X Corporation Trust Association Other ▶	L Year of form:	ation 1969	M State of legal domicile
Part I S	ummary			
1 Briefly o	lescribe the organization's mission or most significant activities			
see ب	Schedule O			
<u>'</u>				
<u>:</u>				
See 2 Check t	his box ▶ ☐ if the organization discontinued its operations or disposed of m	ara than 25% of its	not oppose	
2 Check t		ore than 25% or its	1 - 1	1 /
	of voting members of the governing body (Part VI, line 1a)		3	14
4 Number	of independent voting members of the governing body (Part VI, line 1b)		4	14
5 Total nu	imber of individuals employed in calendar year 2018 (Part Vrline 2a)		5	9
6 Total nu	imber of volunteers (estimate if necessary)		6	0
7a Total un	related business revenue from Part VIII, column (C), line 12		7a	1,537,1
b Net unre	elated business taxable income from Form 990-T, line 38		7b	439,8
			Prior Year	Current Year
8 Contribu	ent income (Part VIII, column (A), lines 3, 4, and 7d)	<i>⟨</i> ⟩		
9 Program	n service revenue (Part VIII, line 2g)		816,500	894,8
10 Investm	ent income (Part VIII, column (A), lines 3, 4, and 7d)		206,528	277,2
11 Other re	evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 14g)		,473,642	1,540,6
1	venue – add lines 8 through 11 (must equal Part VIII, column (A) line (2)	$\sqrt{9}$,496,670	2,712,6
	and similar amounts and (Part IV solume (A) lines 1.3)	8/	7 1 2 0 7 0 7 0	2//12/0
1	, , , , , , , , , , , , , , , , , , ,	<i>/</i> —		
1	s paid to or for members (Part IX, column (A), line 4)	´	442 671	400 5
? <u> </u>	s, other compensation, employee benefits (Part IX, column (A), lines 5–10)		443,671	488,5
16a Profess	ional fundraising fees (Part IX, column (A), line 11e)			
b Total fu	ndraising expenses (Part IX, column (D), line 25) ▶	0		
17 Other ex 18 Total ex 19 Revenu	xpenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	,790,521	1,783,5
18 Total ex	penses Add lines 13–17 (must equal Part IX, column (A), line 25)		,234,192	2,272,0
19 Revenu	e less expenses Subtract line 18 from line 12		262,478	440,6
Ses		Beginnir	ng of Current Year	End of Year
🗐 20 Total as	sets (Part X, line 16)	4	,482,670	4,502,7
<u> </u>	bilities (Part X, line 26)		124,315	123,0
디	ets or fund balances Subtract line 21 from line 20	4	,358,355	4,379,7
	ignature Block		, , , , , , , , , , ,	
			4a 4ba b 4 - 1	andada a tra
under penalties of	f perjury, to clare that I have examined this return, including accompanying schedules complete Declaration of preparer (other than officer) is based on all information of whice	and statements, and the preparer has any ki	to the best of my kni nowledge	owiedge and belief, it is
inde, correct, and	complete based on or preparer (other than officer) is based on an information of which	Tr preparer rias arry ki	nomedge 1	/1 / 10E
	figures of tho			אעג זטי
ign 🚩	Signature of officer		Dăte	
ere 📗	<u>Leonidas Monroe</u>	Executive	V <u>P</u>	
	Type or print name and title			
Print/Ty	pe preparer's name Preparer's signature		Date Check	ıf PTIN
ia ((b. 1= 00 and	DO A CDA I	5-8-19 self-em	□ "[
enarer David		4.1/ A-1	<u>-</u>	
e Only	······································		Firm's EIN	56-133452
~ ~y	572 Executive Place			010 000 01
Firm's a	ddress ▶ Fayetteville, NC 28305		Phone no	910-323-31
ay the IRS discu	iss this return with the preparer shown above? (see instructions)			Yes

Form 990 (2018)

DAA

Dart IV	Chacklist	of Required Schedules
Part IV	Lnecklist	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,"	4		
•	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Λ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If		j	v
_	"Yes," complete Schedule D, Part I	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		Х
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
٠	complete Schedule D, Part III	8		Χ
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		_X_
0	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		<u> X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11 <u>b</u>		X
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u>X</u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u>X</u>
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	İ	v
_	Schedule D, Parts XI and XII	12a		<u>X</u>
þ	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		Χ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	- 10 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	144		
_	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	ŀ	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Χ
6	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		<u>X</u>
7	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		_X_
8	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		<u>X</u>
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	!	ł	, .
	If "Yes," complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	 +	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			v
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Χ

	n 990 (2018) Longleaf Pine REALTORS, Inc. 56-1086064		F	age ·
P	artiiv Checklist of Required Schedules (continued)		Γ.,	١
22	Plul the accomplished appears there #5 000 of accepts on other acceptance to acfer demonstrating individuals an		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		 	\ \frac{\Lambda}{\Lambda}
25	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
	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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		ļ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			1
	19? Note. All Form 990 filers are required to complete Schedule O	38	Χ	<u> </u>
Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Oneck is ochequie o contains a response of flote to any line in this Part v		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
þ	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0		1.	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		, a 15	

reportable gaming (gambling) winnings to prize winners?

Pe	• Statements Regarding Other IRS Filings and Tax Compliance (contin	ueu)			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	<u>2</u> a	9			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined	rns?		2b	X	ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	X	├
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule			3b	Х	
4a						
	a financial account in a foreign country (such as a bank account, securities account, or other financial	l accou	int)?	4a	ļ	X
b	If "Yes," enter the name of the foreign country					
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accoun	ts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			_ <u>5a</u>	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.	ction?		5b_		Χ
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c_		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ie				
	organization solicit any contributions that were not tax deductible as charitable contributions?			<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or] .	ļ
_	gifts were not tax deductible?			6b		 -
7	Organizations that may receive deductible contributions under section 170(c).					
а	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?	_		7 <u>b</u>		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ıs				
	required to file Form 8282?	7a		7c		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			7e		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contribute organization during the year pay promiums directly or adjusted to a personal benefit contribute.		•	7 6		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri-		O ac roquired?	7 <u>1</u>		
g h	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7 <u>9</u> 7h	-	
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations maintaining donor advised funds. Did a donor advised fund maintaine			/ II		
٠	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaining sponsoring organization have excess business holdings at any time during the year?	o by air	C	8		
9	Sponsoring organizations maintaining donor advised funds.			"		 -
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter			35		
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	10b				
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders	11a				
ь	Gross income from other sources (Do not net amounts due or paid to other sources					}
_	against amounts due or received from them)	11b				Ī
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	$\overline{}$,	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O					
b	Enter the amount of reserves the organization is required to maintain by the states in which					
	the organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	9 O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune		or			
	excess parachute payment(s) during the year?			15		Х
	If "Yes," see instructions and file Form 4720, Schedule N					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incom	e?	16_		X
	If "Yes," complete Form 4720, Schedule O					
					000	.

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Pa	art VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Se	e instr	ructio.	
	Check if Schedule O contains a response or note to any line in this Part VI			X_
Sec	tion A. Governing Body and Management			 -
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 14	_		
	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	ĺ		[
	committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	ļ	X
3	Did the organization delegate control over management duties customarily performed by or under the direct			1
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4_		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5_		X
6	Did the organization have members or stockholders?	6	X	L
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7 <u>a</u>	Ĺ	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	1		
	stockholders, or persons other than the governing body?	7b_		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Χ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Χ
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	ode.)		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		<u>L</u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			<u> </u>]
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Χ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	Í		
а	The organization's CEO, Executive Director, or top management official	15a	Χ	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		<u>.</u>	
	with a taxable entity during the year?	16a		X
ь				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	ĺ		
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ NC			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	ane Cannon 2412 Raeford Road			
		-32	3-1	421

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¬ n –			$\boldsymbol{\kappa}$	n		n 4	

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

(A) Name and Title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe nd a d	erson	than on is both a or/trustee	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1033-IIII3C)	organization and related organizations
(1) Jay Dowdy	2 22									
Past President	2.00	X						0	o	0
(2) Michelle Morris	0.00	$\uparrow \uparrow \uparrow$		-		T				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2.00			ĺ						
MLS Chairman	0.00	X						0	0	0
(3) James Sherrill										
	2.00								_	_
Director	0.00	X		_	_	├ -├		0	0	0
(4) Laurie Linder	0.00		ł							
Dimanton	2.00	X				1 1		0	0	0
Director (5) Chet Oehme	0.00	12	\vdash			╁╌╁			<u> </u>	<u> </u>
(3) Chet Genne	2.00		ļ							
Director	0.00	X						0	0	0
(6) Soni Rider										
	2.00		1		ļ					
<u>Director</u>	0.00	X						0	0	0
(7) Willie Snow					ĺ	ΙÏ				
	2.00	l							_	
Director	0.00	X	-	<u> </u>	_	\vdash		0	0	0
(8) Jimmy Townsend	2.00									
Director	0.00	X	}	l	ł	} }		0	0	0
(9) Lisa Geddie	0.00	┢				 	_			
(o) 113a dedate	10.00									
President	0.00			X				o	0	0
(10) Rosemary Buerger										
	5.00									
Vice President	0.00		<u> </u>	X		\sqcup		0	0	0
(11)Gene Cooper										
	2.00	1							_	
VP, Education	0.00	Щ.		Χ				0	0	0
UAA										Form 990 (2018)

_	_	-	_	_	_	_	_	
ᄃ	6-	7	n	o	6	n	61	1
.)	o -	_	U	$^{\circ}$	O	u	t) -	ŧ

Part VIII Section A. Officers	, Directors, Tru	istee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)	
(A) Name and title			Pos check ess pe nd a c	erson directo	s both r/trust	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
	related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(12) Queen Wheeler										
VP, Membership	2.00			Х				0	0	
(13) David Sattelr										
VP, Public Relations	2.00 0.00			Х				0	0	(
(14) Suzanne Penn:	1									
Secretary Treasurer	2.00 0.00			х				0	0	
	_	ļ	ļ					_		
		_	_							
		<u> </u>	ļ							
1b Sub-total	<u> </u>	<u>l</u>	1		<u> </u>	L	>			
c Total from continuation shed d Total (add lines 1b and 1c)	ets to Part VII, S	Sect	ion /	4			>			
2 Total number of individuals (in				thos	e lis	ted a	bov	e) who received more than	\$100,000 of	
reportable compensation from								<u></u>		Yes No
3 Did the organization list any for employee on line 1a? If "Yes,"	complete Sche	dule	J for	suc	h inc	lividu	ıaİ			3 X
4 For any individual listed on line organization and related organ										
individual 5 Did any person listed on line 1	a receive or acc	rue	comi	oens	atıor	fron	n an	y unrelated organization or	· individual	4 X
for services rendered to the or	ganization? If "Y									5 X
1 Complete this table for your five	ve highest comp									
compensation from the organi	zation Report c (A) business address	omp	ensa	tion	for t	ne ca	lend		in the organization's tax ye (B) bon of services	ear (C) Compensation
Name and	business address		-					Descrip	uon of services	Compensation
										
								**		
							_			
2 Total number of independent of received more than \$100,000	contractors (incli of compensation	uding <u>fr</u> or	but <u>n</u> the	not org	lımıte anız	ed to ation	tho: ▶	se listed above) who	0	
DAA										Form 990 (2018

Pa	rt V	III Staten	nent of Reve	e <mark>nue</mark> O con	tains a	response (or note to any line	ın thıs Part VIII		
		<u> </u>	<u></u>	<u> </u>			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
15 to	1a	1a Federated campaigns 1a 1b						TOVENIGO		
ğa										
S, C	c	c Fundraising events d Related organizations 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								:
탪	d									1
Program Service Revenue Contributions, Gifts, Grants Amounts Amounts	е	Government grants ((contributions)	1e						1
	f	f All other contributions, gifts, grants,								!
the the		and similar amounts	not included above	1f			•			ļ
	g	Noncash contribution	ns included in lines 1a-	-1f S	6					
<u>ခ လ</u>	h	Total. Add line	s 1a_1f							
a l						Busn Code				
Ver	2a	Members	nıp Dues				881,858	881,858		
2	b	Program	Service Rev	enue			12,964	12,964		
ğ	С									
Sel	d									
Tam.	е									
<u>g</u>			am service reve	nue						
<u>a</u>	g	Total. Add line					894,822		·	
	3		come (including	dıvıden	ds, intere	st,	100 515			100 515
		and other simi	•				102,515			102,515
	4 Income from investment of tax-exempt bond proce					roceeds 🕨				
	5	Royalties		Т			- 			
			(ı) Real		(II) F	Personal				*
	6a	Gross rents								•
	b	Less rental exps								
	С	Rental inc or (loss)							<u></u>	
	d 7a	Net rental inco				<u> </u>				
		sales of assets			Other					
		other than inventory 979, 626								
	þ	Less cost or other	004	007						
		basis & sales exps		, 887 730	-					
	C	Gain or (loss)		,739	l		174,739	174,739		
	d	Net gain or (lo	•				174,739	1/4,/39		
ne	Вa		om fundraising eve	ents						
Ven		(not including \$	dad on long for	,						
Other Revenue		See Part IV, line	reported on line 1c	·						
Jer	.			a b						
ö		Less direct ex	(loss) from fund	(events					
			om gaming activitie	r	events					
	Ja	See Part IV, line		a						
	h	Less direct ex		ь	-					
			(loss) from gan	(tivities					
			f inventory, less							
	100			а						
	h	returns and allowances a b Less cost of goods sold b								
			(loss) from sale	1	ventorv					
	Ť		cellaneous Revenue			Busn Code				
	11a	Real Esta	te Multiple	List	ıng	531390	1,537,163		1,537,163	
	ь	Other Inc	•		-		2,661			
	C		ax Refund				790			
	d	All other rever								
	e	Total. Add line					1,540,614			
	12	Total revenue	e. See instructio	ns		>	2,712,690		1,537,163	102,515

	Check if Schedule O contains a resp			<u> </u>	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				_
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	<u></u>			
7	Other salaries and wages	435,255			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	19,486		_	
9	Other employee benefits				
10	Payroll taxes	33,804			
11	Fees for services (non-employees)				
а	Management				
b	Legal	2,095			
C		14,059			
d	Lobbying				·
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	53,514			
g	· •				
	(A) amount, list line 11g expenses on Schedule O)				
12	Janes Programme	11,339			
13	Office expenses	4,541			
14	Information technology				
15	Royalties				
16	Occupancy	32,881			
17	Travel	4,309			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	014 646			
19	Conferences, conventions, and meetings	214,646			
20	Interest				
21	Payments to affiliates	15 710			
22	Depreciation, depletion, and amortization	15,718			
23	Insurance	6,836			
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If		1		
	line 24e amount exceeds 10% of line 25, column			,	
_	(A) amount, list line 24e expenses on Schedule O) Real Estate Multiple List	742,302			
a	Dues	478,710			
b	Income Taxes - Federal	92,362			
c d	Education	30,696			
		79,495			
e 25	' ' '	2,272,048	0	0	0
25 26	Total functional expenses Add lines 1 through 24e Joint costs. Complete this line only if the	4,412,040			
	organization reported in column (B) joint costs		ļ		
	from a combined educational campaign and				
	fundraising solicitation Check here ► if following SOP 98-2 (ASC 958-720)				•

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 216,379 162,893 1 Cash-non-interest bearing 33,284 37,702 2 Savings and temporary cash investments Pledges and grants receivable, net 3 3 28,193 20,416 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L 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 Notes and loans receivable, net 38,136 26,675 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 370,035 other basis Complete Part VI of Schedule D 10a 100,733 95,967 274,068 b Less accumulated depreciation 10b 4,073,722 4,128,639 11 Investments—publicly traded securities 11 12 12 Investments—other securities See Part IV, line 11 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 4,482,670 4,502,790 16 Total assets. Add lines 1 through 15 (must equal line 34) 55,535 17 Accounts payable and accrued expenses 17 18 Grants payable 18 68,780 112,325 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 315 123,059124. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 4,358,355 27 4,379,731 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 4,358,355 4,379,731 33 Total net assets or fund balances 4,502,790 Total liabilities and net assets/fund balances 4,482,670

orm	1990 (2018) Longleaf Pine REALTORS, Inc. 56-1086064			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	,	 		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	 2,7		
2	Total expenses (must equal Part IX, column (A), line 25)	2	 <u>2,2</u>	72,	<u>048</u>
3	Revenue less expenses Subtract line 2 from line 1	3	 		<u>642</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			<u>355</u>
5	Net unrealized gains (losses) on investments	5	-4	19,	<u> 266</u>
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	_		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	4,3	79,	<u>731</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	_			
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	_			
	Schedule O		l	l 	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both		1	·	
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Χ
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		1	1	
	separate basis, consolidated basis, or both	,			
	Separate basis Consolidated basis Both consolidated and separate basis		- 		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		 3b		L
			For	m 990	(2018)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

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

OMB No. 1545-0047
2018
Open to Public

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

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

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

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

Nam	e of organization	Employer ident	Employer identification number						
	Longleaf Pine REALT	ORS, Inc.		<u> 56-10860</u>	64				
Pa	tili-A Complete if the organization is exem	pt under section 501(c) or is a sectio	n 527 organizatio	on.				
1	1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for								
	definition of "political campaign activities")								
2	Political campaign activity expenditures (see instructions)			▶ \$					
3	Volunteer hours for political campaign activities (see instru		 						
Ra	till B Complete if the organization is exem	npt under section 501(c	:)(3)						
1	Enter the amount of any excise tax incurred by the organiz	ation under section 4955		▶ \$					
2	Enter the amount of any excise tax incurred by organization	n managers under section 495	55	▶ \$					
3	If the organization incurred a section 4955 tax, did it file Fo	orm 4720 for this year?			∐ Yes ∐ No				
	Was a correction made?				Yes No				
==	If "Yes," describe in Part IV		1 4	504()(0)					
	Complete if the organization is exem			on 501(c)(3).					
1	Enter the amount directly expended by the filing organization	on for section 527 exempt fund	ction						
_	activities			▶ \$					
2	Enter the amount of the filing organization's funds contribu	ted to other organizations for s	section						
_	527 exempt function activities	<u></u>		▶ \$					
3	Total exempt function expenditures Add lines 1 and 2 Ent	ter here and on Form 1120-PC)L,						
	line 17b	•		▶ \$	□v □ v-				
4	Did the filing organization file Form 1120-POL for this year			na ta which the files	∐ Yes ∐ No				
5	Enter the names, addresses and employer identification no	• •							
	organization made payments. For each organization listed	•							
	the amount of political contributions received that were pro		, ,	-					
	as a separate segregated fund or a political action commit		1		(a) Amount of polytool				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and				
				funds If none, enter -0-	promptly and directly				
					delivered to a separate political organization				
					If none, enter -0-				
(1)									
` '									
(2)									
(3)									
(4)									
(5)									
				·					
(6)									
			<u> </u>		<u></u>				

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

Schedule C (Form 990 or 990-EZ) 2018 Lon	gleaf Pine F	REALTORS, I	inc.	56-1086064	Page 2
				d filed Form 5768 (ele	
<u>section 501(h)).</u>					
. —		- · ·		ch affiliated group memb	er's name,
·	nses, and share of exc	· - ·	•		
B Check ▶ ☐ if the filing organization	tion checked box A ar	nd "limited control"	provisions app	<u>ly</u>	
Limits on I	obbying Expendit	ures		(a) Filing	(b) Affiliated
(The term "expenditure				organization's totals	group totals
1a Total lobbying expenditures to influence	· · · · · · · · · · · · · · · · · · ·		}		
b Total lobbying expenditures to influence		ct lobbying)	}		
c Total lobbying expenditures (add lines	1a and 1b)		-		
d Other exempt purpose expenditures			ŀ		
e Total exempt purpose expenditures (ac	•		F		
f Lobbying nontaxable amount Enter the	e amount from the follow	ing table in both			
columns					
If the amount on line 1e, column (a) or (i		ntaxable amount is:			•
Not over \$500,000	20% of the amoun				
Over \$500,000 but not over \$1,000,000		6 of the excess over \$50			
Over \$1,000,000 but not over \$1,500,000		6 of the excess over \$1,			
Over \$1,500,000 but not over \$17,000,000		of the excess over \$1,5	000,000		
Over \$17,000,000	\$1,000,000	-		·	
g Grassroots nontaxable amount (enter 2	•		F		
h Subtract line 1g from line 1a If zero or			ŀ		
i Subtract line 1f from line 1c If zero or	•	did the ergenization	file Form 4720	l_	· · · · · · · · · · · · · · · · · · ·
j If there is an amount other than zero o		did the organization	ille Fullii 4720		Yes No
reporting section 4911 tax for this year			704/1		1 163 110
(0)		ng Period Under			
(Some organizations that m	ade a section 501(n See the separate ii				ins below.
	Lobbying Expenditu	ures During 4-Yea	r Averaging P	eriod	
			T		
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
beginning in/					
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures	· [

Schedule C (Form 990 or 990-EZ) 2018

	(election under section 501(h)).	(a	3)	(I	o)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	No	Amo	Amount		
1	During the year, did the filing organization attempt to influence foreign, national, state, or local		-			
	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of					
	Volunteers?					
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		 			
	Media advertisements?		_			
	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?					
	Frants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
	Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	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)?					
t	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						
_	I ft the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
<u>LPa</u>	rt III-A Complete if the organization is exempt under section 501(c)(4), section 5	01(c)(5),	or se	ction		
	501(c)(6).		 -		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	163	X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	X	<u> </u>
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior y	ear?		3		Х
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 5		or se	ction		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."	," OR (b)) Part	III-A, line	3, is	
	Dues, assessments and similar amounts from members		1			
1						
1 2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		1			
_	political expenses for which the section 527(f) tax was paid).					
2			2a			
2	political expenses for which the section 527(f) tax was paid).		2b	.		
2	political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total		2b 2c			
2	political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		2b			
2	political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		2b 2c		-	
2	political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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		2b 2c 3			
2 1 3 4	political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		2b 2c			

2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Page 4

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No 1545-0047 Open to Public

Name	of the organization		Employer i	dentification number
т	ongloof Dino DENIMODS Inc		56_10	106064
	ongleaf Pine REALTORS, Inc. Inc. Organizations Maintaining Donor Advised Fu	unds or Other Similar Funds or		086064
Ų-Ç	Complete if the organization answered "Yes" on		Account	5.
		(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that	at the assets held in donor advised		
	funds are the organization's property, subject to the organization's exc	clusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in	n writing that grant funds can be used		
	only for charitable purposes and not for the benefit of the donor or don	nor advisor, or for any other purpose		
	conferring impermissible private benefit?	·- <u></u> -		Yes No
Pa	Conservation Easements.			
	Complete if the organization answered "Yes" on			
1	Purpose(s) of conservation easements held by the organization (check			
	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically im		area
	Protection of natural habitat	Preservation of a certified histor	nc structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conse	ervation contribution in the form of a cons		
	easement on the last day of the tax year			leld at the End of the Tax Year
a	Total number of conservation easements		2a	
þ	Total acreage restricted by conservation easements		2b	
C		, ,	2c	
a	Number of conservation easements included in (c) acquired after 7/25.	/06, and not on a		
_	historic structure listed in the National Register	Annual of the second by the consumer	2d	4b =
3	Number of conservation easements modified, transferred, released, ex	xtinguished, or terminated by the organiza	ation during	tne
	tax year >	Innated N		
4	Number of states where property subject to conservation easement is			
5	Does the organization have a written policy regarding the periodic mor violations, and enforcement of the conservation easements it holds?	intoring, inspection, nanding or		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of	of violations, and enforcing conservation.	assamants	
٠	Total and volunteer flours devoted to floring inspecting, flanding to	of violations, and emorcing conservation	Cascinicins	during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of vic	plations, and enforcing conservation ease	ments durin	o the vear
-	▶ \$, and an an an a		3 7
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)	(ı)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation easern	nents in its revenue and expense stateme	ent, and	
	balance sheet, and include, if applicable, the text of the footnote to the	e organization's financial statements that	describes th	e
	organization's accounting for conservation easements			
Pe	Organizations Maintaining Collections of Art,		Similar A	Assets.
	Complete if the organization answered "Yes" on			
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), r			eet
	works of art, historical treasures, or other similar assets held for public			
	public service, provide, in Part XIII, the text of the footnote to its finance			
D	If the organization elected, as permitted under SFAS 116 (ASC 958), t	·		
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furti	nerance of	
	public service, provide the following amounts relating to these items			¢.
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	(ii) Assets included in Form 990, Part X	s other complex counts for financial and	easuala 45 -	Þ
2	If the organization received or held works of art, historical treasures, or	•	iovide the	
2	following amounts required to be reported under SFAS 116 (ASC 958) Revenue included on Form 990, Part VIII, line 1	relating to these items		¢
	Assets included in Form 990, Part X			*
	Panenuark Reduction Act Natice, see the Instructions for Form 900			Sabadula D (Farm 000) 2019

Sche	edule D (Form 990) 2018 Longleaf	Pine	REAL'	TORS,	Inc.		56-1	0860	64			Page 2
Pa	ortilli Organizations Maintainir	ng Collec	ctions of	f Art, His	storical T	reasures,	or Othe	r Simi	lar As	ssets	(continue	d)
3	Using the organization's acquisition, access collection items (check all that apply)	sion, and o	ther record	ds, check a	any of the fol	llowing that ar	e a signifi	cant us	e of its			
а	Public exhibition		d 🗌	Loan or e	xchange pro	grams						
b	Scholarly research		e 🗌	Other								
С	Preservation for future generations											
4	Provide a description of the organization's	collections	and explai	n how they	further the	organization's	exempt p	ourpose	ın Pari	t		
	XIII										^	
5	During the year, did the organization solicit						imilar					
	assets to be sold to raise funds rather than			part of the	organization	n's collection?					Yes	No
Ra	Escrow and Custodial A				5						_	
	Complete if the organization	n answe	red "Yes	on For	m 990, Pa	art IV, line 9	, or repo	orted a	an am	ount o	on Form	
	990, Part X, line 21.									_		
1a	Is the organization an agent, trustee, custo	dian or oth	er intermed	diary for co	ontributions (or other assets	s not				\Box ,	┌
	included on Form 990, Part X?										☐ Yes	∐ No
D	If "Yes," explain the arrangement in Part XI	II and com	plete the fo	ollowing tal	ble				$\overline{}$		Amount	
_	D balan								\vdash		Amount	
	Beginning balance								1c			
	Additions during the year								1d			
	Distributions during the year								1e 1f			
22	Ending balance Did the organization include an amount on	Form 000	Dart V. line	o 21 for or	SOFOW OF OUR	todial account	liability2				Yes	No
	If "Yes," explain the arrangement in Part XI											H ""
	irt\ Endowment Funds.	II_CHECK II	ere ii uie e	xpianation	nas been p	TOVIDED OIL T &	TC XIII		_			
	Complete if the organization	n answe	red "Yes	on For	m 990. Pa	rt IV. line 1	0.					
		(a) Cum			rior year	(c) Two year		(d) Th	ree years	back	(e) Four year	irs back
1a	Beginning of year balance					 ```			_ _			
b	Contributions			<u> </u>		1						
c	Net investment earnings, gains, and											
_	losses											
d	Grants or scholarships											
е	Other expenditures for facilities and			Ì								
	programs			İ								
f	Administrative expenses											
g	End of year balance			1								
2	Provide the estimated percentage of the cu	rrent year	end balanc	e (line 1g.	column (a))	held as						
	Board designated or quasi-endowment ▶	·	%									
b	Permanent endowment ▶ %											
C	Temporarily restricted endowment ▶	q	%									
	The percentages on lines 2a, 2b, and 2c sh	ould equal	100%									
3а	Are there endowment funds not in the poss	ession of ti	he organiza	ation that a	are held and	administered	for the					
	organization by										Ye	s No
	(i) unrelated organizations										3a(i)	
	(ii) related organizations										3a(li)	
b	If "Yes" on line 3a(ii), are the related organi										3b	Ш
4	Describe in Part XIII the intended uses of the			owment fu	nds							
P ₂	Land, Buildings, and Equ			» -	000 D-		4- 0		000	D4 \	/ L 40	
	Complete if the organization									<u> Ρаπ /</u>		
	Description of property	(a)	Cost or other	- 1	(b) Cost or o		• •	ccumulate preciation	a		(d) Book value	8
	l and		(investment)	<u>'</u>		<u> </u>		or ociation		1	20	500
	Land					28,500 91,401	- 155 c . 1 . 1	124	275	-		,500
	Buildings			•		91,401 59,273			<u>, 375</u>			,026
	Leasehold improvements	-				90,861			<u>, 831</u> , 862		10	<u>, 442</u> -1
	Equipment Other	<u> </u>		+		70,001		20	,002	+		
	I. Add lines 1a through 1e (Column (d) must	equal For	n 990 Par	t X colum	n (B), line 1(95	. 967

Schedule D (F	<u>orm 990) 2018 Longleaf Pine REALTOF</u>	RS, Inc.	<u> 56-1086064</u>	Page
Part VIII	Investments—Other Securities.			
•	Complete if the organization answered "Yes" on	Form 990, Part IV, lir	ne 11b See Form 990, Par	t X, line 12
_	(a) Description of security or category	(b) Book value	(c) Method of val	uation
	(including name of security)		Cost or end-of-year m	larket value
(1) Financial of	derivatives		<u> </u>	
(2) Closely-he	eld equity interests			
(3) Other				
(A)		<u> </u>		
(B)				-
(C)				
(D)				
(E)				
(F)				
(G)				
(H)			<u> </u>	
	n (b) must equal Form 990, Part X, col (B) line 12) ▶		<u></u>	<u> </u>
Part VIII	Investments—Program Related.	F 000 P 4 IV / Iva	- 44 - 0 F 000 B	4 V. Luce 40
	Complete if the organization answered "Yes" on			
	(a) Description of investment	(b) Book value	(c) Method of val	
			Cost or end-of-year m	arket value
(1)		 .		
(2)			 	
(3)		-		
(4)		-		
(5)			 	
(6)			 	
(7)			 	
(8)		 	 	
	n (b) must equal Form 990, Part X, col. (B) line 13.) ▶			7 7
PartiX	Other Assets.			
o cario mad	Complete if the organization answered "Yes" on	Form 990, Part IV, Irr	ne 11d See Form 990. Par	t X. line 15.
	(a) Description			(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
_(8)				
_(9)				
	n (b) must equal Form 990, Part X, col. (B) line 15)			
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on	i Form 990, Part IV, Iir	ie 11e or 11f See Form 99	₹0, Part X,
	line 25		1	
1.	(a) Description of liability	(b) Book value	4	
	income taxes	 		
(2)		 		
(3)		 		
(5)		 		
(6)				
(7)		 		
(8)		 		
(9)		i		

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

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶

4b

4c

Part XIII Supplemental Information.

b Other (Describe in Part XIII)

c Add lines 4a and 4b

4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b

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

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

56-1086064

Page 5

"Part XIII: Supplemental Information (continued)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service

Name of the organization

► Go to www.irs.gov/Form990 for the latest information.

2018
Open(to Public)
Inspection

OMB No 1545-0047

Longleaf Pine REALTORS, Inc.

56-1086064

Employer identification number

Form 990 - Organization's Mission

- 1) To unite those engaged in the recognized branches of the real estate profession in this community for the purpose of exerting a beneficial influence upon the profession and related interest.
- 2) To promote and maintain high standards of conduct in the real estate profession as expressed in the Code of Ethics of the National Association of Realtors.
- 3) To provide a united medium for real estate owners and those engaged in the real estate profession whereby their interests may be safeguarded and advanced.
- 4) To further the interest of home and other property ownership.
- 5) To unite those engaged in the real estate profession of this community with the North Carolina Association of Realtors and the National Association of Realtors, thereby furthering their own objectives throughout the state and nation, and obtaining the benefits and privileges of membership therein.
- 6) To designate, for the benefit of the public, those individuals within its jurisdiction authorized to use the term realtor as licensed, prescribed, and controlled by the National Association of Realtors.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders Members include licensed real estate agents and appraisers.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 Form 990 received and reviewed by Executive Officer and Director of

Name of the organization Longleaf Pine REALTORS, Inc. Employer Identification number

56-1086064

Operations prior to filing.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy Code of Ethics and Standards of Practice are outlined in a written policy, which is available on the organization's website.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Compensation subject to review and approval by Officers and Directors.

Form 990, Part VI, Line 15b - Compensation Process for Officers Compensation subject to review and approval by Officers and Directors.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Code of Ethics and Standards of Practice are outlined in a written policy, which is available on the organization's website. Form 990 is available on another's website and upon request.