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Department of the Treasury Internal Revenue Service

SCANNED AUG 0 1:2011

Form 990

A For the 2010 calendar year, or tax year beginning

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

2010, and ending

OMB No 1545 0047

2010



В	Chec	k if applica	able		D En	ployer Identi	fication Number	
		Address c	hange	VERMONT ASSOCIATION OF REALTORS, INC	0	<u>3-0265</u>	065	
		Name cha	nge	148 STATE STREET	E Te	lephone num!	ber	
	П	Initial retu	rn	MONTPELIER, VT 05602	8	02-229	-0513	
	П	Terminate	d					
	П	Amended	return		G Gr	oss receipts :	703,	830.
	П	Applicatio	n pending	F Name and address of principal officer	(a) Is this a group	return for affi		X No
				SAME AS C ABOVE	(b) Are all affiliate		Yes	No
<u> </u>	Ta	ax-exempt	status	501(c)(3) X 501(c) (6) (insert no) 4947(a)(1) or 527	If 'No,' attach	a list (see ins	tructions)	_
÷	_	/ebsite:		TI TIMBELL MOD COM	(c) Group exempt	on number >	•	
ĸ		orm of orga		X Corporation Trust Association Other► L Year of Formation	4 - 4 -		egal domicile VT	
			umma		1 1 3 1 3	III State of I	egai Gorniche VI	
:10,0	1			be the organization's mission or most significant activities: VERMONT A	SSOCTATIO	N OF F	FATTORS T	NC
	•			-FOR-PROFIT MEMBERSHIP ORGANIZATION FORMED TO U				<u>n</u> ⊂
ဦ				AND THEIR MEMBERS IN THE STATE OF VERMONT FOR				-
Activities & Governance				ELY A COMBINED INFLUENCE UPON MATTERS AFFECTING				
Š	2		k this bo					· · · ·
ŏ	3	Numl	nor of w	sting members of the governing body (Part VI, line 1a)	- 1	3		28
9	4	Numl	ber of in	dependent voting members of the governing body (Part VI, line-15)	ان۔ (4		28
jŧ	5	Total	number	of individuals employed in calendar year 2010 (Part V, Iner2a)	<u> </u>	5		8
ŧ	6	Total	numbe	dependent voting members of the governing body (Part VI, line 15). of individuals employed in calendar year 2010 (Part VI, line 23). of volunteers (estimate if necessary)	161	6		94
∢	7	a lotai	unrelate	ed business revenue from Part VIII, column (C), line 12	011 &	7 a		0.
	<u> </u>	b Net ι	inrelated	of volunteers (estimate if necessary) ed business revenue from Part VIII, column (C), line 12 I business taxable income from Form 990-T, line 34	1	7b		0.
	١.			Lond graphs (Part VIII line 1b)	YPrior Y		Current Y	
_	8			and grants (Fart VIII, line III)	, 20	8,889.		<u>,716.</u>
a	9			vice revenue (Part VIII, line 2g)	76	0,496.		,416.
Revenue	10					7,505.		<u>, 405.</u>
щ	11			e (Part VIII,-column (A), lines 5, 6d, 8c, 9c, 10c, and 11b)		1,367. 5,523.		<u>,055.</u> ,592.
_	 -			e – add lines 8 through 11 (must equal Part VIII, column (A), line 12) imilar amounts paid (Part IX, column (A), lines 1-3)	70	3,323.	700	, 332.
	13			• • • • • • • • • • • • • • • • • • • •	-			
	14		•	to or for members (Part IX, column (A), line 4)	- 21	0 261	21.0	757
ø,	15			er compensation, employee benefits (Part IX, column (A), lines 5-10)	31	8,261.	319	<u>,757.</u>
Expenses	16	a Profe	essional	fundraising fees (Part IX, column (A), line 11e)	(N 1.47 -7138-27	~ ;•* *	447 ·	12 Jan
ğ		b Total	fundrai	sing expenses (Part IX, column (D), line 25) ►	T. M. C.			181
ш	17	Othe	r expens	ses (Part IX, column (A), lines 11a-11d, 11f-24f)	46	1,446.	461	,124.
	18	3 Total	expens	es. Add lines 13-17 (must equal Part IX, column (A), line 25)	77	9,707.	780	,881.
	15	Reve	nue les	s expenses. Subtract line 18 from line 12	-1	4,184.	-80	,289.
b å					Beginning of C	urrent Year	End of Ye	ear
t Assets or id Belences	20) Total	assets	(Part X, line 16)	1,13	4,023.	1,192	,996.
4 n	21	Total	liabilitie	es (Part X, line 26)	52	1,548.	652	,122.
žĚ	1	2 Net a	assets o	r fund balances. Subtract line 21 from line 20	61	2,475.	540	,874.
P	art.	-4: -		re Block				<i>I</i>
					he best of my kno	wledge and b	elief, it is true, corre	ct. and
cor	nplet	e Declara	tion of pre	declare that I have examined this return, including accompanying schedules and statements, and to the context of the context o				ot, u no
				feel D. Mill	7	1/2	12811	
Si	gn		Signat	re of officer	Date			
He	re)		OBELY D. HILL				
		l	Type o	r print name and title				
			Print/Type	preparer's name Preparer's sygnature Date	Check		PTIN	
Pa	id	I,	JANE	M. BURROUGHS, CPA // CPA / 7/5	-///	mployed	P00207068	}
			Firm's nam	TOMUSPOCIAL CROSS OF A VINCENTAL CROSS	/			
		2512	Firm's add	140 01000 (000000 / /	Firm's	EIN ► 03	-0300841	
		1	3 auu	MONTPELIER, VT 0,56,02	Phone		2)223-626	1
Ma	v th	ا PS با	ISCUSS H	nis return with the preparer shown above? (see instructions)	TE HORE	(00	X Yes	No
	_				0113L 12/21/10			20 (2010)
QΑ	~ 1	or rap	CITTOIK	teaderion not fronce, see the separate instructions.	WITSE 14/21/10		FUIII 33	·• (4010)

	990 (2010) VERMONT ASSOCIATION OF REALTORS, INC	03-0265065	Page 2
Par	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
٦.	Briefly describe the organization's mission:		
	SEE SCHEDULE O		
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 X	No
	If 'Yes,' describe these new services on Schedule O.		- J
3	Did the organization cease conducting, or make significant changes in how it conducts, any program s	services?. Yes X	No
	If 'Yes,' describe these changes on Schedule O		_
4	Describe the exempt purpose achievements for each of the organization's three largest program service and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants are expenses, and revenue, if any, for each program service reported	ces by expenses. Section 501 and allocations to others, the	l (c) (3) total
48	(Code:) (Expenses \$ including grants of \$)	· · · · · · · · · · · · · · · · · · ·)
	THE VERMONT ASSOCIATION OF REALTORS, INC. CONDUCTS A LEADERSHIP		
	LEADERSHIP SKILLS FOR LOCAL BOARDS AND MAKE THEM AWARE OF RESOU		
	FOR THEIR MEMBERS. IN CONJUNCTION, WE ALSO ORGANIZE AN ANNUAL		
	MAKE MEMBERS AWARE OF LEGISLATION THAT MIGHT EFFECT THE REAL ES		<u>ME</u> _
	OWNERS. THROUGHOUT THE YEAR, WE PROVIDE AN EXTENSIVE SCHEDULE		
	REGULATORY TOPICS WHICH ASSISTS MEMBERS IN MAINTAINING THEIR L.		<u>NTS.</u> _
	FINALLY THE ASSOCIATION OFFERS AN ANNUAL CONFERENCE FOR MEMBERS PROFESSIONAL DEVELOPMENT SEMINARS AND INFORMATION ON MARKET AND		EDOM -
	NATIONAL SPEAKERS.	D TINDOSTKI TKENDS -	r ROM
	MATIONAL SI EARCHO.		
41	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
		· · · · · · · · · · · · · · · · · · ·	
		- 	
4	c (Code:) (Expenses \$ including grants of \$) (Revenue \$	
			- -
_			
4	d Other program services. (Describe in Schedule O)	····	
	(Expenses \$ including grants of \$) (Revenue	\$)	
Δ	e Total program service expenses ►		

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		Χ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х_
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII</i>	11b		Х
	c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	111		х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		х
	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, XII, and XIII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	_	X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		х
20	a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
	b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 ъ		

Part IV. | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		_X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
	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):			J,
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	_	Х
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28ь		х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?.	35		Х
2	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 Yes X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
3AA		Forn	n 990	(2010)

VERMONT ASSOCIATION OF REALTORS, INC 03-0265065 Part V. Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 14 **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c Х 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 8 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2Ь X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? Х 3а b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3Ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account) Х 4a **b** If 'Yes,' enter the name of the foreign country: > See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 58 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X 5Ь c if 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5с 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6a Х b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6**b** 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 71 g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? **b** Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10 a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 132 Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14b

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1 a 28 **b** Enter the number of voting members included in line 1a, above, who are independent **1**b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х 4 Did the organization make any significant changes to its governing documents Х 4 since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х 6 Does the organization have members or stockholders? SEE SCHEDULE O 6 X 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? SEE SCHEDULE O 7 a Х X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 82 **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O. 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code., Yes No 10a Does the organization have local chapters, branches, or affiliates? X 10a b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10 b X 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 X 12a **b** Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12_b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done SEE SCHÉDULE O 120 13 Does the organization have a written whistleblower policy? 13 X Х 14 Does the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official SEE SCHEDULE Q 15a **b** Other officers of key employees of the organization SEE SCHEDULE O 15_b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a Х b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safequard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > NONE 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public SEE SCHEDULE O 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► ROBERT_HILL 148 STATE STREET MONTPELIER VT 05602 802-229-0513

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1 a 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 employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A)	(B)	3) (C)						(D)	(E)	(F)	
Name and title	Average hours per week (describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Offi	Mey employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations	
(1) DENNIS BROWN							\vdash				
TREASURER	1	Х	L	Х		<u> </u>		0.	0.	0.	
(2) ROBERT HILL	_					l					
EXECUTIVE DIREC	40	X	L	X		<u> </u>		82,625.	0.	9,940.	
(3) CLAIRE DUKE		1									
DIRECTOR	11	X	L	X	<u> </u>		<u> </u>	0.	0.	0.	
(4) DEB PAWLAK		l						_			
DIRECTOR		X	L	<u> </u>	<u> </u>		_	0.	0.	0.	
(5) LORI PINARD		١.,							_		
PAST-PRESIDENT	_ 1	X	⊢	<u> </u>	<u> </u>	<u> </u>	_	0.	0.	0.	
6 ROBERT ARKLEY		١,,							_	_	
DIRECTOR	1	X	⊢	├—	├	 	-	0.	0.	0.	
BRIAN ARMSTRONG	,	,,	1		}	1	1	}	•		
DIRECTOR	_ 1	X	┢	-	-		┝	0.	0.	0.	
(8) KRISTINE STELL		,,			ŀ		l		_		
DIRECTOR TROMPLEY	1	Х	⊢	├─	-	-	┝	0.	0.	0.	
(9) DENISE TROMBLEY	,	٠,	l				1				
DIRECTOR	1	X	┢		┢		├	0.	0.	0.	
(10) BETSY CETRON	1	X							^		
DIRECTOR (11) RUSSELL COOKE	+ -	 ^	├	├-	├	 	├─	0.	0.	0.	
DIRECTOR	1	X					İ	0.	0		
(12) WILLIAM DALTON	 	<u> </u>	-	├	┢		-	0.	0.	0.	
DIRECTOR	1	X		l				0.	0.	_	
(13) ROSEMARY GINGUE		<u> </u>	\vdash	┢╾	┢┈		├	0.	<u> </u>	0.	
DIRECTOR	1	X						0.	0.	0.	
(14) ANDREA CHAMPAGNE	- -	\ \frac{\Lambda}{\lambda}	┢	⊢	\vdash	\vdash	 	 	<u> </u>		
DIRECTOR	1	X	İ	l			1	0.	0.	0.	
(15) LISA SHAPPY	 -	 	H	 			 		-	-	
DIRECTOR	1	X				1		0.	0.	0.	
(16) AMEY RYAN	─ ─	 	1	T	t		1	 		-	
DIRECTOR	-† ₁	X	1	1		1		0.	0.	0.	
(17) PAUL JAMES	<u> </u>	1	Т		T		1		<u>~</u>	<u>°</u> .	
DIRECTOR	-	X		1		ļ		0.	0.	0.	
PAA			TEEA	0107	1/	2/21/10				Form 990 (2010)	

Part VII Section A. Officers, Directors, Trus			En		oye	ees	, an	d Highest Co	mpensated En	plove	es (c	ont)
(A)	(B) (c)				(D)	(E)	1	(F)				
Name and title	Average hours	Posi	ton (check	k all i	that a	pply)	Reportable	Reportable		stimated	
	per week	Ind:	İnst	Officer	Ę.	Hig	Former	the organization	compensation from related organizations	con	unt of ot opensate	
	hours for	vidu	tut.	cer	em	hest ploys	Ter.	(W-2/1099-MISC)	(W-2/1099-MISC)		rom the ganizatio	n
	organi-	al tr	onal		Ploy	မီ ဝရ					nd relate janization	
	hours per week (describe hours for related organi- zations in Sch O)	uste	trus	ŀ	8	pen						
	3010)	"	tee	1	1	Highest compensated employee						
				<u> </u>								
(18) LISA MEYER												
DIRECTOR	1	X		<u> </u>	<u> </u>	<u> </u>		0.	0.			0.
(19) TOM WALLACE	,	.,				ļ				1		
DIRECTOR (20) KENNETH LIBBY	1	X		<u> </u>	⊢	┝	-	0.	0.	 		0.
DIRECTOR	,	х		ŀ				0	_			•
(21) ERIC JOHNSTON	1 1	^		┢	\vdash	╁	-	0.	0	 	_	0.
DIRECTOR	1	Х	ŀ					0.	0	1		0
(22) LESLEE MACKENZIE	 	Ĥ	-		├	┢	-	0.		+		0.
PRESIDENT	1	Х		X				11,000.	0			0.
(23) DIANNE MCLAUGHLIN	├ -	<u> </u>		-	┢		<u> </u>	11,000.		-		_ _
DIRECTOR	1	X						0.	0			0.
(24) LAURIE MECIER		Ť	Г		T	T-	_			+		- • ·
DIRECTOR	1	X					1	0.	0	.		0.
(25) SUSAN DUKETTE											-	
DIRECTOR	1	Х						0.	0	.		0.
(26) MARK LINTON												
DIRECTOR	1	X					L	0.	0			0.
(27) PETER TUCKER						l	ŀ					
PRESIDENT ELECT	1	X	_	X	╙	<u> </u>	<u> </u>	1,000.	0			<u>0.</u>
(28) KYLE KERSHNER		١						_ :				
DIRECTOR	1	X	 		⊢	├	├	0.	0			0.
(29)		İ				ļ						
1 b Sub-total	<u> </u>	L	L	L		1	├	93,625.	0	+	9 (940.
c Total from continuation sheets to Part VII, Section A		•					>	1,000.	0		<u> </u>	0.
d Total (add lines 1b and 1c)							>	94,625.	0		9.9	940.
2 Total number of individuals (including but not limited	to thos	e lis	ted	abo	ve)	who	rec	<u> </u>				
from the organization 0												
	-										Yes	No
3 Did the organization list any former officer, director	or truste	e, k	еу е	emp	loye	e, o	r hig	hest compensate	d employee			
on line 1a? If 'Yes,' complete Schedule J for such in	ndividuai	۱.								3	ļ. —	X
4 For any individual listed on line 1a, is the sum of re	oortable	com	per	sati	on a	and	othe	r compensation fr	om			
the organization and related organizations greater ti such individual	nan şibi 	U,UU	J? I	ΤΥ	es	com	oiete	Schedule J for		4	İ	X
5 Did any person listed on line 1a receive or accrue or	ompens	ation	fro	m a	nv ı	ınre	lated	l organization or ii	ndıvıdual		1	
for services rendered to the organization? If 'Yes,' or	complete	Scl	nedu	ıle J) for	suc	h pe	rson		5		X
Section B. Independent Contractors 1 Complete this table for your five highest compensate					L	<u> </u>	H 1		£100.000 /			
 Complete this table for your five highest compensation from the organization. 	ea inaep	ena	ent	con	urac	tors	ınaı	received more th	an \$100,000 of			
(A)	<u>.</u>							(B			(C)	
Name and business address Description of services							of services	Comp	ensatio	n ——		
						-						
												
2 Total number of independent contractors (including	hut not	limite	ad t	n the	056	liete	nd ah	l who receive	d more than	······································		
\$100,000 in compensation from the organization				J 011	JJ6	,,,,(, a al	oro, mio receive	G HIOLE WAIT			

1 41	t viti Statement of Revenue				
٠		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
v	1a Federated campaigns 1a				012, 010, 01 011
NA	b Membership dues . 1b	1			
S S	· · · · · · · · · · · · · · · · · · ·	-			
A S	c Fundraising events	4			
늉뙭	d Related organizations 1d	4			
ŠΝ	e Government grants (contributions) 1e	_			
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 3, 716				
풀의	g Noncash contributions included in lns 1a-1f: \$	1			
8	h Total. Add lines 1a-1f	3,716.			
핃	Business Code			***************************************	
ᆲᅵ	2a MEMBERSHIP DUES & ASSESSMENTS 541900	525,855.	525,855.		
₫	b EDUCATION 541900				
핑		107,578.	107,578.		
Ž	c ANNUAL MEETING 541900	47,683.	47,683.	· · · · · · · · · · · · · · · · · · ·	
SE	d PUBLIC AWARENESS CAMPAIGN 541900	300.	300.		
Σ×	e				
PROGRAM SERVICE REVENUE	f All other program service revenue				1.
ă.	g Total. Add lines 2a-2f	681,416.			
	3 Investment income (including dividends, interest and				
	other similar amounts).	12,405.			12,405.
	4 Income from investment of tax-exempt bond proceeds	>			
	5 Royalties.	>			
	(i) Real (ii) Personal			······································	
	6a Gross Rents				
	b Less: rental expenses	1			
- 1	c Rental income or (loss)	-			
j	d Net rental income or (loss)	╡			
	The rental income of (ioss)				
	7a Gross amount from sales of assets other than inventory	_			
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)	7			
1	<u> </u>	<u> </u>			
w l	8a Gross income from fundraising events				
I	(not including \$,		
OTHER REVEN	of contributions reported on line 1c).		ļ		
<u></u>	See Part IV, line 18	_			
ΞĮ	b Less. direct expenses b				
٦	c Net income or (loss) from fundraising events	<u> </u>	-		
	9a Gross income from gaming activities. See Part IV, line 19				
	b Less: direct expenses b	7			
	c Net income or (loss) from gaming activities	5	,		
	10a Gross sales of inventory, less returns				
	and allowances a 5,993				ŀ
	b Less: cost of goods sold b 3,238	- 1			
	c Net income or (loss) from sales of inventory	2,755.			2,755.
ļ	Miscellaneous Revenue Business Code				
į	11a MISC. INCOME	300.			300.
,	b				
į	c	1			
	d All other revenue				
	e Total. Add lines 11a-11d	300.			
		700,592.	681,416.	0.	15,460.
$\overline{}$				<u> </u>	1 10, 200.

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) but are not required to complete columns (B), (C), and (D)

(A) (D) Do not include amounts reported on lines Program service Management and Total expenses Fundraising 6b, 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 4 Benefits paid to or for members Compensation of current officers, directors, 94,625. trustees, and key employees. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described n in section 4958(c)(3)(B) 160,250. 7 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) 3,000. employer contributions) 42,100. Other employee benefits 19,782 10 Payroll taxes 11 Fees for services (non-employees) a Management **b** Legal 16,995 17,926 c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees **g** Other 12 Advertising and promotion 12,614 13 Office expenses 3,800. Information technology Royalties 15 38,096 16 Occupancy 17 49,360 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local 55,698. 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 10,204 22 Depreciation, depletion, and amortization Insurance 1,561 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) a EDUCATION 82,797 55,577 **b** GOV'T AFFAIRS COMM c ON LINE FORMS 28,972 d EQUIPMENT RENTAL/MAINTENANCE 27,728 • PUBLIC RELATIONS 14,803 44,993 f All other expenses 25 Total functional expenses. Add lines 1 through 24f 780,881 Joint costs. Check here ► if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Pa	nt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	147,690.	1	304,956.
	2	Savings and temporary cash investments	827,824.	2	270,060.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net .	23,159.	4	1,269.
	5	Receivables from current and former officers, directors, trustees, key employees and highest compensated employees. Complete Part II of Schedule L	,	5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)),	6	
A S E T S	7	Notes and loans receivable, net		7	
S E	8	Inventories for sale or use	17,763.	8	16,080.
Ş	9	Prepaid expenses and deferred charges	24,405.	9	8,952.
	10 a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 541, 625			
		Less: accumulated depreciation. 10b 253, 336		10 c	288,289.
	i .	Investments — publicly traded securities.	33,102.	11	303,390.
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets .		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,134,023.	16	1,192,996.
	17	Accounts payable and accrued expenses	29,801.	17	13,584.
	18	Grants payable		18	10,001.
	19	Deferred revenue	491,747.	19	479,231.
Ļ	20	Tax-exempt bond liabilities .		20	3.37.23.27
Ā	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
 	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
E S	23	Secured mortgages and notes payable to unrelated third parties		23	159,307.
	24	Unsecured notes and loans payable to unrelated third parties		24	133,307.
	25	Other liabilities Complete Part X of Schedule D	 	25	
	26	Total liabilities. Add lines 17 through 25	521,548.	26	652,122.
N		Organizations that follow SFAS 117, check here ► X and complete lines			
P	1	27 through 29 and lines 33 and 34.			
Ą	27	Unrestricted net assets	612,475.	27	540,874.
ASSELS	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
R		Organizations that do not follow SFAS 117, check here > and complete			
Ę		lines 30 through 34.			
F	30	Capital stock or trust principal, or current funds .		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
î	32	Retained earnings, endowment, accumulated income, or other funds	:	32	
B41420W	33	Total net assets or fund balances.	612,475.	33	540,874.
Ę	34	Total liabilities and net assets/fund balances.	1,134,023.	34	1,192,996.

BAA

Form **990** (2010)

Form 990 (2010) VERMONT ASSOCIATION OF REALTORS, INC	03-0265065		Pad	ge 12
Part XI. Reconciliation of Net Assets				'
Check if Schedule O contains a response to any question in this Part XI	·			X
•				
1 Total revenue (must equal Part VIII, column (A), line 12)	1		0,5	
Total expenses (must equal Part IX, column (A), line 25)	2		0,8	
3 Revenue less expenses. Subtract line 2 from line 1	3		0,2	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,4	
5 Other changes in net assets or fund balances (explain in Schedule O). SEE SCHEDULE O	5		8,6	<u>88.</u>
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	54	0,8	74.
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response to any question in this Part XII		_ •		
1 Accounting method used to prepare the Form 990: Cash X Accrual Other		,	Yes	No
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
b Were the organization's financial statements audited by an independent accountant?		2b		X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for over review, or compilation of its financial statements and selection of an independent accountant?	sight of the audit,	2c	х	
If the organization changed either its oversight process or selection process during the tax year, exp in Schedule O.	laın			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year separate basis, consolidated basis, or both:	were issued on a			
X Separate basis Consolidated basis Both consolidated and separate basis				
3a As a result of a federal award, was the organization required to undergo an audit or audits as set for Audit Act and OMB Circular A-133?	th in the Single	За		X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	o the required audit	3b		
BAA	·	Form	990 (2010)

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

If the organization answered 'Yes,' to 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,' to 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.

		to Form 990, Part IV, line 5 (Proxy Tax) or I ganizations: Complete Part III.	Form 990-EZ, Part V, I	ine 35a (Proxy Tax), the	n				
	of organization	ganizations. Complete Fart III.		Employer Identifica	Hon number				
	RMONT ASSOCIATION O	E DENITODO INC		03-026506					
		rganization is exempt under secti	on 501(c) or is a						
		organization's direct and indirect political ca			Zauvii.				
	Political expenditures .	organization's direct and indirect political ca	mpaign activities in r	artiv ►\$					
	Volunteer hours.	•	•	Ψ.					
		rganization is exempt under secti	on 501(c)(3)						
		se tax incurred by the organization under s		▶ \$					
	•	se tax incurred by organization managers u		≻ \$					
	•	section 4955 tax, did it file Form 4720 for the		Ψ.	Yes No				
	Was a correction made?	Tools and the first the fi	ins year		Yes No				
	If 'Yes,' describe in Part IV.	·			☐ 163 ☐ 140				
		rganization is exempt under secti	on 501(c), excer	ot section 501(c)(3)	l <u>.</u>				
		pended by the filing organization for section							
			•	•					
2	2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$								
3	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 X No				
5 	organization made payments amount of political contribution	and employer identification number (EIN) of the control of the con	nount paid from the fil v delivered to a separ	ing organization's funds ate political organization	Also enter the				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-				
(1)									
(2)									
(3)									
(4)									
(5)									
<i>(</i> 5)									

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

Schedule C (Form 990 or 990-EZ) 2010

 Schedule C (Form 990 or 990-EZ) 2019	o vermont as	SOCIATION OF PEAT	TOPS INC	03-026	5065 D 0
	the organization	on is exempt under se			
		ongs to an affiliated group.			
— · · · · · · · · · · · · · · · · · · ·		cked box A and 'limited cor	atrol' provisions apply		
	Limits on Lobby	ying Expenditures ans amounts paid or incurr		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditu	ures to influence pu	blic opinion (grass roots lot	obvina)		
	•	egislative body (direct lobb			
c Total lobbying expenditu		, ,	J · · · · 3 /		<u> </u>
d Other exempt purpose e	expenditures	•			
e Total exempt purpose e	xpenditures (add lir	nes 1c and 1d)			
f Lobbying nontaxable an both columns.	nount, Enter the am	nount from the following tab	le ın		
If the amount on line 1e, colo	umn (a) or (b) is:	The lobbying nontaxable a	mount 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	i I	
Over \$1,000,000 but not over \$	31,500,000	\$175,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over \$	317,000,000	\$225,000 plus 5% of the excess of	over \$1,500,000.		
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable a	amount (enter 25%	of line 1f)			
h Subtract line 1g from lin	ne 1a. If zero or les	s, enter -0-			
I Subtract line 1f from line	e 1c. If zero or less	, enter -0-			
j If there is an amount of section 4911 tax for this	her than zero on er s year?	ther line 1h or line 1i, did th	ne organization file Form	n 4720 reporting	Yes No
(Soi	me organizations the	4-Year Averaging Period I nat made a section 501(h) e nns below. See the instructi	lection do not have to c	omplete all of the five h 2f.)	
	Lot	bying Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					

f Grassroots lobbying expenditures

Schedule **C** (Form 990 or 990-EZ) 2010

							
Part II-B	Complete if the or	ganization is	s exempt u	nder section	501(c)(3) ar	d has NOT fi	led Form 5768
F 734 7 47 51	(election under se	ction 501(h)).				, , , , , , , , , , , , , , , , , , , ,

•	(2	2)	(b)
	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local			
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
Publications, or published or broadcast statements? .			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If 'Yes,' describe in Part IV			
j Total. Add lines 1c through 1i	1		
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			,
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		L	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50 section 501(c)(6).	I(c)(5), or	
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1 X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?.			2 X
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?			3 X
Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if P is answered 'Yes.'			
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year		2a	
b Carryover from last year .		<u>2b</u>	
c Total		2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic	cal		
expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)		4	0.
Part IV Supplemental Information		5	0.
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Also, complete this part for any additional information.	l Part	II-B, III	ne 1ı.

Schedule C (F	orm 990 or 990-E/) 2010 VERMONT ASSOCIATION OF REALTORS, INC	03-0265065	Page 4
Part IV.	Supplemental Information (continued)		
`			
			- -
			
			
			
			- -

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Employer Identification number

	MONT ASSOCIATION OF REALTORS,			03-0	<u> 265065</u>	
ar	tl Organizations Maintaining Donc the organization answered 'Yes'	or Advised Funds or Othe	r Similar Fund	ds or Accounts	s. Complete	e if
	the organization answered Tes		· · · · · · · · · · · · · · · · · · ·			
	Total more barries at an distance	(a) Donor advised ful	nds	(b) Funds ar	nd other accou	ınts
_	Total number at end of year	· · · · · · · · · · · · · · · · · · ·				
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the as to the organization's exclusive le	sets held in dono gal control?	r advised	Yes	No No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private beneather.	the benefit of the donor or donor	that grant funds of advisor, or for an	can be ny other	Yes	No
Par	t II Conservation Easements. Comp	lete if the organization an	swered 'Yes'	to Form 990. P	art IV. line	7.
	Purpose(s) of conservation easements held by			•		
	Preservation of land for public use (e.g., r	_	¬'''	an historically imp	ortant land are	a
	Protection of natural habitat		┥	a certified historic		
	Preservation of open space	L.	_			
2	Complete lines 2a through 2d if the organization last day of the tax year.	on held a qualified conservation	contribution in the	e form of a conserv	vation easeme	nt on the
				Held at	the End of the	Tax Year
ε	Total number of conservation easements			2a		
ŀ	Total acreage restricted by conservation ease	ments.		2b		
•	: Number of conservation easements on a certi	fied historic structure included in	(a)	2 c		
•	Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, and	not on a historic	2 d		
3	Number of conservation easements modified, tax year ►	transferred, released, extinguish	ned, or terminated	by the organization	on during the	
4	Number of states where property subject to co	onservation easement is located	•			
5	Does the organization have a written policy re and enforcement of the conservation easeme	egarding the periodic monitoring, nts it holds?	inspection, handl	ing of violations,	Yes	No
6	Staff and volunteer hours devoted to monitori	ng, inspecting, and enforcing cor	nservation easem	ents during the yea	ar	_
7	Amount of expenses incurred in monitoring, ii	nspecting, and enforcing conserv	ation easements	during the year		
8	Does each conservation easement reported of 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requ	urements of section	on	Yes	No
9	In Part XIV, describe how the organization reinclude, if applicable, the text of the footnote conservation easements.	ports conservation easements in to the organization's financial sta	its revenue and e atements that des	expense statement cribes the organiza	, and balance ation's account	sheet, and ing for
Pai	Complete if the organization an	ections of Art, Historical swered 'Yes' to Form 990,	Treasures, or , Part IV, line	Other Similar 8.	Assets.	
1	alf the organization elected, as permitted under art, historical treasures, or other similar asset in Part XIV, the text of the footnote to its final	ts held for public exhibition, educ	ation, or research			
ı	b if the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items:	r SFAS 116 (ASC 958), to report old for public exhibition, education	t in its revenue stan, or research in i	atement and baland furtherance of publ	ce sheet work: lic service, pro	s of art, vide the
	(i) Revenues included in Form 990, Part VIII	, line 1		1	► \$	
				1	- \$	
2	If the organization received or held works of a amounts required to be reported under SFAS	art, historical treasures, or other 116 (ASC 958) relating to these	sımılar assets for ıtems:	financial gain, pro	vide the follow	ing
i	Revenues included in Form 990, Part VIII, lin	· · · · · · · · · · · · · · · · · · ·			> \$	
	Assets included in Form 990. Part X.				≻\$	

				•	•
	ONT ASSOCIATIO			03-0265	
Part III Organizations Mainta	aining Collections	of Art, Historica	i Treasures, or (Other Similar Ass	ets (continued)
3 Using the organization's acquisit tems (check all that apply)	ion, accession, and oth	er records, check an	y of the following that	t are a significant use	of its collection
a Public exhibition		d Loan or exc	hange programs		
b Scholarly research		e Other	.		
c Preservation for future gene	rations				
4 Provide a description of the organical Part XIV.	nization's collections a	nd explain how they	further the organization	on's exempt purpose i	n
5 During the year, did the organiza assets to be sold to raise funds	ation solicit or receive or rather than to be maint	donations of art, histo ained as part of the o	rical treasures, or oth organization's collection	ner sımılar on? .	Yes No
Part IV Escrow and Custodi 9, or reported an am	al Arrangements. ount on Form 990,	Complete if orga Part X, line 21.	nization answere	ed 'Yes' to Form 9	990, Part IV, line
1a Is the organization an agent, tru included on Form 990, Part X?	stee, custodian, or oth	er intermediary for co	ntributions or other a	ssets not	Yes No
b If 'Yes,' explain the arrangemen	t in Part XIV and comp	lete the following tab	le:	-	
, ,	·	•		<i>F</i>	Amount
c Beginning balance				1c	
d Additions during the year				1 d	
e Distributions during the year				1e	
f Ending balance.				1f	
2a Did the organization include an	amount on Form 990, F	Part X, line 21?			Yes No
b If 'Yes,' explain the arrangemen		•		L	
Part V Endowment Funds.		anization answe	red 'Yes' to Form	990, Part IV, line	e 10.
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 - Pariming of year halance					
I B Deginning of year barance					3.7
1a Beginning of year balance b Contributions					

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment %

b Permanent endowment %

c Term endowment %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

	Yes	No
3a(i)		
3a(ii)		
312		

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Describe in all XIV the interlace dates of	Title organization 3 chaowiner	it lulius.		
Part VI Land, Buildings, and Equip	ment. See Form 990, Pa	art X, line 10.		
Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		87,108.		87,108.
b Buildings		273,324.	81,147.	192,177.
c Leasehold improvements				
d Equipment		181,193.	172,189.	9,004.
e Other				
Total. Add lines 1a through 1e (Column (d) mu	ist equal Form 990, Part X, co	lumn (B), line 10(c))	H	288,289.

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d Grants or scholarships

f Administrative expenses **g** End of year balance

(ii) related organizations

and programs

e Other expenditures for facilities

Schedule **D** (Form 990) 2010

Schedule D (Form 990) 2010 VERMONT ASSOCIATION Part VII Investments—Other Securities. See F		
(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		Cost of end-of-year market value
(2) Closely-held equity interests		
(3) Other		
(A)	· · · · · · · · · · · · · · · · · · ·	
(B)		
(C)		
(D)		
(E)		
(f)		
(G)		
<u>(H)</u>		
(l)		
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.)		
Part VIII Investments-Program Related. (See	Form 990, Part X	, line 13) N/A
(a) Description of investment type	(b) Book value	(c) Method of valuation:
		Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. (See Form 990, Part X		7
······································	, line 15) N/I	
(1)	scription	(b) Book value
(2)		
(3)		
(4)		
(5)	·	
(6)		
(7)		
(8)	· · · · · · · · · · · · · · · · · · ·	
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column(B)) line 15)	>
Part X Other Liabilities. (See Form 990, Par		
(a) Description of liability	(b) Amount	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
7)		·
(8)		
(9)		
(10)		
(11)		
Total (Column (h) must squal Form 000, Red V solumn (R) (m. 25)		· · -

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

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

Schedule D (Form 990) 2010 VERMONT ASSOCIATION O	F REALTORS, I	NC	03-0265	065	Page 4
Part XI Reconciliation of Change in Net Assets from Form	990 to Audited Finar	ncial Statements	N	J/A	
1 Total revenue (Form 990, Part VIII, column (A), line 12)			L		
2 Total expenses (Form 990, Part IX, column (A), line 25)			<u> </u>		
3 Excess or (deficit) for the year. Subtract line 2 from line 1			L		
4 Net unrealized gains (losses) on investments					
5 Donated services and use of facilities .		•	<u> </u>		
6 Investment expenses			L		
7 Prior period adjustments			L		
8 Other (Describe in Part XIV)			L		
9 Total adjustments (net). Add lines 4 through 8			L		
10 Excess or (deficit) for the year per audited financial stateme	ents. Combine lines 3	and 9			
Part XII Reconciliation of Revenue per Audited Fi	inancial Statemer	nts With Revenue p	er Return	N/A	
1 Total revenue, gains, and other support per audited financia	al statements	•	1		
2 Amounts included on line 1 but not on Form 990, Part VIII, I	line 12:				
a Net unrealized gains on investments		2a			
b Donated services and use of facilities		2ь			
c Recoveries of prior year grants		2c	\Box		
d Other (Describe in Part XIV)		2d			
e Add lines 2a through 2d			2e		
3 Subtract line 2e from line 1			3		
4 Amounts included on Form 990, Part VIII, line 12, but not or	n line 1:				
a Investments expenses not included on Form 990, Part VIII,		4a			
b Other (Describe in Part XIV.)		4b	- 1		
c Add lines 4a and 4b .			4c		
5 Total revenue. Add lines 3 and 4c. (This must equal Form 9	990. Part I. line 12)		5		
Part XIII Reconciliation of Expenses per Audited Fin		s With Expenses per	Return	N/A	
1 Total expenses and losses per audited financial statements			1 1		
2 Amounts included on line 1 but not on Form 990, Part IX, Iir					
a Donated services and use of facilities		2a			
b Prior year adjustments		2b	\neg		
c Other losses		2c	\neg		
d Other (Describe in Part XIV.)		2d	\dashv 1		
e Add lines 2a through 2d			2e		
3 Subtract line 2e from line 1			3		
4 Amounts included on Form 990, Part IX, line 25, but not on	i line 1:				
a Investments expenses not included on Form 990, Part VIII,		4a			
b Other (Describe in Part XIV)		4b			
c Add lines 4a and 4b .			4c		
5 Total expenses. Add lines 3 and 4c. (This must equal Form	n 990, Part I, Iine 18)		5		
Part XIV Supplemental Information					
Complete this part to provide the descriptions required for Part II, Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and any additional information.	, lines 3, 5, and 9; Pa d 4b; and Part XIII, lir	art III, lines 1a and 4; Part nes 2d and 4b. Also comp	: IV, lines 1b lete this par	and 2b; t to provide	

TEEA3304L 02/11/11

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Schedule **D** (Form 990) 2010

Schedule D	(Form 990) 2010	VERMONT	ASSOCIATION	OF REALTORS,	INC	03-0265065	Page 5
Part XIV	Supplementa	Information	n (continued)				
		~					
					. -		
				- 			
						-	
	·						
							_
		- -					

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2010

Open to Public Inspection

OMB No 1545-0047

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.

Name of the organization Employer identification number 03-0265065 VERMONT ASSOCIATION OF REALTORS. FORM 990, PART III, LINE 1 - ORGANIZATION MISSION VERMONT ASSOCIATION OF REALTORS INC IS A NOT-FOR-PROFIT MEMBERSHIP ORGANIZATION FORMED TO UNITE LOCAL BOARDS OF REALTORS AND THEIR MEMBERS IN THE STATE OF VERMONT FOR THE PURPOSE OF EXERTING EFFECTIVELY A COMBINED INFLUENCE UPON MATTERS AFFECTING REAL ESTATE, TO EVALUATE THE STANDARDS OF THE REAL ESTATE BUSINESS AND THE PROFESSIONAL CONDUCT OF PERSONS ENAGED THEREIN. FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER MEMBERS OF THE VERMONT ASSOCIATION OF REALTORS INC. ARE LICENSED REAL ESTATE AGENTS WHO APPLY FOR MEMBERSHIP TO TAKE ADVANTAGE OF BUSINESS TOOLS, EDUCATION, INFORMATION AND CODE OF ETHICS PROCESSES. FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY MEMBERS ELECT THE GOVERNING BODY BY VOTE FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS THE 990 IS REVIEWED BY THE EXECUTIVE FINANCE COMMITTEE FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS THE CONFLICT OF INTEREST POLICY IS ON THE HONOR SYSTEM. BOARD MEMBERS ANNOUNCE WHEN THEY HAVE A CONFLICT AND RECUSE THEMSELVES FROM PARTICIPATION IN DISCUSSION OR VOTING. FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS FOR CEO, EXEC. DIR., OR TOP MGT A REVIEW OF THE EXECUTIVE VICE PRESIDENT IS CONDUCTED BY THE PRESIDENT, PRESIDENT-ELECT AND PAST PRESIDENT AND IS BASED ON INDUSTRY AND NATIONAL COMPENSATION STUDIES, COMPENSATION IS RECOMMENDED TO THE EXECUTIVE FINANCE COMMITTEE FOR APPROVAL. FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYEES THE PRESIDENT'S STIPEND IS SET DURING THE BUDGETING PROCESS EACH YEAR. THERE IS NO REVIEW AS IT IS AN ELECTED POSITION.

Schedule 0 (Form 990 or 990-EZ) 2010	Page 2
Name of the organization	Employer identification number
VERMONT ASSOCIATION OF REALTORS, INC	03-0265065
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	AILABLE
THE ASSOCIATION'S GOVERNING DOCUMENTS ARE POSTED ON THE WEBSITE	THE CONFLICT OF
INTEREST_AND_FINANCIAL_STATEMENTS_ARE_AVAILABLE_FOR_PUBLIC_VIEW	IN THE OFFICE.
	·

2010 SCHEDULE O - SUPPLEMENTAL INFORMATION PAGE 1

CLIENT 2291 VERMONT ASSOCIATION OF REALTORS, INC

03-0265065

7/05/11

FORM 990, PART XI, LINE 5
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

NET UNREALIZED GAINS OR LOSSES ON INVESTMENTS

\$ 8,688.

TOTAL \$ 8,688.

(Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545 1709

Department of the Treasury Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to

Associated	extension of time to file any of the forms listed in F With Certain Personal Benefit Contracts, which multing of this form, visit www.irs.gov/efile and click of	Part I or Pai ust be sent i	to the IRS in paper format (see instruction	ormation Return for 1	ransfers		
Part I	Automatic 3-Month Extension of Time.	Only subr	nit original (no copies needed).				
	on required to file Form 990-T and requesting an a			omplete Part I only	▶ □		
All other co	orporations (including 1120-C filers), partnerships, f returns	REMICS, an	nd trusts must use Form 7004 to request	an extension of time	to file		
	Name of exempt organization			Employer identification	number		
Type or print							
File by the	Number, street, and room or suite number. If a P.O. box, see i			103 0203003			
due date for filing your return See	148 STATE STREET						
instructions	City, town or post office, state, and ZIP code. For a foreign add	dress, see instr	uctions				
	MONTPELIER, VT 05602						
Application	leturn code for the return that this application is for	(file a sepa	arate application for each return)		01 Return		
Is For		Code	ls For		Code		
Form 990		01	Form 990-T (corporation)		07		
Form 990-E	BL	02	Form 1041-A		08		
Form 990-E	ZZ	03	Form 4720		09		
Form 990-F	PF	04	Form 5227		10		
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069		11		
Form 990-T	(trust other than above)	06	Form 8870		12		
Telephon If the on If this is check to	ne No. 802-229-0513 rganization does not have an office or place of bus for a Group Return, enter the organization's four this box I if it is for part of the group, checkension is for	digit Group	United States, check this box Exemption Number (GEN)	f this is for the whole and EINs of all memb			
until The e ► 2	lest an automatic 3-month (6 months for a corpora 8/15, 2011, to file the exempt orgonatension is for the organization's return for:	anization re	eturn for the organization named above	nal return			
nonre	application is for Form 990-BL, 990-PF, 990-T, 472 fundable credits. See instructions		·	3a \$	0.		
paym	application is for Form 990-PF, 990-T, 4720, or 60 ents made. Include any prior year overpayment all	owed as a	credit .	3ь\$	0.		
c Balan EFTP	ice due. Subtract line 3b from line 3a. Include your S (Electronic Federal Tax Payment System). See	payment w instructions	ith this form, if required, by using	36 \$	0.		
Caution. If payment in	you are going to make an electronic fund withdraw structions.	al with this	Form 8868, see Form 8453-EO and Form	n 8879-EO for			

BAA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)