

990

Return of Organization Exempt From Income Tax

OMB No. 1545-

0047 2019

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation): Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

Form 990 Department of the Treasury Internal Revenue Service

A For the 2019 calendar year, or tax year beginning 10-01-2019, and ending 09-30-2020

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: MORTGAGE BANKERS ASSOCIATION. Doing business as: 1919 M STREET NW NO 5TH FL. City or town, state or province, country, and ZIP or foreign postal code: WASHINGTON, DC 20036

D Employer identification number: 36-1505650. E Telephone number: (202) 557-2700. G Gross receipts \$ 99,339,890

F Name and address of principal officer: ROBERT D BROEKSMIT, 1919 M STREET NW NO 5TH FL, WASHINGTON, DC 20036

H(a) Is this a group return for subordinates? No. H(b) Are all subordinates included? No. H(c) Group exemption number

I Tax-exempt status: 501(c)(6) (insert no.)

J Website: WWW.MBA.ORG

K Form of organization: Corporation

L Year of formation: 1914. M State of legal domicile: IL

Part I Summary

Table with 3 main sections: 1. Activities & Governance (mission, members, employees, volunteers, revenue, income); 2. Revenue (contributions, program service, investment, other); 3. Expenses (grants, benefits, salaries, fundraising, other); 4. Net Assets or Fund Balances (total assets, liabilities, net assets).

Part II Signature Block. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here: Signature of officer LISA J HAYNES CFO, Date 2021-08-10

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date 2021-08-10, Firm's name CLIFTONLARSONALLEN LLP, Firm's address 901 N GLEBE ROAD SUITE 200 ARLINGTON, VA 22203

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE MORTGAGE BANKERS ASSOCIATION (MBA) IS THE NATIONAL ASSOCIATION REPRESENTING THE REAL ESTATE FINANCE INDUSTRY, AN INDUSTRY THAT EMPLOYS MORE THAN 280,000 PEOPLE IN VIRTUALLY EVERY COMMUNITY IN THE COUNTRY. HEADQUARTERED IN WASHINGTON, D.C., MBA INVESTS IN COMMUNITIES

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

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

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

If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) MEETINGS & CONFERENCESMBA'S FISCAL YEAR 2020 (FY2020) SAW MORE THAN 13,699 INDIVIDUAL ATTENDEES AT 11 (SEVEN IN-PERSON, FOUR VIRTUAL) CONFERENCES AND MEETINGS THAT PROVIDED ATTENDEES WITH TIMELY INFORMATION ABOUT THE ECONOMY, BUSINESS TRENDS, TECHNOLOGICAL INNOVATION, AND LEGISLATIVE AND REGULATORY CHANGES AND PROSPECTS. DUE TO THE PANDEMIC THIS FISCAL YEAR, MBA HAD TO PIVOT TO VIRTUAL MEETINGS AND QUICKLY BUILT A CUSTOM PLATFORM TO DELIVER CONTENT TO OUR MEMBERSHIP IN A SEAMLESS FASHION.MBA CONDUCTED A SUCCESSFUL ANNUAL CONVENTION IN OCTOBER 2019 IN AUSTIN, TX, WITH 4,079 ATTENDEES. THE CREF/MULTIFAMILY HOUSING CONVENTION & EXPO HELD IN FEBRUARY 2020 IN SAN DIEGO HAD 3,035 ATTENDEES. SPONSORSHIP AND BOOTH SALES REMAINED STRONG AT THE MBA MEETINGS, WITH 524 COMPANIES EXHIBITING THEIR PRODUCTS AND SERVICES.IN ADDITION TO THE LARGE ANNUAL CONVENTION EXPECTED FROM A MAJOR ASSOCIATION, MBA HOSTS FOUR OTHER LARGE CONFERENCES AND EXPOS EACH YEAR AND 15 MORE FINELY FOCUSED SPECIAL INTEREST CONFERENCES. THE OTHER FOUR LARGE GATHERINGS ARE THE COMMERCIAL REAL ESTATE FINANCE/MULTIFAMILY HOUSING CONVENTION & EXPO, NATIONAL MORTGAGE SERVICING CONFERENCE & EXPO, TECHNOLOGY SOLUTIONS CONFERENCE & EXPO, AND NATIONAL SECONDARY MARKET CONFERENCE & EXPO. THE NATIONAL SECONDARY CONFERENCE & EXPO DID NOT HAPPEN IN PERSON OR VIRTUALLY DUE TO THE PANDEMIC AND SCHEDULING.THE 15 OR MORE SPECIALIZED PROGRAMS HELP PARTICIPANTS GAIN KNOWLEDGE AND INFORMATION IN LEGAL ISSUES AND REGULATORY COMPLIANCE, COMMERCIAL SERVICING, RISK MANAGEMENT, AND ACCOUNTING AND FINANCIAL MANAGEMENT. EACH OF THESE PROGRAMS IS AN INTEGRAL PART OF THE MEMBERSHIP VALUE PROPOSITION FOR MEMBER COMPANIES. SEVERAL PROGRAMS QUALIFY IN WHOLE OR IN PART FOR A CONTINUING LEGAL EDUCATION CREDIT (CLE), CPE, AND OTHER CONTINUING EDUCATION CREDITS.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) ADVOCACY FOR MEMBERS AND THE INDUSTRYMBA CONTINUES TO BE THE LEADING ADVOCATE FOR THE ENTIRE REAL ESTATE FINANCE INDUSTRY BOTH IN WASHINGTON, DC AND IN STATE CAPITALS. IN 2020, THE ASSOCIATION PROVIDED THOUGHT LEADERSHIP ON A VARIETY OF PUBLIC POLICY ISSUES, INCLUDING GSE REFORM, PATHWAYS TO AFFORDABLE HOMEOWNERSHIP, COVID-RELATED ISSUES IMPACTING BORROWERS AND LENDERS, AND OTHER REGULATORY AND SUPERVISORY ISSUES. OUR LEGISLATIVE ACCOMPLISHMENTS INCLUDED PROVIDING TESTIMONY AND STATEMENTS FOR THE RECORD BEFORE THE HOUSE FINANCIAL SERVICES AND SENATE BANKING COMMITTEES, SUPPORT FOR THE ENACTMENT OF SEVERAL INDUSTRY PRIORITIES (BOTH RESIDENTIAL AND COMMERCIAL/MULTIFAMILY), INCLUDING SUPPORT FOR FUNDING FOR CRITICAL HUD INFORMATION TECHNOLOGY INFRASTRUCTURE, ASSISTANCE FOR HOMEOWNERS AND RENTERS FACING COVID-RELATED HARDSHIPS, AS WELL AS EDUCATION AND ADVOCACY ON A WIDE VARIETY OF OTHER REAL ESTATE FINANCE ISSUES. WITH REGARD TO REGULATORY ACHIEVEMENTS, MBA SUBMITTED COMMENT LETTERS AND PROVIDED GUIDANCE AND SUBSTANTIVE RECOMMENDATIONS THROUGHOUT THE YEAR TO REGULATORS, INCLUDING HUD, VA, USDA, TREASURY, CFPB, FHFA, NAIC AND THE FEDERAL BANKING AGENCIES. THESE RECOMMENDATIONS COVERED A WIDE-RANGING SET OF MORTGAGE FINANCE ISSUES, INCLUDING ORIGINATION AND SERVICING GUIDELINES, SECONDARY MARKET STRUCTURE, TAX AND ACCOUNTING REQUIREMENTS, CAPITAL REQUIREMENTS, CONSUMER PROTECTION REGULATIONS, AND DATA SECURITY/PRIVACY. PARTICULARLY IN LIGHT OF THE COVID-19 PANDEMIC AND THE IMPLEMENTATION OF ORIGINATION AND SERVICING FLEXIBILITIES FOR MORTGAGE LENDERS, OUR ASSOCIATION PLAYED A CRITICAL ROLE IN EDUCATING MORTGAGE SERVICERS AND ORIGINATORS ABOUT THE NEW RULES, AND ADVISING THE REGULATORY AGENCIES ON THE IMPACTS CAUSED BY THE WIDESPREAD USE OF FORBEARANCE. THE ASSOCIATION ALSO FILED AMICUS BRIEFS IN NUMEROUS CASES SUPPORTING THE INDUSTRY IN DISPUTES OVER IMPORTANT LEGAL ISSUES.IN THE COMMERCIAL/MULTIFAMILY REAL ESTATE FINANCE SECTOR, MBA'S PUBLIC POLICY ACTIVITIES IN FISCAL YEAR 2020 SUPPORTED OUR MEMBERS' INTERESTS BY FURTHERING THE OBJECTIVE OF FACILITATING LIQUIDITY AND CAPITAL AVAILABILITY FOR THE COMMERCIAL REAL ESTATE FINANCE MARKET, INCLUDING DURING THE COVID-19 PANDEMIC. MBA SHARED INFORMATION AND RECOMMENDATIONS WITH THE PUBLIC AND POLICY MAKERS ON A VARIETY OF POLICY ISSUES AFFECTING THE COMMERCIAL/MULTIFAMILY FINANCE INDUSTRY, INCLUDING: CAPITAL AND ACCOUNTING FLEXIBILITY FOR LOAN MODIFICATIONS DURING THE COVID-19 PANDEMIC; ECONOMIC RELIEF DURING THE PANDEMIC; LIFE COMPANY RISK-BASED CAPITAL STANDARDS, THE ROLES OF THE MANY PROVIDERS OF DEBT CAPITAL IN MULTIFAMILY FINANCE; FHA ISSUES IMPACTING MULTIFAMILY AND RESIDENTIAL HEALTHCARE FINANCE, FLOOD INSURANCE REGULATIONS, AND APPRAISAL MATTERS. AT THE STATE LEVEL, WE WORKED WITH NUMEROUS STATE MORTGAGE BANKING ASSOCIATIONS AND OTHER PARTNERS ON A WIDE VARIETY OF HOUSING, LICENSING, AND REAL ESTATE FINANCE ISSUES BY PROVIDING DATA AND POLICY ANALYSIS TO SUPPORT THEIR EFFORTS. AS THE COVID-19 PANDEMIC FORCED SOCIAL DISTANCING, WE WORKED WITH STATES TO URGE THEM TO ALLOW MORTGAGE EMPLOYEES TO WORK REMOTELY, A COMMONSENSE SOLUTION TO ALIGN OUR INDUSTRY WITH THE REALITIES OF THE PANDEMIC.AS THE VOICE OF THE REAL ESTATE INDUSTRY IN WASHINGTON, D.C. AND THROUGHOUT THE NATION, MBA IS ALSO PROUD TO HOST AND SUPPORT DIVERSITY AND INCLUSION INITIATIVES, YOUNG PROFESSIONALS' GROUPS, AND AFFORDABLE HOMEOWNERSHIP COALITIONS.

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) MEMBERSHIP AND EDUCATIONMBA'S MEMBERSHIP INCLUDES BUSINESSES FROM ALL SEGMENTS OF THE REAL ESTATE FINANCE INDUSTRY. WE ENDED 2020 WITH MORE THAN 2,100 TOTAL MEMBERS, WHICH INCLUDES CLOSE TO 300 NEW MEMBERS AND REFLECTS AN 82 PERCENT RETENTION RATE AMONG EXISTING MEMBERS. MBA EDUCATION PROVIDED TRAINING AND DEVELOPMENT TO OVER 40,000 REAL ESTATE PROFESSIONALS REPRESENTING SINGLE-FAMILY AND COMMERCIAL/MULTIFAMILY LENDING DURING THE FISCAL YEAR ENDING SEPTEMBER 30, 2020. TRAINING IS PROVIDED THROUGH A MIX OF DELIVERY FORMATS INCLUDING CLASSROOM-BASED COURSES, INSTRUCTOR-GUIDED ONLINE COURSES, CERTIFICATION AND DESIGNATION PROGRAMS, WEBINARS, AND WEB-BASED SELF-STUDY COURSES. ACROSS MBA EDUCATION'S LIVE PROGRAMMING AND SELF-PACED OFFERINGS, THE DEPARTMENT OFFERS NEARLY 450 TRAINING PROGRAMS COVERING ALL FACETS OF THE INDUSTRY. LEVEL II OF THE CERTIFIED MORTGAGE COMPLIANCE PROFESSIONAL (CMCP) DESIGNATION ADDED FOURTEEN NEW COURSES TO OUR LIBRARY AND WAS THE SOLE NEW PROGRAM ADDITION DURING THE FISCAL YEAR. OUR 3-COURSE FLAGSHIP PROGRAM, THE SCHOOL OF MORTGAGE BANKING, COMBINED TO TRAIN JUST OVER 1,000 STUDENTS. SUCCESSFUL COMPLETION OF THE THREE LEVELS RESULTS IN STUDENTS BEING AWARD THE ACCREDITED MORTGAGE PROFESSIONAL (AMP) CERTIFICATION. MBA EDUCATION'S CERTIFICATION AND DESIGNATION PROGRAMS CONTINUED TO BE A SIGNIFICANT BENEFIT TO INDUSTRY PROFESSIONALS. DURING THE FISCAL YEAR, 669 INDIVIDUALS ENROLLED IN ONE OF MBA EDUCATION'S SEVEN CERTIFICATION AND DESIGNATION PROGRAMS.

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

4e Total program service expenses

**Part IV Checklist of Required Schedules**

		Yes	No
<b>1</b>	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .		No
<b>2</b>	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .	Yes	
<b>3</b>	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 . . . . .	Yes	
<b>4</b>	<b>Section 501(c)(3) organizations.</b> 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 . . . . .		
<b>5</b>	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 . . . . .	Yes	
<b>6</b>	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 . . . . .		No
<b>7</b>	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 . . . . .		No
<b>8</b>	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .		No
<b>9</b>	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 . . . . .		No
<b>10</b>	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 . . . . .		No
<b>11</b>	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.		
<b>a</b>	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. . . . .	Yes	
<b>b</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 . . . . .		No
<b>c</b>	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 . . . . .		No
<b>d</b>	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 . . . . .		No
<b>e</b>	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . .	Yes	
<b>f</b>	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)?		No
<b>12a</b>	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII . . . . .		No
<b>b</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 . . . . .	Yes	
<b>13</b>	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .		No
<b>14a</b>	Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		No
<b>b</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 . . . . .		No
<b>15</b>	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 . . . . .		No
<b>16</b>	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 . . . . .		No
<b>17</b>	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) . . . . .		No
<b>18</b>	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 . . . . .		No
<b>19</b>	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 . . . . .		No
<b>20a</b>	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .		No
<b>b</b>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b>	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 . . . . .	Yes	

**Part IV Checklist of Required Schedules (continued)**

		Yes	No
<b>22</b>	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .		No
<b>23</b>	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> . . . . .	Yes	
<b>24a</b>	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .		No
<b>24b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
<b>24c</b>	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
<b>24d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b>	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .		
<b>25b</b>	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		
<b>26</b>	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons?		No
<b>27</b>	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .		No
<b>28</b>	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):		
<b>28a</b>	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>28b</b>	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>28c</b>	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .		No
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions?		No
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .		No
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?	Yes	
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	Yes	
<b>35a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
<b>35b</b>	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .		No
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .		
<b>37</b>	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .		No
<b>38</b>	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O. . . . .	Yes	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

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

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

Table with 16 main rows (2a-16) and sub-rows (a-e). Columns include question text, a grid for 'Yes/No' responses, and a grid for numerical values. Row 2a contains the value 174. Row 16 includes a note about Form 4720.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

Table with 3 main columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year... 1b 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?...

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

Table with 3 main columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b 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?...

Section C. Disclosure

Table with 2 main columns: Question, Answer. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed. 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. 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: LISA J HAYNES 1919 M STREET NW 5TH FLOOR WASHINGTON, DC 20036 (202) 557-2835

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

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

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

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

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

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ROBERT D BROEKSMIT ..... PRESIDENT & CEO	34.70 ..... 0.30			X				1,475,414	0	320,217
(2) MARCIA M DAVIES ..... CHIEF OPERATING OFFICER	34.70 ..... 0.30				X			1,103,039	0	34,320
(3) GORDON R MILLS ..... SVP, RES. POLICY & MEMBER ENGAGEMENT.	35.00 .....				X			634,883	0	38,972
(4) WILLIAM P KILLMER ..... SVP, LEGISLATIVE & POL. AFFAIRS	35.00 .....				X			593,964	0	34,841
(5) MICHAEL C FRATANTONI ..... CHIEF ECON. & SVP RES. & IND. TECH.	32.00 ..... 3.00				X			431,311	0	36,472
(6) PETER J GRACE ..... CIO AND SVP, STRATEGY & MEMBER SERV.	35.00 .....				X			428,519	0	36,742
(7) STEPHEN O'CONNOR ..... SVP, AFFORDABLE HOUSING INITIATIVES	35.00 .....				X			424,469	0	38,972
(8) HELEN R KANOVSKY ..... SVP & GENERAL COUNSEL (UNTIL 4/3/20)	32.70 ..... 2.30			X				375,853	0	17,334
(9) LISA J HAYNES ..... SVP, CFO & CHIEF DIV. & INCL. OFFI.	32.70 ..... 2.30			X				371,571	0	33,009
(10) THOMAS K KIM ..... SVP, CREF POLICY (UNTIL 10/15/19)	35.00 .....				X			320,386	0	35,334
(11) ELAINE HOWARD HARRINGTON ..... VP, CONFERENCES	35.00 .....					X		318,213	0	37,556
(12) JAMES WOODWELL ..... VP, COMMERCIAL REAL ESTATE RESEARCH	35.00 .....						X	307,292	0	30,466
(13) JOHN MECHEM ..... VP, PUBLIC AFFAIRS	35.00 .....						X	304,312	0	34,720
(14) TRICIA MIGLIAZZO ..... VP, MEMBERSHIP ENGAGEMENT	35.00 .....						X	294,234	0	8,663
(15) KATHRYN MARQUART ..... VP, COMMERCIAL/MULTI FAMILY	35.00 .....						X	284,203	0	31,218
(16) BRIAN F STOFFERS ..... CHAIRMAN	4.00 .....	X		X				8,972	0	0
(17) MICHAEL W BRIGGS ..... SVP & GENERAL COUNSEL (FROM 6/1/20)	32.70 ..... 2.30			X				0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) SUSAN T STEWART CHAIRMAN-ELECT	7.00	X		X				0	0	0
(19) KRISTY FERCHO VICE-CHAIRMAN	4.00	X		X				0	0	0
(20) CHRISTOPHER M GEORGE IMMEDIATE PAST CHAIRMAN	1.00	X		X				0	0	0
(21) ROBERT D BROEKSMIT EX-OFFICIO	0.50	X						0	0	0
(22) SCOTT BASSIN BOARD MEMBER	0.50	X						0	0	0
(23) BYRON L BOSTON BOARD MEMBER	0.50	X						0	0	0
(24) TODD CHAMBERLAIN BOARD MEMBER	0.50	X						0	0	0
(25) GARY D CLARK BOARD MEMBER	0.50	X						0	0	0
(26) JONATHAN M CORR BOARD MEMBER	0.50	X						0	0	0
(27) MICHAEL J DEVITO BOARD MEMBER	0.50	X						0	0	0
(28) WILLIAM C EMERSON BOARD MEMBER	0.50	X						0	0	0
(29) LAURA ESCOBAR BOARD MEMBER	0.50	X						0	0	0
(30) MATTHEW E GALLIGAN BOARD MEMBER	0.50	X						0	0	0
(31) JOHN M HEDLUND BOARD MEMBER	0.50	X						0	0	0
(32) MARK A JONES BOARD MEMBER	0.50	X						0	0	0
(33) CHRISTOPHER LABIANCA BOARD MEMBER	0.50	X						0	0	0
(34) WILLIAM LOWMAN BOARD MEMBER	0.50	X						0	0	0
(35) ANGELA MAGO BOARD MEMBER	0.50	X						0	0	0
(36) FRANK D MARTELL BOARD MEMBER	0.50	X						0	0	0
(37) MARY ANN MCGARRY BOARD MEMBER	0.50	X						0	0	0
(38) STANLEY C MIDDLEMAN BOARD MEMBER	0.50	X						0	0	0
(39) PETER R NORDEN BOARD MEMBER	0.50	X						0	0	0
(40) GARY N OTTEN BOARD MEMBER	0.50	X						0	0	0
(41) EDUARDO PEREZ BOARD MEMBER	0.50	X						0	0	0
(42) KURT PFOTENHAUER BOARD MEMBER	0.50	X						0	0	0
(43) JAY PLUM BOARD MEMBER	0.50	X						0	0	0
(44) T ANTHONY PREMER BOARD MEMBER	0.50	X						0	0	0
(45) CHRISTINE C RHEA BOARD MEMBER	0.50	X						0	0	0
(46) ANDREW RIPPERT BOARD MEMBER	0.50	X						0	0	0
(47) ERIN STAFFORD BOARD MEMBER	0.50	X						0	0	0
(48) DEBRA W STILL BOARD MEMBER	0.50	X						0	0	0
(49) JEFFREY C TAYLOR BOARD MEMBER	0.50	X						0	0	0
(50) RICHARD G THORNBERRY BOARD MEMBER	0.50	X						0	0	0
(51) WILLIAM M WALKER BOARD MEMBER	0.50	X						0	0	0
(52) FOWLER C WILLIAMS BOARD MEMBER	0.50	X						0	0	0
<b>1b Sub-Total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>							7,676,635	0		768,836

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **9 2**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
<b>4</b> 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? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
STRATMOR GROUP LLC PO BOX 19436 BOULDER, CO 80308	DATA DRIVEN MORTGAGE ADVISORY	387,021
HIGHER LOGIC 1919 N LYNN ST SUITE 500 ARLINGTON, VA 22209	SOFTWARE DEVELOPMENT	257,574
PROMONTORY FINANCIAL GROUP LLC 801 17TH ST NW SUITE 1100 WASHINGTON, DC 20006	FINANCIAL SERVICES	155,000
HOLLAND & KNIGHT PO BOX 864084 ORLANDO, FL 32886	LEGISLATIVE & ADVOCACY CONSULTING	150,000
REPUBLIC CONSULTING 8828 CRICK ALY ORLANDO, FL 32827	LOBBYING & BUSINESS DEVELOPMENT	150,000
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization <b>1 2</b>		

**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . .	<b>1a</b>					
	<b>b</b> Membership dues . . .	<b>1b</b>					
	<b>c</b> Fundraising events . . .	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	589,111				
	<b>g</b> Noncash contributions included in lines 1a - 1f:\$	<b>1g</b>					
<b>h Total.</b> Add lines 1a-1f . . . . .			589,111				
<b>Program Service Revenue</b>	<b>2a</b> MEMBERSHIP DUES	Business Code 900099	23,241,569	23,241,569			
	<b>b</b> CONFERENCES AND PROGRAMS	900099	19,320,267	19,320,267			
	<b>c</b> EDUCATION AND PROGRAMS	900099	4,415,153	4,415,153			
	<b>d</b> PERIODICALS AND PUBLICATIONS	541800	1,694,257	937,485	756,772		
	<b>e</b> PRODUCT FEES	900099	1,053,000	1,053,000			
	<b>f</b> All other program service revenue.		1,304,443	1,253,443	51,000		
	<b>g Total.</b> Add lines 2a-2f. . . . .			51,028,689			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		2,640,407			2,640,407	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties . . . . .		536,494			536,494	
	<b>6a</b> Gross rents	(i) Real					
		(ii) Personal					
		<b>6b</b> Less: rental expenses					
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss) . . . . .						
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	39,237,179				
		(ii) Other					
		<b>7b</b> Less: cost or other basis and sales expenses	<b>7b</b>	37,865,526			
	<b>c</b> Gain or (loss)	<b>7c</b>	1,371,653				
	<b>d</b> Net gain or (loss) . . . . .		1,371,653			1,371,653	
	<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . .						
		<b>8a</b>					
<b>b</b> Less: direct expenses	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events . . . . .							
<b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . . .							
	<b>9a</b>						
<b>b</b> Less: direct expenses	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities . . . . .							
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .							
	<b>10a</b>						
<b>b</b> Less: cost of goods sold	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory . . . . .							
Miscellaneous Revenue	Business Code						
<b>11a</b> MEMBERS RESERVE	900099	5,255,259			5,255,259		
<b>b</b> OTHER REVENUE	900099	52,751			52,751		
<b>c</b>							
<b>d</b> All other revenue . . . . .							
<b>e Total.</b> Add lines 11a-11d . . . . .			5,308,010				
<b>12 Total revenue.</b> See instructions . . . . .			61,474,364	50,220,917	807,772	9,856,564	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).  
 Check if Schedule O contains a response or note to any line in this Part IX

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	385,183			
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	6,557,408			
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	18,958,433			
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,081,886			
<b>9</b> Other employee benefits	3,529,908			
<b>10</b> Payroll taxes	1,464,212			
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal	98,893			
<b>c</b> Accounting	10,971			
<b>d</b> Lobbying	615,762			
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	291,394			
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,696,024			
<b>12</b> Advertising and promotion	416,172			
<b>13</b> Office expenses	2,606,655			
<b>14</b> Information technology	2,016,480			
<b>15</b> Royalties	125,176			
<b>16</b> Occupancy	1,566,607			
<b>17</b> Travel	876,455			
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	5,758,522			
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	706,626			
<b>23</b> Insurance	313,628			
<b>24</b> 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.)				
<b>a</b> CREDIT CARD FEES	747,371			
<b>b</b> STAFF & PROC. TRAINING	666,763			
<b>c</b> COMMISSIONS	109,191			
<b>d</b>				
<b>e</b> All other expenses	344,616			
<b>25</b> Total functional expenses. Add lines 1 through 24e	50,944,336			
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash-non-interest-bearing . . . . .	42,740,408	<b>1</b>	37,985,856
	<b>2</b> Savings and temporary cash investments		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .	276,316	<b>4</b>	597,258
	<b>5</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	2,857,662	<b>9</b>	1,790,281
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	9,747,280		
	<b>b</b> Less: accumulated depreciation	4,932,415	3,543,109	4,814,865
	<b>11</b> Investments—publicly traded securities . . . . .	76,509,207	<b>11</b>	86,060,835
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11	1,137,944	<b>15</b>	960,926
<b>16 Total assets:</b> Add lines 1 through 15 (must equal line 34) . . . . .	127,064,646	<b>16</b>	132,210,021	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	5,030,213	<b>17</b>	5,566,885
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	24,918,498	<b>19</b>	18,321,914
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> 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	4,545,342	<b>25</b>	4,260,866
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	34,494,053	<b>26</b>	28,149,665
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions . . . . .	92,501,770	<b>27</b>	103,967,346
	<b>28</b> Net assets with donor restrictions	68,823	<b>28</b>	93,010
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds . . . . .		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds		<b>31</b>	
	<b>32</b> Total net assets or fund balances	92,570,593	<b>32</b>	104,060,356
	<b>33</b> Total liabilities and net assets/fund balances	127,064,646	<b>33</b>	132,210,021

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	61,474,364
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	50,944,336
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	10,530,028
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	92,570,593
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	959,735
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (A))	<b>10</b>	104,060,356

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>2c</b>	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
<b>3a</b>	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?		No
<b>3b</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.		

**Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

**Form 990, Special Condition Description:**

**Special Condition Description**

**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Name of the organization MORTGAGE BANKERS ASSOCIATION	<b>Employer identification number</b> 36-1505650
--	---

**Organization type** (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

- 501(c)( ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  
MORTGAGE BANKERS ASSOCIATION

Employer identification number  
36-1505650

**Part I**  
**Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED		\$ RESTRICTED	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization  
MORTGAGE BANKERS ASSOCIATION

Employer identification number  
36-1505650

**Part II** Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____

Name of organization MORTGAGE BANKERS ASSOCIATION	Employer identification number 36-1505650
--	--

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	

## **Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

2019

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

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

Name of the organization MORTGAGE BANKERS ASSOCIATION

Employer identification number

36-1505650

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) \$

3 Volunteer hours for political campaign activities (see instructions)

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No

4a Was a correction made? Yes No

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b. \$

4 Did the filing organization file Form 1120-POL for this year? Yes No

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

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received. Row 1: (1) MORTGAGE BANKERS ASSOCIATION PAC, 1919 M STREET NW 5TH FLR WASHINGTON, DC 20036, 52-6144335, \$1,425,597.

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> <b>(The term "expenditures" means amounts paid or incurred.)</b>	<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%; text-align:left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%; text-align:left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No													

**4-Year Averaging Period Under Section 501(h)**  
**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)**

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

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

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

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

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

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	23,241,569
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures ( <b>do not include amounts of political expenses for which the section 527(f) tax was paid</b> ).		
<b>a</b> Current year .....	<b>2a</b>	2,474,663
<b>b</b> Carryover from last year .....	<b>2b</b>	413,211
<b>c</b> Total .....	<b>2c</b>	2,887,874
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	<b>3</b>	2,324,157
<b>4</b> 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? .....	<b>4</b>	563,717
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) .....	<b>5</b>	

**Part IV Supplemental Information**

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

Return Reference	Explanation
PART I-A LINE 1	MBA'S POLITICAL ACTIVITY FOR THE YEAR ENDED 9/30/20 CONSISTED OF ACTIVITIES CONDUCTED SOLELY THROUGH ITS CONNECTED PAC, THE MORTGAGE BANKERS ASSOCIATION PAC (MORPAC)

**Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

Supplemental Financial Statements

2019

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service

Name of the organization MORTGAGE BANKERS ASSOCIATION

Employer identification number

36-1505650

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor informed status.

Part II Conservation Easements.

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

Table with 2 columns: Description, Held at the End of the Year. Rows include purpose(s) of conservation easements, number of easements, modified easements, states where located, monitoring policy, hours devoted, expenses incurred, and requirements of section 170(h)(4).

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include works of art, historical treasures, or other similar assets held for public exhibition, education, or research, and amounts related to revenue and assets.

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other .....
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .  **Yes**  **No**

**Part IV Escrow and Custodial Arrangements.**

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . .  **Yes**  **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance . . . . .             | <b>1c</b> |
| <b>d</b> Additions during the year . . . . .     | <b>1d</b> |
| <b>e</b> Distributions during the year . . . . . | <b>1e</b> |
| <b>f</b> Ending balance . . . . .                | <b>1f</b> |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  **Yes**  **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . .

**Part V Endowment Funds.**

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

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

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ .....
  - b** Permanent endowment ▶ .....
  - c** Temporarily restricted endowment ▶ .....
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes           | No |
|--|---------------|----|
| <b>(i)</b> unrelated organizations . . . . .   | <b>3a(i)</b>  |    |
| <b>(ii)</b> related organizations . . . . .  | <b>3a(ii)</b> |    |
| <b>b</b> If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . . | <b>3b</b>     |    |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .				
<b>b</b> Buildings . . . . .				
<b>c</b> Leasehold improvements		3,012,043	1,594,470	1,417,573
<b>d</b> Equipment . . . . .		6,012,970	2,956,560	3,056,410
<b>e</b> Other . . . . .		722,267	381,385	340,882
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				4,814,865

**Part VII Investments—Other Securities.**

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

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

**Part VIII Investments—Program Related.**

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 25.)	4,260,866

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	62,142,705
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	959,735	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	959,735
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	61,182,970
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	291,394	
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	291,394
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .		<b>5</b>	61,474,364

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	50,652,942
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>		
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>		
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	50,652,942
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	291,394	
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	291,394
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .		<b>5</b>	50,944,336

**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
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**Additional Data**

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**Software ID:**  
**Software Version:**

**Schedule I  
(Form 990)**

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

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Department of the  
Treasury  
Internal Revenue Service

Name of the organization  
MORTGAGE BANKERS ASSOCIATION

**Employer identification number**  
36-1505650

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) NAACP LEGAL DEFENSE & EDUCATIONAL FUND INC 40 RECTOR ST FL 5 NEW YORK, NY 10006	13-1655255	501C3	50,000				UNRESTRICTED OPERATING SUPPORT
(2) THE CMG FOUNDATION 3160 CROW CANYON RD SAN ROMAN, CA 94583	45-5058060	501C3	45,000				UNRESTRICTED OPERATING SUPPORT
(3) HOMEFREE-USA INC 6200 BALTIMORE AVE RIVERDALE, MD 20737	52-1885132	C-CORP	30,000				SPONSORSHIP
(4) UNITED STATES CONFERENCE OF MAYORS PO BOX 826902 PHILADELPHIA, PA 19182	53-0196642	501C3	25,000				SPONSORSHIP/DONATION
(5) NATIONAL ASSOCIATION OF REAL ESTATE BROKERS 9831 GREENBELT RD STE 309 LANHAM, MD 20706	36-6125210	501C6	20,000				DIVERSITY ALLIANCE PARTNERSHIP DONATION
(6) NATIONAL URBAN LEAGUE 80 PINE STREET 9TH FLOOR NEW YORK, NY 10005	13-1840489	501C3	20,000				CONTRIBUTION & SPONSORSHIP
(7) MBA OPENS DOORS FOUNDATION 1919 M STREET NW 5TH FLOOR WASHINGTON, DC 20036	32-0355086	501C3	17,858				MBA STAFF MATCHING GIFT/DONATION
(8) CHILDREN'S NATIONAL HOSPITAL FOUNDATION 801 ROEDER ROAD SUITE 300 SILVER SPRING, MD 20910	52-1640402	501C3	17,500				SPONSORSHIP/DONATION
(9) NATIONAL ASSOCIATION OF MINORITY MORTGAGE BANKERS OF AMERICA IN PO BOX 7246 ATLANTA, GA 30357	81-4649521	501C6	15,000				SPONSORSHIP/PARTNERSHIP
(10) LENDERS ONE 12747 OLIVE BLVD STE 300 ST LOUISE, MO 63141	43-1916565	C-CORP	12,500				SPONSORSHIP
(11) NATIONAL HOUSING CONFERENCE INC 1900 M ST NW SUITE 200 WASHINGTON, DC 20035	53-0208180	501C3	10,000				MEMBERSHIP & SPONSORSHIP
(12) HOMEOWNERSHIP COUNCIL OF AMERICA 1611 E 4TH ST STE 100-B SANTA ANA, CA 92701	87-0798977	501C3	10,000				SPONSORSHIP/GENERAL SUPPORT
(13) INNOVATE MEMPHIS 516 TENNESSEE ST STE 223 MEMPHIS, TN 38103	45-3699291	501C3	10,000				SPONSORSHIP
(14) MOUNT VERNON LADIES ASSOCIATION	54-0564701	501C3	10,000				SPONSORSHIP

1250 I ST NW STE 400 WASHINGTON,DC 20005							
(15) NF FORWARD 1074 WOODWARD AVE DETROIT,MI 48226	82-1672519	501C3	7,500				SPONSORSHIP
(16) WOMEN'S CENTER 133 PARK ST NE VIENNA,VA 22180	23-7423496	501C3	7,500				SUPPORT
(17) ALZHEIMERS ASSOCIATION 25200 TELEGRAPH RD STE 100 SOUTHFIELD,MI 48033	13-3039601	501C3	5,000				UNRESTRICTED OPERATING SUPPORT
(18) CAMP REHOBOTH 37 BALTIMORE AVENUE REHOBOTH BEACH,DE 19971	51-0331962	501C3	5,000				UNRESTRICTED OPERATING SUPPORT
(19) GEORGETOWN UNIVERSITY PEDIATRICS GALA 4200 WISCONSIN AVE SUITE 200 WASHINGTON,DC 20016	53-0196603	501C3	5,000				GALA SPONSORSHIP/DONATION
(20) SOME INC 71 O STREET NW WASHINGTON,DC 20001	23-7098123	501C3	5,000				SOME GALA DONATION
(21) NATIONAL FAIR HOUSING ALLIANCE 1101 VERMONT AVE NW SUITE 710 WASHINGTON,DC 20005	52-1676364	501C3	5,000				SPONSORSHIP
(22) NATIONAL ASSOCIATION OF NEIGHBORHOODS 1300 PENNSYLVANIA AVE NW STE 700 WASHINGTON,DC 20004	23-7148216	501C3	5,000				UNRESTRICTED OPERATING SUPPORT
(23) UNITED HOUSING INC 2750 COLONY PARK DR MEMPHIS,TN 38118	62-1597364	501C3	5,000				SPONSORSHIP/GENERAL SUPPORT

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 19  
. . . . . ▶

**3** Enter total number of other organizations listed in the line 1 table . . . . . ▶ 4

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

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

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

Return Reference

Explanation

**Additional Data**

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**Software ID:**  
**Software Version:**

**Schedule J**  
**(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
- ▶ **Attach to Form 990.**
- ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

**2019**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
MORTGAGE BANKERS ASSOCIATION

Employer identification number

36-1505650

**Part I Questions Regarding Compensation**

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

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

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

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

**3** 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.

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

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

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

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

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

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

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

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

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

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

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

	Yes	No
<b>1b</b>	Yes	
<b>2</b>		
<b>4a</b>		No
<b>4b</b>		No
<b>4c</b>		No
<b>5a</b>		
<b>5b</b>		
<b>6a</b>		
<b>6b</b>		
<b>7</b>		
<b>8</b>		
<b>9</b>		

**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 W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ROBERT D BROEKSMIT PRESIDENT & CEO	(i)	901,428	566,667	7,319	300,275	19,942	1,795,631	0
	(ii)	0	0	0	0	0	0	0
2 MARCIA M DAVIES CHIEF OPERATING OFFICER	(i)	622,664	476,674	3,701	16,800	17,520	1,137,359	0
	(ii)	0	0	0	0	0	0	0
3 GORDON R MILLS SVP, RES. POLICY & MEMBER ENGAGEMENT	(i)	531,182	100,000	3,701	16,800	22,172	673,855	0
	(ii)	0	0	0	0	0	0	0
4 WILLIAM P KILLMER SVP, LEGISLATIVE & POL. AFFAIRS	(i)	516,552	75,000	2,412	16,800	18,041	628,805	0
	(ii)	0	0	0	0	0	0	0
5 MICHAEL C FRATANTONI CHIEF ECON. & SVP RES. & IND. TECH.	(i)	370,470	60,000	841	16,800	19,672	467,783	0
	(ii)	0	0	0	0	0	0	0
6 PETER J GRACE CIO AND SVP, STRATEGY & MEMBER SERV.	(i)	367,678	60,000	841	16,800	19,942	465,261	0
	(ii)	0	0	0	0	0	0	0
7 STEPHEN O'CONNOR SVP, AFFORDABLE HOUSING INITIATIVES	(i)	366,057	56,000	2,412	16,800	22,172	463,441	0
	(ii)	0	0	0	0	0	0	0
8 HELEN R KANOVSKY SVP & GENERAL COUNSEL (UNTIL 4/3/20)	(i)	343,731	25,000	7,122	16,800	534	393,187	0
	(ii)	0	0	0	0	0	0	0
9 LISA J HAYNES SVP, CFO & CHIEF DIV. & INCL. OFFI.	(i)	320,281	50,000	1,290	16,800	16,209	404,580	0
	(ii)	0	0	0	0	0	0	0
10 THOMAS K KIM SVP, CREF POLICY (UNTIL 10/15/19)	(i)	277,893	25,000	17,493	16,800	18,534	355,720	0
	(ii)	0	0	0	0	0	0	0
11 ELAINE HOWARD HARRINGTON VP, CONFERENCES	(i)	270,801	45,000	2,412	16,500	21,056	355,769	0
	(ii)	0	0	0	0	0	0	0
12 JAMES WOODWELL VP, COMMERCIAL REAL ESTATE RESEARCH	(i)	266,402	39,600	1,290	16,206	14,260	337,758	0
	(ii)	0	0	0	0	0	0	0
13 JOHN MECHEM VP, PUBLIC AFFAIRS	(i)	266,840	36,600	872	16,200	18,520	339,032	0
	(ii)	0	0	0	0	0	0	0
14 TRICIA MIGLIAZZO VP, MEMBERSHIP ENGAGEMENT	(i)	180,350	113,176	708	8,663	0	302,897	0
	(ii)	0	0	0	0	0	0	0
15 KATHRYN MARQUART VP, COMMERCIAL/MULTI FAMILY	(i)	248,714	32,000	3,489	16,169	15,049	315,421	0
	(ii)	0	0	0	0	0	0	0

**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.

Return Reference	Explanation
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## **Additional Data**

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**Software ID:**

**Software Version:**

**SCHEDULE O**  
**(Form 990 or 990-EZ)****Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

**2019****Open to Public Inspection**Department of the Treasury  
Internal Revenue Service**Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.**▶ **Attach to Form 990 or 990-EZ.**▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**Name of the organization  
MORTGAGE BANKERS ASSOCIATION**Employer identification number**

36-1505650

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	MBA HAS AN EXECUTIVE COMMITTEE THAT IS EMPOWERED TO ACT ON BEHALF OF THE FULL BOARD OF DIRECTORS BETWEEN MEETINGS. THE COMMITTEE DOES NOT HAVE THE AUTHORITY TO ADOPT OFFICIAL POSITIONS ON PUBLIC POLICY MATTERS (UNLESS EXPLICITLY PROVIDED THAT POWER); APPROVE THE ANNUAL BUDGET; DETERMINE MEMBER DUES; APPOINT OR REMOVE THE PRESIDENT AND CEO; FILL BOARD AND EXECUTIVE COMMITTEE VACANCIES; ADOPT BYLAWS AMENDMENTS; APPROVE ORGANIZATIONAL CONSOLIDATION OR MERGER; OR ELIMINATE A STANDING COMMITTEE. THE EXECUTIVE COMMITTEE IS COMPOSED OF THE ELECTED OFFICERS AND THE CHAIRS OF COMBOG AND RESBOG, AS WELL AS THE PRESIDENT AND CEO OF THE ASSOCIATION SERVICING EX OFFICIO AS NONVOTING MEMBER.
FORM 990, PART VI, SECTION A, LINE 6	MBA IS A NONPROFIT MEMBERSHIP CORPORATION. IT HAS THE FOLLOWING CLASSES OF MEMBERSHIP: (A) REGULAR MEMBERS - FINANCIAL INSTITUTIONS AND OTHER ENTITIES THAT ARE REGULARLY IN THE BUSINESS OF ORIGINATING, SERVICING, OR INVESTING IN MORTGAGE LOANS OR OTHERWISE SHARE IN THE RISK OF MORTGAGE LOAN PERFORMANCE, SUCH AS MORTGAGE INSURERS AND TITLE INSURANCE UNDERWRITERS, SHALL BE CONSIDERED REGULAR MEMBERS. (B) ASSOCIATE MEMBERS - BUSINESS ORGANIZATIONS, FINANCIAL INSTITUTIONS, AND INDIVIDUALS THAT REGULARLY PROVIDE SERVICE OR PRODUCTS FOR BUSINESS ORGANIZATIONS OR FINANCIAL INSTITUTIONS ELIGIBLE TO BE REGULAR MEMBERS SHALL BE CONSIDERED ASSOCIATE MEMBERS. (C) ALLIANCE MEMBER - THE BOARD OF DIRECTORS NAMES AS THE SOLE ALLIANCE MEMBER THE MORTGAGE ACTION ALLIANCE, INC., AN AFFILIATE ORGANIZATION THAT OPERATES TO PROMOTE THE COMMON BUSINESS INTERESTS OF THE RESIDENTIAL AND COMMERCIAL REAL ESTATE FINANCE INDUSTRIES THROUGH GRASSROOTS ADVOCACY ACTIVITIES. (D) HONORARY MEMBERS - INDIVIDUALS WHO HAVE SERVED ALL OR PART OF TWO TERMS AS A MEMBER OF ONE OF THE BOARD OF GOVERNORS, OR WHO HAVE SERVED AS AN OFFICER FOR TWO YEARS, AND WHO HAVE RETIRED FROM ACTIVE BUSINESS SHALL BE CONSIDERED HONORARY MEMBERS. (E) STUDENT MEMBERS - INDIVIDUALS (I) WHO, PRIOR TO EMPLOYMENT IN THE REAL ESTATE FINANCE INDUSTRY, ARE VALIDLY ENROLLED IN A COMMUNITY OR OTHER TWO-YEAR COLLEGE OR OTHER POST-SECONDARY EDUCATIONAL INSTITUTION ("EDUCATIONAL INSTITUTION") AND ALSO VALIDLY ENROLLED IN THE ASSOCIATION'S CURRENT CAREER EDUCATION COURSE, OR OTHER COMPARABLE INSTRUCTIONAL COURSE PROVIDED BY THE ASSOCIATION, OR (II) WHO, PRIOR TO EMPLOYMENT IN THE REAL ESTATE FINANCE INDUSTRY, ARE VALIDLY ENROLLED IN ANY EDUCATIONAL INSTITUTIONAL AFTER COMPLETING THE ASSOCIATION'S CURRENT CAREER EDUCATION COURSE, OR OTHER COMPARABLE INSTRUCTIONAL COURSE PROVIDED BY THE ASSOCIATION.
FORM 990, PART VI, SECTION A, LINE 7A	UNDER THE ASSOCIATION'S BYLAWS, ONLY REGULAR MEMBERS AND THE ALLIANCE MEMBER MAY ELECT OFFICERS AND THE AT-LARGE MEMBERS OF THE BOARD OF DIRECTORS.
FORM 990, PART VI, SECTION A, LINE 7B	REGULAR MEMBERS ARE REQUIRED TO APPROVE A PLAN OF MERGER THAT CALLS FOR THE ASSOCIATION TO MERGE INTO ANOTHER ASSOCIATION OR OTHER ENTITY, OR A PLAN OF MERGER THAT CALLS FOR THE ASSOCIATION TO ABSORB ANOTHER ASSOCIATION OR OTHER ENTITY, AND THE MERGER WOULD RESULT IN (I) A NAME CHANGE FOR THE ASSOCIATION, (II) THE CREATION OF A NEW MEMBERSHIP CLASS, (III) THE ELIMINATION OF A MEMBERSHIP CLASS, OR (IV) A SUBSTANTIAL CHANGE TO THE THEN CURRENT GOVERNANCE SYSTEM. IN ADDITION, REGULAR MEMBERS ARE REQUIRED TO APPROVE A PLAN FOR CONSOLIDATION WHEREBY THE ASSOCIATION WOULD COMBINE WITH ONE OR MORE ASSOCIATIONS TO CREATE A NEW ASSOCIATION AND CEASE TO EXIST AS AN INDEPENDENT ENTITY.
FORM 990, PART VI, SECTION B, LINE 11B	FIVE INDEPENDENT MEMBERS OF THE AUDIT COMMITTEE, WHICH IS A BOARD-LEVEL COMMITTEE, RECEIVED A COPY OF THE FORM 990 BEFORE ITS FILING.
FORM 990, PART VI, SECTION B, LINE 12C	IT IS MBA'S POLICY THAT NO COVERED PARTY PARTICIPATE IN THE EVALUATION OR APPROVAL BY MBA OF ANY CONTRACTUAL ARRANGEMENT TO WHICH MBA MAY BECOME A PARTY IF THE COVERED PARTY'S PARTICIPATION WOULD CREATE AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST. MBA'S CONFLICTS POLICY WILL BE CONTINUOUSLY MONITORED BY THE BOARD OF DIRECTORS ON AN ONGOING BASIS FOR COMPLIANCE WITH THE POLICY AND REQUIRES ANNUAL DISCLOSURE TO THE MBA GENERAL COUNSEL AND SECRETARY OF "CONFLICTS OF INTEREST" DEFINED AS A SITUATION IN WHICH A COVERED PARTY WOULD PARTICIPATE IN THE EVALUATION OR APPROVAL BY MBA OF ANY CONTRACTUAL ARRANGEMENT TO WHICH MBA MAY BECOME A PARTY, IF SUCH INDIVIDUAL, OR SUCH INDIVIDUAL'S EMPLOYER, WOULD OBTAIN MORE THAN AN INSIGNIFICANT FINANCIAL BENEFIT, EITHER DIRECTLY OR INDIRECTLY. "COVERED PARTY" MEANS A MEMBER OF THE MBA BOARD OF DIRECTORS OR A MEMBER OF THE BOARD COMMITTEE OR BOARD TASK FORCE THAT MAY BOTH (I) RECOMMEND ENTERING INTO CONTRACTS AND (II) PLAY A ROLE IN VENDOR REVIEW AND SELECTION. MOREOVER, COVERED PARTIES ARE SUPPOSED TO UPDATE THEIR DISCLOSURES AS CIRCUMSTANCES WARRANT AND PROVIDE THEM TO THE MBA GENERAL COUNSEL AND SECRETARY. THE DISINTERESTED MEMBERS OF THE EXECUTIVE COMMITTEE OF THE MBA BOARD OF DIRECTORS SHALL DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS OR BEHAVIOR IN CONFLICT WITH THIS POLICY HAS OCCURRED, AND WHAT SUBSEQUENT ACTION IS APPROPRIATE (IF ANY) AND ITS DECISION WILL BE FINAL, EXCEPT AS FOLLOWS. THE EXECUTIVE COMMITTEE SHALL INFORM THE FULL BOARD OF DIRECTORS OF ANY DISAGREEMENT BETWEEN THE EXECUTIVE COMMITTEE AND THE DISCLOSING DIRECTOR AS TO ITS DETERMINATION THAT A CONFLICT OF INTEREST, OR BEHAVIOR IN CONFLICT OF THE POLICY, EXISTS AND ANY RECOMMENDED ACTION. THE BOARD SHALL RETAIN THE RIGHT TO MODIFY OR REVERSE THE EXECUTIVE COMMITTEE'S DETERMINATIONS IN THIS CONTEXT. THE CONFLICTS OF INTEREST POLICY ALSO ADDRESSES CONFIDENTIALITY.
FORM 990, PART VI, SECTION B,	PROCESS FOR PRESIDENT AND CEO 1. REVIEW AND APPROVAL. THE COMPENSATION COMMITTEE, ON BEHALF OF THE BOARD, WILL REVIEW AND APPROVE THE COMPENSATION OF MBA'S CHIEF EMPLOYED EXECUTIVE, THE PRESIDENT, PROVIDED THAT INDIVIDUALS WITH CONFLICTS OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT AT

Return Reference	Explanation
LINE 15	<p>ISSUE ARE NOT INVOLVED IN THIS REVIEW AND APPROVAL. 'COMPENSATION' MEANS INITIAL SALARY, SPECIAL BENEFITS NOT GENERALLY AVAILABLE TO MBA STAFF, SALARY INCREASES AND BONUSES. 2. USE OF DATA AS TO COMPARABLE COMPENSATION. THE COMPENSATION COMMITTEE WILL REVIEW AND SET THE COMPENSATION OF THE PRESIDENT USING AS REFERENCES POINTS: (I) COMPENSATION OF ANY PREDECESSOR PRESIDENT, AND (II) READILY AVAILABLE PUBLIC DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS (FORMAL BENCHMARKING STUDIES BY OUTSIDE COMPENSATION CONSULTANTS NEED NOT BE COMMISSIONED ANNUALLY BUT MAY BE SOUGHT PERIODICALLY). 3. ASSESSMENT OR PERFORMANCE. THE COMPENSATION COMMITTEE WILL TAKE INTO ACCOUNT: (I) THE LEVEL OF ATTAINMENT OF MBA'S GOALS AND OBJECTIVES OVER THE REVIEW PERIOD, (II) THE NATURE OF THE PARTICULAR EXTERNAL AND INTERNAL CHALLENGES FACING MBA OVER THE REVIEW PERIOD, AND (III) SUCH OTHER CONSIDERATIONS AS MAY BE APPLICABLE UNDER THE PREVAILING CIRCUMSTANCES. 4. CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING. THERE IS CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING WITH RESPECT TO THE DECISIONS REGARDING THE COMPENSATION ARRANGEMENT. 5. A COMPENSATION CONSULTANT IS HIRED TO ADVISE IN THIS PROCESS. PROCESS FOR SPECIFIED KEY EMPLOYEES 1. REVIEW AND APPROVAL. THE PRESIDENT WILL SUBMIT RECOMMENDATIONS TO THE COMPENSATION COMMITTEE FOR REVIEW AND APPROVAL OF THE TOTAL COMPENSATION OF THE FOLLOWING SPECIFIED KEY EMPLOYEES, AS DEFINED IN THE INTERNAL REVENUE SERVICE'S FORM 990 INSTRUCTIONS: – THE CHIEF FINANCIAL OFFICER – THE SECRETARY, AS APPROVED BY THE BOARD OF DIRECTORS – ALL SENIOR VICE PRESIDENTS PROVIDED THAT INDIVIDUALS WITH CONFLICTS OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT AT ISSUE ARE NOT INVOLVED IN THIS REVIEW AND APPROVAL. 'COMPENSATION' MEANS INITIAL SALARY, SPECIAL BENEFITS NOT GENERALLY AVAILABLE TO MBA STAFF, SALARY INCREASES AND BONUSES. 2. USE OF DATA AS TO COMPARABLE COMPENSATION. THE COMPENSATION COMMITTEE WILL REVIEW AND SET THE COMPENSATION OF THE SPECIFIED KEY EMPLOYEES, BASED ON THE RECOMMENDATIONS OF THE PRESIDENT, WHO WILL USE AS REFERENCES POINTS: (I) READILY AVAILABLE PUBLIC OR OTHER DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS (MBA NEED NOT OBTAIN FORMAL BENCHMARKING STUDIES FROM OUTSIDE COMPENSATION CONSULTANTS ANNUALLY BUT THESE MAY BE SOUGHT PERIODICALLY); AND (II) THE SALARY AND LENGTH OF SERVICE OF THE PREVIOUS INCUMBENT. 3. ASSESSMENT OF PERFORMANCE. THE COMPENSATION COMMITTEE WILL REVIEW OF SPECIFIED KEY EMPLOYEES THE PRESIDENT'S ASSESSMENT OF – (I) THE LEVEL OF ATTAINMENT OF MBA'S GOALS AND OBJECTIVES OVER THE REVIEW PERIOD; (II) THE LEVEL OF ATTAINMENT OF A SPECIFIED KEY EMPLOYEE'S INDIVIDUAL GOALS AND OBJECTIVES OVER THE REVIEW PERIOD; (III) THE NATURE OF THE PARTICULAR EXTERNAL AND INTERNAL CHALLENGES FACING MBA OVER THE REVIEW PERIOD; AND (IV) OTHER, DOCUMENTED CONSIDERATIONS THAT MAY BE APPLICABLE UNDER THE PREVAILING CIRCUMSTANCES. 4. CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING. THERE IS CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING WITH RESPECT TO DECISIONS REGARDING THE COMPENSATION ARRANGEMENTS. 5. A COMPENSATION CONSULTANT IS HIRED TO ADVISE IN THIS PROCESS. PROCESS FOR REMAINING EMPLOYEES 1. THE PRESIDENT IS AUTHORIZED AND DIRECTED TO: (A) IMPLEMENT MBA'S PRESENT EMPLOYEE POSITION CLASSIFICATION SYSTEM THAT IDENTIFIES FUNCTIONALLY COMPARABLE POSITIONS ACROSS GROUPS, AND (B) ADMINISTER A COMPENSATION PLAN BASED ON: (I) SUCH CLASSIFICATION SYSTEM, (II) REASONABLY AVAILABLE CURRENT COMPENSATION DATA FROM SIMILARLY SITUATED ASSOCIATIONS, (III) MBA'S GOALS AND OBJECTIVES, AND (IV) SUCH OTHER CRITERIA OR CONSIDERATIONS THAT MAY BE APPLICABLE UNDER THE PREVAILING CIRCUMSTANCES. 2. THE PRESIDENT IS FURTHER AUTHORIZED TO REVISIT THE EMPLOYEE CLASSIFICATION SYSTEM AS WELL AS TO ENGAGE COMPENSATION CONSULTANTS, FROM TIME TO TIME, TO HELP ASSURE THAT THE EMPLOYEE CLASSIFICATION SYSTEM AND THE COMPENSATION DATA AND PLAN REMAIN RELEVANT TO THE ACHIEVEMENT OF MBA'S OVERALL GOALS AND OBJECTIVES. 3. UNDER EXCEPTIONAL CIRCUMSTANCES THAT MUST BE DOCUMENTED AND REPORTED TO THE COMPENSATION COMMITTEE, THE PRESIDENT IS AUTHORIZED TO OFFER SIGNING OR RETENTION BONUSES AND OTHER FORMS OF COMPENSATION TO EMPLOYEES IN ORDER TO HELP ASSURE THE SMOOTH OPERATION OF MBA AND/OR THE ACHIEVEMENT OF SIGNIFICANT MBA GOALS AND OBJECTIVES.</p>
FORM 990, PART VI, SECTION C, LINE 19	<p>CHARTER, BYLAWS AND CONFLICTS OF INTEREST POLICY ARE PROVIDED UPON REQUEST. FINANCIAL INFORMATION IS PROVIDED THROUGH THE FORM 990 UPON REQUEST. FINANCIAL STATEMENTS ARE PROVIDED TO THE BOARD OF DIRECTORS AND ARE NOT MADE AVAILABLE PUBLICLY.</p>

## **Additional Data**

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**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
MORTGAGE BANKERS ASSOCIATION

**Employer identification number**

36-1505650

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) 1331 L STREET LLC 1919 M STREET NW 5TH FL WASHINGTON, DC 20036 33-1210397	HELD MBA HEADQUARTERS OFFICE BUILDING	DE	0	0	MORTGAGE BANKERS ASSOCIATION
(2) MBA FIRST LLC 1919 M STREET NW 5TH FL WASHINGTON, DC 20036	PROVIDES SVCS TO ORGANIZATIONS IN THE REAL ESTATE FINANCE INDUSTRY	DC	0	0	MORTGAGE BANKERS ASSOCIATION

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(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	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)MBA OPENS DOORS FOUNDATION 1919 M STREET NW 5TH FL WASHINGTON, DC 20036 32-0355086	RENTAL & MORTGAGE ASSISTANCE TO FAMILIES WITH CRITICALLY ILL CHILDREN	DE	501(C)(3)	LINE 7	MORTGAGE BANKERS ASSOCIATION	Yes	
(2)MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE 1919 M STREET NW 5TH FL WASHINGTON, DC 20036 52-6144335	POLITICAL ACTION COMMITTEE	DC	527		MORTGAGE BANKERS ASSOCIATION	Yes	
(3)MORTGAGE ACTION ALLIANCE INC 1919 M STREET NW 5TH FL WASHINGTON, DC 20036 27-1893100	SUPPORT COMMON BUSINESS INTERESTS OF REAL ESTATE FINANCE INDUSTRY	DE	501(C)(6)		MORTGAGE BANKERS ASSOCIATION	Yes	
(4)MORTGAGE INDUSTRY STANDARDS MAINTENANCE ORGANIZATION INC 1919 M STREET NW 5TH FL WASHINGTON, DC 20036 51-0502943	DEVELOPING, PROMOTING AND MAINTAINING VOLUNTARY ELECTRONIC COMMERCE STDS	DE	501(C)(6)		MORTGAGE BANKERS ASSOCIATION	Yes	
(5)RESEARCH INSTITUTE FOR HOUSING AMERICA 1919 M STREET NW 5TH FL WASHINGTON, DC 20036 36-6109824	FURTHERING RESEARCH IN THE FIELD OF MORTGAGE BANKING AND REAL ESTATE FINANCE	IL	501(C)(3)	LINE 12A TYPE I	MORTGAGE BANKERS ASSOCIATION	Yes	

**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	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling 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) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							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)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

**Part V Transactions With Related Organizations.** Complete if the organization answered "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.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .		No
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	Yes	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .	Yes	
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .		No
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .		No
<b>f</b> Dividends from related organization(s) . . . . .		No
<b>g</b> Sale of assets to related organization(s) . . . . .		No
<b>h</b> Purchase of assets from related organization(s) . . . . .		No
<b>i</b> Exchange of assets with related organization(s) . . . . .		No
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .		No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .		No
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s)	Yes	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)		No
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .	Yes	
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	Yes	
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .	Yes	
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	Yes	
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .		No
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .	Yes	

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) MISMO INC - CONTRACTUAL FEE	L	863,125	CASH-BOOK VALUE
(2) MBA OPENS DOORS FOUNDATION-SHARING OF EMPLOYEES	O	570,086	CASH-BOOK VALUE
(3) MISMO INC - REIMBURSEMENT FOR CREDIT CARD RECEIPTS	P	400,456	CASH-BOOK VALUE
(4) MISMO INC - ACTUAL EXPENDITURES	Q	378,224	CASH-BOOK VALUE
(5) MBA OPENS DOORS FOUNDATION-REIMBURSEMENT OF EXPENDITURES	Q	103,838	CASH-BOOK VALUE
(6) RIHA - GRANT TO MBA'S PATH TO DIVERSITY SCHOLARSHIP	S	100,000	CASH-BOOK VALUE



**Part VII Supplemental Information**

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

Return Reference

Explanation

Schedule R (Form 990) 2019

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