

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

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

A	or the 2	012 calendar year, or tax year beginning JUN 1, 2012 and	ending M	AY 31, 2013						
В	Check if applicable	C Name of organization		D Employer identific	ation number					
•	applicable	VT ASSOCIATION FOR THE EDUCATION OF								
	Address change	YOUNG CHILDREN								
	Name change	Doing Business As		03-03	313379					
	Initial		E Telephone number							
一	Termin-	PO BOX 464	Room/suite	-	244-6282					
Ē	Amended		G Gross receipts \$	268,242.						
	Applica-	WATERBURY, VT 05676		H(a) Is this a group return						
<u> </u>	pending	F Name and address of principal officer:MELISSA RIEGEL-GAR.	RETT	for affiliates?	Yes X No					
		PO BOX 464, WATERBURY, VT 05676		H(b) Are all affiliates incl						
	Toy over	ppt status	or 527	1 ' '	list. (see instructions)					
_		► WWW.NAEYC.ORG/MEMBERSHIP	01 327	1	•					
		ganization: X Corporation Trust Association Other	I Voor	H(c) Group exemption	State of legal domicile: VT					
		Summary	L Icai	Ul lulillation. 13/2 M	I State of legal doffficile V I					
		<u> </u>	ED ENCE	C AND DIED TO	CAULONG BOD					
e S		refly describe the organization's mission or most significant activities CONF.								
हर्षि⊅ु≲ Governance		DUCATORS TO FOSTER NEW IDEAS AND PROVID		***************************************						
€	1	neck this box I if the organization discontinued its operations or dispo	sea or more	1 . i						
<u></u>	1	umber of voting members of the governing body (Part VI, line 1a)		3	10					
₹ ∞		umber of independent voting members of the governing body (Part VI, line 1b)		4	10					
∄. iš	h .	otal number of individuals employed in calendar year 2012 (Part V, line 2a)	•	5	12					
<u>∓</u> ک	1	etal number of volunteers (estimate if necessary)		6	66					
ハUN (『大学法女会の例 Activities & Governar	1	tal unrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>	0.					
₹	b Ne	et unrelated business taxable income from Form 990-T, Ine 34		7b	0.					
∌			_	Prior Year	Current Year					
<u>.</u> ≥ e		ontributions and grants (Part VIII, line 1h) RECEIVED	[295,850.	146,461.					
&} C € Bevenue	ll h	Ogram service revenue (rait vin, into 29)	ــالـــ	93,929.	121,780.					
		vestment income (Part VIII, column (A), lines 3, 4, and 7d)		234.	<u> </u>					
~ [11 01	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 95 10c, and 11b 5 2013	So	0.	<u> </u>					
	12 To	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	S	390,013.	268,242.					
	13 G	rants and similar amounts paid (Part IX, column (A), line 12) rents and similar amounts paid (Part IX, column (A), line 13) renefits paid to or for members (Part IX, column (A), line 13)		0.	0.					
	14 Be	enefits paid to or for members (Part IX, column (A), line 4		0.	<u> </u>					
S	15 Sa	alanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)		131,000.	137,174.					
Expenses	16a Pr	ofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.					
ğ	ь То	otal fundraising expenses (Part IX, column (D), line 25)	0.							
Ü	17 0	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		248,176.	183,359.					
	18 To	otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		379,176.	320,533.					
	19 Re	evenue less expenses Subtract line 18 from line 12		10,837.	-52,291.					
5	3		Ве	ginning of Current Year	End of Year					
Assets or	20 To	otal assets (Part X, line 16)		89,297.	37,006.					
SA SA	21 To	otal liabilities (Part X, line 26)		0.	0.					
Net A	22 N	et assets or fund balances. Subtract line 21 from line 20		89,297.	37,006.					
P	art II	Signature Block								
Un	der penalti	es of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of my	y knowledge and belief, it is					
tru	e, correct,	and complete. Declaration of proparer (other than office;) is based on all information of w	hich preparer	has any knowledge.						
	1	The Herry		10/10/1	3					
Sig	_{an} J	Signature of officer		Date						
He		JACK RUSSELL, TREASURER								
	·	Type or print name and title		-						
	F	Print/Type preparer's name Preparer's signature	1	Date Check	PTIN					
Pa	I	AYMOND JENNETT Punt (PA	10/3/13 self-employe	P00147383					
Pre		irm's name MUDGETT, JENNETT & KROGH-WISNER	, PC	Firm's EIN	03-0340114					
		irm's address P.O. BOX 937								
	,	MONTPELIER, VT 05601-0937		Phone no. (802)229-9193					
M	the IRS	discuss this return with the preparer shown above? (see instructions)		_	X Yes No					
	001 12-10-		ons.		Form 990 (2012)					
		E SCHEDULE O FOR ORGANIZATION MISSION S		ENT CONTINUA	TIONGON					
					yo oo					

YOUNG CHILDREN Form 990 (2012) 03-0313379 <u> Page</u> **2** Part III Statement of Program Service Accomplishments * Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission. THE VERMONT ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN (VAEYC) WILL IMPROVE THE EDUCATION AND CARE OF YOUNG CHILDREN IN VERMONT. Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Yes X No 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. 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. 121.781.) 320,533. including grants of \$) (Expenses \$) (Revenue \$ CONFERENCES AND PUBLICATIONS FOR EDUCATORS TO FOSTER NEW IDEAS AND PROVIDE TRAINING IN REGARDS TO THE EDUCATION OF YOUNG CHILDREN (Code) (Expenses \$ _ including grants of \$ including grants of \$ 4d Other program services (Describe in Schedule O) including grants of \$

320,533.

Form 990 (2012)

VT ASSOCIATION FOR THE EDUCATION OF

Total program service expenses ▶

Form 990 (2012) YOUNG CHILDREN
Part IV Checklist of Required Schedules

	•		<u>Yes</u>	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	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			<u> </u>
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
_	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	110	1	х
h	Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total	<u>11a</u>	 	
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	1.0	<u> </u>	
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	ļ	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		1	
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	<u> </u>	<u>X</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	<u> </u>	X
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	ļ	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	 	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		
13	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	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		X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	-	X
2 0a		20a	$\overline{}$	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
		Forn	n 990	(2012)

Form 990 (2012) YOUNG CHILDREN
Part IV Checklist of Required Schedules (continued)

	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization 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		_X_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			İ
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		ĺ	
	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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	ļ	<u>X</u> _
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	ĺ		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
~~	of any of these persons? If "Yes," complete Schedule L, Part III	27	 	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			1
_	Instructions for applicable filing thresholds, conditions, and exceptions).			1,7
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28b	-	X
С	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	00-		v
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29	_	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
0.	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31	<u> </u>	<u> </u>
-	Schedule N. Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		 ^
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			<u> </u>
	Part V, line 1	34	1	x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			<u> </u>
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			T
	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 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2012)

Form 990 (2012)
Part V Sta

9012) YOUNG CHILDREN
Statements Regarding Other IRS Filings and Tax Compliance

03-0313379

Page 5

	- Check it Schedule O Contains a response to any question in this Fait V			للل
			Yes	No_
	Enter the number reported in Box 3 of Form 1096 Enter -0 if not applicable			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return [2a] 12		37	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	_X	
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	_		v
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3a		<u>X</u>
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	3b		
74	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4.		х
h	If "Yes," enter the name of the foreign country.	4a		
-	See instructions for filing requirements for Form TD F 90-22.1, Peport 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?	5a		x
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as chantable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
đ	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		├──
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g		
ь 8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	7h		├
0	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.	. 0		
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
L	Note. See the instructions for additional information the organization must report on Schedule O.	1		
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_				
-	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	140		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		^
	The particular in the particular in the particular in ochieutie O	i TU		ь.

YOUNG CHILDREN

Page 6

Form 990 (2012) YOUNG CHILDREN 03-0313379 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Charle & Cabadada O contesto a response to any question in the Best VII			12
500	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
	Establish a sub- of the control of t		Yes	No
па	Enter the number of voting members of the governing body at the end of the tax year 1a 10		- 1	
	If there are material differences in voting rights among members of the governing body, or if the governing		1	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
_	Enter the number of voting members included in line 1a, above, who are independent 1b 10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	_		
_	officer, director, trustee, or key employee?	_2_		<u> </u>
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		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>X</u>
6	Did the organization have members or stockholders?	6	-	<u>X</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	_		
	more members of the governing body?	7a		<u>X</u>
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	l		
_	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		,,	
a	The governing body?	8a	X	
ь	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			••
<u></u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u>X</u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
40-	Did the exactivation have local chapters, branches, or efficience?		Yes	No
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		<u>X</u>
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	401		l
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a		
12a		40-	x	Í
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
c		12b		
·	in Schedule O how this was done	120	Х	
13	Did the organization have a written whistleblower policy?	12c	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	-	Λ	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	1.50		
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		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation		_	
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			Ì
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılah	le	
	for public inspection. Indicate how you made these available. Check all that apply		-	
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncıal	
-	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion 🕨	•	
	MELISSA RIEGEL-GARRETT - 802-244-6683			
	19 EAST STREET, WATERBURY, VT 05676			

	V =		
Form 990 (2		03-0313379	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest	Compensated	
	Employees, and Independent Contractors		

Section A	Officers Directors	Tructaes Key Employees	and Highest Compensated Emp	lovoos
Section A.	Utilicers, Directors,	Trustees, Nev Employees.	. and mignest Combensated Emb	iovees

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

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

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

Check this box if neither the organization (A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average hours per week	box, offic	not cl	Pos heck ss pe	rtion more	than sbot v/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) LAUREL BONGIORNO	2.00	х		X				0.	0.	•
PAST-PRESIDENT (2) ANDREA RACEK	1.00									0.
DIRECTOR	1 00	X				-		0.	0.	0.
(3) SANDRA GRAVES DIRECTOR	1.00	X						0.	0.	0.
(4) SONJA RAYMOND DIRECTOR	2.00	x						4,985.	0.	0.
(5) SHARON ADAMS DIRECTOR	2.00	Х						0.	0.	0.
(6) ROBIN PLOFF PRESIDENT	4.00	x		х				0.	0.	0.
(7) BRENDA BUZZELL DIRECTOR	1.00	x	:					0.	0.	0
(8) MELISSA RIEGEL-GARRETT EXEC DIRECTOR	2080	x		х				62,204.	0.	0
(9) THERESA ROBINSON SECRETARY	1.00	X		x				0.	0.	0
(10) JACK RUSSELL TREASURER	2.00	X		x				0.	0.	0
(11) BETH PELEOQUIN DIRECTOR	1.00	X						0.	0.	0
(12) LAURA MURPHY DIRECTOR	2.00	X						0.	0.	0
(13) KATIE GONYAW TREASURER	2.00	X		X				0.	0.	0
		_		_						
		_			_	ļ. <u>.</u>				
		1								

Page 8

	(A) Name and title	(B) Average hours per week (list any	box	not c	ss pe	ntion more rson	than is bot or/trus	h an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		an	(F) timate nount other pensa	of
		hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W·2/1099·MIS	9-MISC) from organizand rel		d relat	ion ed
			_				_							
								_						
						:								
														<u> </u>
			_					 						
				_	<u> </u>									
												-		
			_	_										
			-											
1b	Sub-total		<u> </u>	1	1	1		1	67,189.		0.			0.
	Total from continuation sheets to Part V Total (add lines 1b and 1c)	II, Section A							67,189.		0.			0.
2	Total number of individuals (including but	not limited to th	nose	liste	ed a	bove	e) w	ho r),000 of reportable				<u> </u>
	compensation from the organization									· · · · · · · · · · · · · · · · · · ·			Yes	No
3	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for			e, ke	ey er	mplo	yee	, or	highest compensated e	mployee on	!	3		х
4	For any individual listed on line 1a, is the s	um of reportab	le c						•	the organization				
5	and related organizations greater than \$15 Did any person listed on line 1a receive or			-						idual for services		4_		Х
Sec	rendered to the organization? If "Yes," cortion B. Independent Contractors	nplete Schedu	e J	for s	uch	per	son			 		5		Х
1	Complete this table for your five highest or	ompensated in	dep	ende	ent c	cont	racto	ors 1	that received more than	\$100,000 of com	pens	ation 1	rom	
	the organization Report compensation for (A)	the calendar y	/ear	end	ıng v	with	or w	/ithu	n the organization's tax (B)	year.		((
	Name and busines	s address	N	ON	E				Description of s	services		ompe		n
							_							
-														
												 .		
2	Total number of independent contractors		not I	ımıte	ed to		_	stec	d above) who received r	nore than				
	\$100,000 of compensation from the organ	ization 📂					0							(0040)

Form 990 (2012)
Part VIII Statement of Revenue

YOUNG CHILDREN

03-0313379

Page 9

	•	•	Check if Schedule O cont	ains a response	to any question ir				
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1	a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues	1b					
اڠ يُ			Fundraising events	1c					
業別			Related organizations	1d					
ê, E			Government grants (contribut						İ
Sig			All other contributions, gifts, gran						
풀힐		•	similar amounts not included abo	1 1	146,461.				
등하		_			140,401.				
등림		-	Noncash contributions included in lines	1a-1f \$		146 461			
9		<u>n</u>	Total. Add lines 1a-1f		D	146,461.			
	_		COMPEDENCES C F	ann C	Business Code	103 570	102 572		
Ş	2		CONFERENCES & F	LES	611710	103,572.	103,572.		
le e		b	MEMBERSHIPS		900099	18,208.	18,208.		
Program Service Revenue		С			<u> </u>				
E a		d		 					<u> </u>
اتق		е							
۵		f	All other program service reve	enue	L				
		g	Total. Add lines 2a-2f	· · - · · · · · · · · · · · · · · · · ·	▶	121,780.			
	3		Investment income (including	dividends, intere	est, and	_			
			other similar amounts)		▶	1,	1.		
	4		Income from investment of ta	x-exempt bond p	oroceeds 🕨			<u>-</u>	
i	5		Royalties						
				(i) Real	(ii) Personat				
	6	а	Gross rents						
		b	Less rental expenses		ļ i				
		Ç	Rental income or (loss)						
		d	Net rental income or (loss) .		>				
	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory						
		b	Less cost or other basis				1		
			and sales expenses						
1		С	Gain or (loss)						
		d	Net gain or (loss)						
	8	а	Gross income from fundraisin	g events (not					
ğ			including \$	of					
e			contributions reported on line	t 1c) See					
π.			Part IV, line 18	. a					
Other Revenue		b	Less. direct expenses	. b					
0		С	Net income or (loss) from fund	draising events	•				
	9	а	Gross income from gaming a	ctivities. See					
			Part IV, line 19	a	1				
	ļ	b	Less, direct expenses	 b					
	1		Net income or (loss) from gan		•				
	10		Gross sales of inventory, less	_					
		_	and allowances	а					
		h	Less cost of goods sold	. b					
1			Net income or (loss) from sale	•					
	\vdash	<u> </u>	Miscellaneous Revenu		Business Code				
	11				Dusiness Code				
	' '								
		b		<u> </u>	 		_		
		C	All other revenue						
		đ	All other revenue Total, Add lines 11a-11d	•					+
	40		Total revenue. See instructions.			269 242	121,781.	0.	0.
23200 12-10	12		Total revenue. See mstructions.			400,444.	141,/01.		Form 990 (2012)
12~10	r- 12								TURN 220 (2012)

03-0313379 Page 10

Part IX | Statement of Functional Expenses

Secu	Charled Cahadula Constains a response			impiete column (A).	
	Check if Schedule O contains a responsite to tinclude amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	·			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16		-		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	65.400	65 400		
	trustees, and key employees	67,189.	67,189.		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		1		
_	persons described in section 4958(c)(3)(B)	66,594.	66,594.		
7	Other salaries and wages	00,394.	00,594.		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits		-		
10	Payroll taxes	3,391.	3,391.		
11	Fees for services (non-employees):	3/3/11	3,351.		
	Management				
ь	Legal				
c	Accounting	935.	935.		
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	568.	568.		·· · · · · · · · · · · · · · · · · · ·
13	Office expenses .	336.	336.		
14	Information technology				-
15	Royalties .				
16	Occupancy	6 100	C 100		
17	Travel	6,102.	6,102.		
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials Conferences, conventions, and meetings	8,993.	8,993.		
19	Interest	0,333.	0,993.		
20 21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	647.	647.		
24	Other expenses, Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.)				
а	CONTINUES DEPOSITORS	88,833.	88,833.		
b	QUALITY PROJECT COSTS	47,193.	47,193.		
C	SPEAKER FEES	20,169.	20,169.		
d	VECEL PROJECT	3,700.	3,700.	-	
е	All other expenses	5,883.	5,883.		
<u>25</u>	Total functional expenses. Add lines 1 through 24e	320,533.	320,533.	0.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation. Check here fig. (ASC 958-720)				
				ı	

Part X Balance Sheet Check if Schedule O contains a response to any question in this Part X (B) Beginning of year End of year 11,103. 63,699 Cash · non-interest-bearing 1 25,<u>903.</u> 25,598 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 3 Accounts receivable, net 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Notes and loans receivable, net 7 7 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 9 10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D 10a b Less accumulated depreciation 10b 10c Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 89,297. 37,006 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 Accounts payable and accrued expenses 17 17 18 Grants payable 18 Deferred revenue 19 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 21 iabilities-Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 0 0. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 0. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 0. 31 31 32 Retained earnings, endowment, accumulated income, or other funds 89,297. 32 37,006. 89,297. 37,006. 33 Total net assets or fund balances 33 37,006. 89,297 Total liabilities and net assets/fund balances

orm	990 (2012) YOUNG CHILDREN 03-03	13379	Pac	_{re} 12
Pai	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			
			_	
1	Total revenue (must equal Part VIII, column (A), line 12)	268		
2	Total expenses (must equal Part IX, column (A), line 25)			<u>33.</u>
3	Revenue less expenses. Subtract line 2 from line 1	52	2,2	91.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	89	, 2	<u>97.</u>
5	Net unrealized gains (losses) on investments 5			
6	Donated services and use of facilities 6			
7	Investment expenses			
8	Prior period adjustments 8			
9	Other changes in net assets or fund balances (explain in Schedule O) . 9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B)) 10	37	7,0	06.
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			<u> </u>
			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other	.		i
	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		<u>X</u> _
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a	1 1		
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,			
	consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		<u> </u>

Form **990** (2012)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

VT ASSOCIATION FOR THE EDUCATION OF

Open to Public Inspection

		YOUNG C							0	<u>3-03133</u>	379
Part I	Reason	or Public Chari	ity Status (All organiz	ations mu	st complet	e this part) See inst	ructions			
he organi	zation is not a	private foundation l	because it is: (For lines 1	through 1	11, check o	only one b	ox.)				
1 🖳	A church, cor	ention of churches	s, or association of churc	ches desci	nbed in se	ction 170	(b)(1)(A)(i)				
2 🖳	A school desc	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E)							
з 🖳	A hospital or	a cooperative hospit	tal service organization o	described	n section	170(b)(1)(A)(iii).				
4	A medical res	earch organization of	operated in conjunction	with a hos	pıtal descr	ibed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hospital's	s name,
	city, and state										
5 📖	An organizati	on operated for the	benefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental und	t describ	ed in	
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)								
6 🖳	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7 🗀	An organizati	on that normally rec	eives a substantial part (of its supp	ort from a	governme	ntal unit o	r from the	general	public descri	ibed in
	section 170(b)(1)(A)(vi). (Comple	te Part II)								
8 🖳	•		ection 170(b)(1)(A)(vi). (
9 X	=	-	eives: (1) more than 33 1					-		-	=
			nctions - subject to certa							_	
			axable income (less sect	ion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nızatıon	after June 30), 1975.
—		509(a)(2). (Complete									
10	•	•	perated exclusively to te	•	-			•		_	_
11 📖	•	•	perated exclusively for the		•				•	• •	
			itions described in section				:). See sec	tion 509(a)(3). On	eck the box t	ınat
	a Type I		organization and comple		nctionally i		d	Tvo	o III - No	n-functionally	untogrator
e 🗀	• •	=	it the organization is not		•	-				•	
e ()	-		han one or more publicly			_	-				
f		-	ten determination from t		_				λ(α)(1) Ο.	0000	, - / (- / ·
•	•	rganization, check th					, ,				
g		•		ny gift or co	ontribution	from any	of the folk	owing pers	sons?		
Ū	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) a				n (ii) and (·					
	the governing body of the supported organization?										
•		member of a person described in (i) above?								11g(ii)	
	(iii) A 35% (controlled entity of a	person described in (i) o	or (ii) above	e?					11g(iii)	
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s).						
		· · · · · · · · · · · · · · · · · · ·						,			
(i) Name	of supported	oported (ii) EIN (iii) Type of organization		(iv) is the organization (v) Did you notify the		(vi) Is	(vi) Is the ganization in col. (vii) Amount of n		of monetary		
orga	anization		(described on lines 1-9 above or IRC section	in col. (i) listed in your governing document?		organization in col. (i) of your support?		(i) organized in the U.S.?		support	
		(see instruction								4	
	 	<u> </u>		Yes	No	Yes	No	Yes	No		
									}	 	
								1			
				 		-			 		
			<u> </u>		<u> </u>					 	
	<u> </u>										
	_										
Total		1		1		1		1	1		

				_
Schedule	A (Form	990 01	990.F7	12012
ochequie.	~ u viiii	220 01	3311-67	1/012

Page 2

Pa	. (Complete only if you checke fails to qualify under the tests	d the box on line !	5, 7, or 8 of Part I o	or if the organizatio			
Sec	ction A. Public Support		<u>:</u>		·		
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and	(4)	1,07=000	(0) = 0.0	(0) = 0	(0)20.2	(i) iotai
	membership fees received (Do not		1	}			
	include any "unusual grants ")						
2	Tax revenues levied for the organ-	***					
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
_	column (f)					<u> </u>	
	Public support. Subtract line 5 from line 4 ction B. Total Support		<u> </u>	<u> </u>	l		
		4 > 0000	# 1 0000	1 (10010	1,0044	1	
	ndar year (or fiscal year beginning in) > Amounts from line 4	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources			1			
9	Net income from unrelated business						
9	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain					·	
	or loss from the sale of capital			İ			
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10					-	
	Gross receipts from related activities	, etc. (see instruct	ions)	'		12	
13	First five years. If the Form 990 is fo	r the organization	's first, second, thi	rd, fourth, or fifth ta	ax year as a sect		
	organization, check this box and sto	p here				.,,,	▶□
Se	ction C. Computation of Pub	ic Support Pe	ercentage				
14	Public support percentage for 2012	line 6, column (f) d	divided by line 11,	column (f))		14	
15	Public support percentage from 201	1 Schedule A, Par	t II, line 14	••		15	
16	a 33 1/3% support test - 2012. If the	organization did n	ot check the box o	on line 13, and line	14 is 33 1/3% or	more, check this be	ox and
	stop here. The organization qualifies						▶ L
t	33 1/3% support test - 2011. If the	organization did n	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/3	3% or more, check to	his box
	and stop here. The organization qua	•	• • •				▶□
17	a 10% -facts-and-circumstances tes	``	•		, ,	•	·
	and if the organization meets the "far			· · · · · · · · · · · · · · · · · · ·	·	Part IV how the organ	nization
	meets the "facts-and-circumstances"				_		. ▶∟
ŀ	10% -facts-and-circumstances tes						
	more, and if the organization meets t	he "facts-and-circ	umstances" test, c	heck this box and	stop here. Expla	ain in Part IV how th	e

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012 YOUNG CHILDREN Part III | Support Schedule for Organizations Described in Section 509(a)(2)

03-0313379 Page 3

· (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 194,509. include any "unusual grants") 62,227. 65,256. 295,850. 146,461. 764,303. 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 72,948. 46,998. 89,108. 80,259. 103,572. 392,885. organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 135,175. 112,254. 283,617. 376,109. 250,033 1157188. 6 Total, Add lines 1 through 5 7a Amounts included on lines 1, 2, and 0. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the 0. amount on line 13 for the year c Add lines 7a and 7b 0. 1157188. 8 Public support (Subtract line 7c from line 6) Section B. Total Support (a) 2008 **(b)** 2009 Calendar year (or fiscal year beginning in) (c) 2010 (d) 2011 (e) 2012 (f) Total 135,175 112,254 283,617. 376,109. 250,033. 1157188. 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 487. 484 290 234 1 1,496. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 487. 484. 290. 234 1. 1,496. c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital 15,001. 15,010. 13,670. 12,437. 18,208. assets (Explain in Part IV.) 148,099. 127,739 | 298,917 | 390,013 | 268,242. 1233010. 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 93.85 15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) % 15 93.26 16 Public support percentage from 2011 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f) 17 .12 % 18 Investment income percentage from 2011 Schedule A, Part III, line 17 .27 18 % 19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not **▶**X more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

VT ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN

Employer identification number 03 - 0313379

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EDUCATION OF YOUNG CHILDREN
FORM 990, PART VI, SECTION B, LINE 11: THE CPA PREPARES THE TAX RETURN
WITH INFORMATION PROVIDED BY US. WHEN COMPLETED IT IS REVIEWED BY THE
EXECUTIVE DIRECTOR AND OTHER BOARD MEMBERS AS DEEMED REASONABLE AND
NECESSARY.
FORM 990, PART VI, SECTION B, LINE 12C: BOARD AND ECECUTIVE DIRECTOR
MONITOR COMPLIANCE WITH THE POLICY
FORM 990, PART VI, SECTION B, LINE 15: SALARYS ARE DETERMINED IN
ACCORDANCE WITH THE SCOPE OF WORK RESPONSIBILITIES OUTLINED ON JOB
DISCRIPTIONS BY THE BOARD AFTER MARKET ANALYSIS AND BASED ON BUDGET
GUIDELINES. SALARIES ARE SET AT DATE OF HIRE AND RAISES ARE REVIEWED
ANNUALLY
FORM 990, PART VI, SECTION C, LINE 19: INFORMATION IS PROVIDED UPON
REQUEST