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Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at www.lrs.gov/form990. Open to Public Inspection

<u>A F</u>	or the	2014 calendar year, or tax year beginning JUN 1, 2014 and	l ending]	<u>MAY 31, 2015</u>	
В	Check if	C Name of organization		D Employer identific	ation number
a	pplicable	VT ASSOCIATION FOR THE EDUCATION OF			
	_Address _change	YOUNG CHILDREN			
	Name change	Doing business as		03-0	313379
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		
F	Final	963 PAINE TURNPIKE NORTH	#3A		244-6282
_	Jreturn/ term:n- ated	City or town, state or province, country, and ZIP or foreign postal code	<u> </u>	G Gross receipts \$	311,110.
	Amende			H(a) Is this a group re	
H	⊥return ∏Applica-	F Name and address of principal officer SONJA RAYMOND		for subordinates	
_	l tiòn pending	1056 MOUNTAIN RD SUITE 16, STOWE, VT	05672		
	.			H(b) Are all subordinates in	
		npt status. X 501(c)(3)	or 52	-	list (see instructions)
<u>J</u>	Website	:► HTTP://VAEYC.ORG/	T. V	H(c) Group exemption	
		rganization: X Corporation Trust Association Other	L Yea	r of formation: 19/2 N	State of legal domicile: VT
P		Summary			
ဗ္ပ	1	riefly describe the organization's mission or most significant activities: IMPF			
Governance	_	RACTICE OF EARLY CHILDHOOD PROFESSIONAL			
er.	1	theck this box if the organization discontinued its operations or disp	osed of mo	re than 25% of its net as	
્ર્	l l	lumber of voting members of the governing body (Part VI, line 1a)		3	10
	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)		4	
es	5 T	otal number of individuals employed in calendar year 2014 (Part V, line 2a)		5	<u> 16</u>
Activities &	6 T	otal number of volunteers (estimate if necessary)		6	7.3
Ę	7a T	otal unrelated business revenue from Part VIII, column (C), line 12		7 a	0.
	bN	let unrelated business taxable income from Form 990-T, line 34		7b	0.
	1			Prior Year	Current Year
Ð	8 (Contributions and grants (Part VIII, line 1h)		158,338.	237,207.
Revenue	9 F	Program service revenue (Part VIII, line 2g)		46,181.	73,857.
e ve	10 1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		186.	46.
œ	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
		otal revenue add lines 8 through 11 (must equal Part VIII, column (A), line 12)		204,705.	311,110.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
co.	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10	, -	105,652.	132,432.
Expenses	162	Professional fundraising fees (Part <u>IX,</u> column (A), line 11e)	' -	0.	0.
Jec L	lVa i	Total fundraising expenses (Part IX, column (V), line 25)	0.		0.
X	17 /	Other expenses (Part IX, column (A), lines the UC, 11/20)	- • ⊦	99,074.	182,238.
			<u> </u>	204,726.	314,670.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less exponses Subtractline 18, fAnline 19, 2010	⊢	-21·	-3,560.
- 5	19 F	toronto oco or portion and an analysis of the state of th			1
sets or		Fold and Chart V Inc 16)		Beginning of Current Year	End of Year
SSE	B 20	Fotal assets (Part X, line 16) Fotal liabilities (Part X, line 26)	<u> </u>	<u>36,985.</u>	33,425.
] Net As	21		-	0.	0.
	22	Net assets or fund balances Subtract line 21 from line 20 Signature Block		36,985.	33,425.
	art II	I.,		- 	
		Ities of perjury, I declare that I have examined this return, including accompanying schedu			ly knowledge and belief, it is
tru	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of	which prepa	rer has any knowledge.	,
		108/ William	 	12/23/	<u> </u>
Si	gn	Signature of officer		Dale	
He	ere	JACK RUSSELL, TREASURER			
_		Type or print name and title		T	
		Print/Type preparer's name Preparer's signa(u)re		Date Check [PTIN
Pa	id	JOHN MUDGETT, CPA	·	self-emplo	
Pr	eparer	Firm's name MUDGETT, JENNETT & KROGH-WISNE	R, PC	Firm's EIN	03-0340114
Us	e Only	Firm's address P.O. BOX 937			
_		MONTPELIER, VT 05601-0937		Phone no. (8	02)229-9193
M	ay the if	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
43	2001 11-0	7-14 LHA For Paperwork Reduction Act Notice, see the separate instruc	tions.		Form 990 (2014)

YOUNG CHILDREN 03-0313379 Page 2 Part III Statement of Program Service Accomplishments \mathbf{X} Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission THE VERMONT ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN (VAEYC) A NON-PROFIT ORGANIZATION DEDICATED TO IMPROVING THE QUALITY OF CARE AND EDUCATION, IMPROVING THE PROFESSIONAL PRACTICE OF EARLY CHILDHOOD PROFESSIONALS, AND BUILDING PUBLIC UNDERSTANDING AND SUPPORT FOR HIGH 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. 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. 123,271. including grants of \$ 3,666.)) (Revenue \$ KNOWN AS TEACHER EDUCATION AND COMPENSATION HELPS AND IS T.E.A.C.H AN EARLY CHILDHOOD PROJECT THAT IS AN EVIDENCE-BASED, OUTCOMES-DRIVEN AND NATIONAL STRATEGY. THIS COST-SHARING SCHOLARSHIP MODEL PROVIDES A COMPREHENSIVE EDUCATION AND SUPPORT NETWORK TO STATES THAT ARE COMMITTED TO INCREASING THE AVAILABILITY OF ACCESSIBLE, AFFORDABLE COLLEGE EDUCATION AND WORKFORCE SUPPORTS FOR PROFESSIONALS WORKING IN A VARIETY OF EARLY EDUCATION SETTINGS. $89,7\underline{12.}$ including grants of \$ 69,252.) 4b) (Expenses \$) (Revenue \$ VERMONT'S LARGEST EARLY CHILDHOOD PROFESSIONAL CONFERENCE DEVELOPMENT EVENT, OUR ANNUAL 3-DAY FALL CONFERENCE SERVES OVER 500 EARLY CHILDHOOD PROFESSIONALS. WE ALTERNATE LOCATIONS BETWEEN UNIVERSITY OF VERMONT'S DAVIS CENTER AND THE KILLINGTON GRAND HOTEL. WE STRIVE TO BRING NATIONALLY RECOGNIZED KEYNOTE SPEAKERS, REGIONAL FEATURED SPEAKERS AND STATE-LEVEL PRESENTERS OF THE HIGHEST OUALITY. 11,637 including grants of \$) (Revenue \$) (Expenses \$ VAEYC IS THE STATE AFFILIATE OF THE NATIONAL ASSOCIATION MEMBERSHIP FOR THE EDUCATION OF YOUNG CHILDREN (NAEYC), THE NATION'S LARGEST MEMBERSHIP ORGANIZATION OF EARLY CHILDHOOD PROFESSIONALS. VAEYC'S MEMBERSHIP IS OVER 520, WHO ARE ENROLLED THROUGH THE NAEYC, AND INCLUDES ANYONE WHO CARES ABOUT THE EDUCATION AND WELL-BEING OF YOUNG CHILDREN. VAEYC OFFERS A VARIETY OF PROGRAMS AND SERVICES TO ITS MEMBERS INCLUDING, BUT NOT LIMITED TO, DISCOUNTS TO THE FALL CONFERENCE, REGIONAL MIX AND MINGLE EVENTS, ONLINE NEWSLETTER SUBSCRIPTIONS AND ADVOCACY EFFORTS. VAEYC RECEIVED MEMBERSHIP DUES OF \$14,530 FROM THE NAEYC FOR THE YEAR ENDED MAY 31, 2015. Other program services (Describe in Schedule O.) 61,854. including grants of \$

286.474.

Total program service expenses

	990 (2014) YOUNG CHILDREN 03-0313 t IV Checklist of Required Schedules	3/9	Pi	age 3
<u> ai</u>	tre Oneconst of Nequilleu Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		162	140
	If "Yes," complete Schedule A	1 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		X
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			
	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	$ \hbox{ 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	ļ	<u>X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	ļ	X
С	Did the organization report an amount for investments program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	ļ	X
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
e	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	X	+
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	1,_		
	Schedule D, Parts XI and XII	12a	X	1
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.	1	·
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	 	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13	+	X
14a		14a	 	1
b	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		├ ^
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13	1	†**
.0	or for foreign individuals? 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,	"		1
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	1	х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>	1	T
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		1	1
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form 990 (2014) YOUNG CHILDREN
Part IV Checklist of Required Schedules (continued)

•			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			<u> </u>
	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			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a	<u> </u>	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		ļ	
	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ļ	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			1
	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or		1	
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26	 	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27	<u> </u>	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			٠,
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	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			77
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	+	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	 	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			.
	contributions? If "Yes," complete Schedule M	30	+	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
32	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31	+	 ^ -
32	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32	+	1
33	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	30		1
0 4	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	-	1	1
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	,	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1000		1
	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		1	† <u></u>
	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?	<u> </u>	1	
	Note. All Form 990 filers are required to complete Schedule O	38	X	
_				2014

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	<u>o</u>		
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 2a 1	6		
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	L
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country. ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	X
b	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		
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 as charitable contributions?	6a	 	X
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	1		
-	were not tax deductible?	6b	-	
7 a	Organizations that may receive deductible contributions under section 170(c). 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	r? 7a		х
a 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	75	 	
·	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	1.0	1	 -
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		T	
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	_	
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	• • • • • • • • • • • • • • • • • • • •	_		1
11	Section 501(c)(12) organizations. Enter			
а		_		
b				
_	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	<u> </u>	-
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	\dashv		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1.5	+	
а		13a	-	+
1-	Note. See the instructions for additional information the organization must report on Schedule O			
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			1
_	organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13c	\dashv		
14a		148		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	148		+**

Form 990 (2014)

YOUNG CHILDREN

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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.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 10			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		l	
b	Enter the number of voting members included in line 1a, above, who are independent 1b	<u>'</u>		
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		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	<u> </u>
b	Other officers or key employees of the organization	15b	X	<u> </u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		1	
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	<u> </u>	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	ŀ		
	ın joınt venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	Ì		
	exempt status with respect to such arrangements?	16b	<u> </u>	
Sec	etion 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)	avaılal	ole	
	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, are	nd finar	ncial	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	SONJA RAYMOND - 802-244-6282			
	33 STEWART ROAD, UNIT 3 SUITE A, BERLIN, VT 05602			

YOUNG CHILDREN
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Employees, and Independent Contractors

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

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

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

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

(A) Name and Title	(B) Average hours per week	box,	not c unle	(C) POSITION t check more than one nless person is both an and a director/trustee)				(D) Reportable compensation from	(E) Reportable compensation from related	(F) 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) ANDREA RACEK	3.00									
PAST-PRESIDENT		X	ļ					0.	0.	0.
(2) ROBIN PLOOF	3.00	-	ŀ							
PAST-PRESIDENT		X						0.	0.	0 .
(3) SHARON ADAMS	2.00	1							_	
PRESIDENT		Х		X				0.	0.	0
(4) JACK RUSSELL	2.00	┨					ļ			
TREASURER	1 50	X	_	X	ļ	<u> </u>	_	0.	0.	0
(5) THERESA ROBINSON	1.50	∤								
SECRETARY	2 22	X	<u> </u>	X		┝		0.	0.	0
(6) SANDRA GRAVES	3.30	١		ŀ		1				
DIRECTOR	1 00	X	\vdash	⊢				0.	0.	0
(7) BETH PELOQUIN	1.00	-	İ							
DIRECTOR	1.00	X	\vdash	\vdash		 		0.	0.	0
(8) ANDREA SAMBROOK	1.00	x						0.	0.	0
DIRECTOR	2.00	<u> </u>	╁			-		<u> </u>	<u> </u>	<u> </u>
(9) KIMBERLIE BUXTON	2.00	x	l					0.	0.	0
DIRECTOR (10) MELISSA RIEGEL-GARRETT	40.00	1	1	f	\vdash	+-	 	•		0
EXECUTIVE DIRECTOR	10.00	\mathbf{x}		x		-		51,950.	0.	0
					-					
		-					_			
		_			-	-	_			
		1			_		_			
	i				1			1		

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•	(A) Name and title	(B) Average hours per week	ge Position (do not check more than one box, unless person is both an			n an	(D) (E) Reportable Reportable compensation compensation from related		(F) Estimated amount of other					
		(list any hours for related organizations below line)	tee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC	nizations compen			on d
							\vdash	 			1			
			_				-	_						
			-	<u> </u>			-	_						
			_	_		<u> </u>	ļ				4			
			-								1		-	
1b	Sub-total	L	l	1	1	Ц.		<u> </u>	51,950.		0.			0.
	Total from continuation sheets to Part V Total (add lines 1b and 1c)	II, Section A						>	51,950		0.			0.
2	Total number of individuals (including but	not limited to t	hose	list	ed a	bov	e) w	ho r						
	compensation from the organization					_							Yes	0 No
3	Did the organization list any former office line 1a? If "Yes," complete Schedule J for			e, k	ey e	mpl	oyee	, or	highest compensated e	employee on		3		х
4	For any individual listed on line 1a, is the sand related organizations greater than \$15									the organization		4		х
5	Did any person listed on line 1a receive or	accrue compe	ensa	tion	fron	n an	y un			vidual for services	Ì			
Sec	rendered to the organization? If "Yes," control of the Independent Control	nplete Schedu	<u>le J</u>	for s	<u>uch</u>	per	son					5_		X
1	Complete this table for your five highest c									•	ensa	ation fi	om	
	the organization. Report compensation fo					VVILI	I OI V	AILIII	(B)			(C		
	Name and busines	s address	N	ON	E				Description of	services		omper	satio	<u> </u>
		·- 												
														-
		·· -										<u> </u>	-	
2	Total number of independent contractors	(including but	not	lımıt	ed to	o th	ose	ıste	d above) who received	more than				
	\$100,000 of compensation from the orga						0							

YOUNG CHILDREN Form 990 (2014) YOUNG C

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•			Check if Schedule O conta	ains a response	or note to any line	in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b) :	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribute All other contributions, gifts, grant		14,530.				
Oth	c		similar amounts not included about Noncash contributions included in lines		24,177.				
<u>8</u> 8		-	Total. Add lines 1a-1f		—	237,207.			
- 1					Business Code				
<u>8</u>	2 a	3	CONFERENCE & FE	ES	611710	73,857.	73,857.		ļ
E e	t)							
m S	(_			-	- 			
gra Re	(d -							
Program Service Revenue	•	e •	All other program service reve			== · · · · · · · · · · · · · · · · · ·			
			Total. Add lines 2a:2f	. rue		73,857.			
	3		Investment income (including	dividends, inter	est, and				
			other similar amounts)		▶]	46.	46.		
	4		Income from investment of ta	x-exempt bond	proceeds 🕨				
	5		Royalties		>				
1				(i) Real	(ii) Personal		•		
	6		Gross rents						
			Less. rental expenses Rental income or (loss)						
			Net rental income or (loss)						
			Gross amount from sales of	(i) Securities	(ii) Other				-
		_	assets other than inventory	<u> </u>					•
		b	Less cost or other basis						
			and sales expenses						
		С	Gain or (loss)	L	1				
	I		Net gain or (loss)		>				
ne	8	а	Gross income from fundraising	- '					
Other Reven			including \$						
æ			contributions reported on line Part IV, line 18	•					
the		b	Less direct expenses						
Ò	1		Net income or (loss) from fun	_	>				
	9	а	Gross income from gaming a	ctivities See					
			Part IV, line 19	į.	a				
			Less direct expenses	-	b				
			Net income or (loss) from gar		>				<u> </u>
	10	а	Gross sales of inventory, less						
			and allowances		a				
	1		Less. cost of goods sold Net income or (loss) from sal		b [
		<u>U</u>	Miscellaneous Reven		Business Code				
	11	a	TVIISCOIIAT COUST TO VOT					1	
		b							
		С			+				
		đ					 		
			Total. Add lines 11a 11d			211 445	F2 225	 _	
	12		Total revenue. See instructions.		. •	311,110.	. 73,903.	0	. 0

Form 990 (2014) YOUNG CHILDREN
Part IX Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons			, , y	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				- .
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	54 050	54 050		
	trustees, and key employees	51,950.	51,950.		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	60 757	40 700	10 027	
7	Other salaries and wages	60,757.	42,720.	18,037.	.
8	Pension plan accruals and contributions (include				
^	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	19,725.	16,568.	3,157.	
10	Payroll taxes	19,123.	10,300.	3,137.	
11	Fees for services (non-employees)				
a	· · · · · · · · · · · · · · · · ·				
b	Legal Legal Accounting	· · · · · · · · · · · · · · · · · · ·			
c d					
e	D . (
f	Investment management fees				
g					
9	column (A) amount, list line 11g expenses on Sch O.)	26,944.	26,944.		
12	Advertising and promotion	951.	951.		
13	Office expenses	88.	28.	60.	
14	Information technology	2,458.	2,458.		
15	Royalties				
16	Occupancy	5,040.		5,040.	
17	Travel	18,510.	18,510.		
18	Payments of travel or entertainment expenses				
_	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	63,571.	63,571.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	3,742.	2,899.	843.	
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.)				
	MEMBERSHIPS	51,533.	51,533.		
	BOOKS & SUBSCRIPTIONS	3,482.	3,482.		
	SUPPLIES	1,083.	1,047.		
	PAYROLL SERVICE	1,036.	979.		
	All other expenses	3,800.	2,834.	 	10.34.
25	Total functional expenses Add lines 1 through 24e	314,670.	286,474.		0
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Form 990 (2014)
Part X Balance Sheet

Par	tΧ	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing .	10,896.	1	33,425.
ĺ	2	Savings and temporary cash investments	26,089.	2	
:	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete		1	
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary		.	
S	i	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	• •	9	
	10a	Land, buildings, and equipment: cost or other			
		basis Complete Part VI of Schedule D 10a			
	ь	Less accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	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)	36,985.	16	33,425.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors, trustees,			
₫		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D .		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117 (ASC 958), check here ▶		1	
Ses		complete lines 27 through 29, and lines 33 and 34.		1	
ă	27	Unrestricted net assets		27	
Ba	28	Temporarily restricted net assets		28	
힡	29	Permanently restricted net assets		_29	
Ī		Organizations that do not follow SFAS 117 (ASC 958), check here			
S O		and complete lines 30 through 34.	_		-
set	30	Capital stock or trust principal, or current funds	0.		0.
As	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	36,985.		33,425.
_	33	Total net assets or fund balances	36,985.	1 1	33,425.
	34	Total liabilities and net assets/fund balances	36,985.	34	33,425.

Form	990 (2014)YOUNG_CHILDREN	03-031	3379	Pac	ie 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	31:	L,1	<u>10.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	314	1,6	<u>70.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	<u> </u>	3,5	<u>60.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3 (5,9	<u>85.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			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	3	3,4	<u> 25.</u>
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				لل
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	1 1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	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	<u>X</u>	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	e basis,			
	consolidated basis, or both			,	
	X 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	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		1		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Audıt			
	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 requ	ıred audıt			

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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.

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

OMB No 1545-0047

2014Open to Public Inspection

Name of the organization

VT ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN

Employer identification number

		YOUNG	CHILDREN					03	-0313379
Pai	rt I	Reason for Public C		ll organizations must cor	nplete this	part) See	instructions		
he o	organi	zation is not a private founda	ition because it is (F	or lines 1 through 11, ch	neck only o	one box)			
1		A church, convention of chu	rches, or association	of churches described	in section	170(b)(1)	(A)(i).		
2		A school described in section	on 170(b)(1)(A)(ii). (A	ttach Schedule E)					
3		A hospital or a cooperative h	nospital service orgai	nization described in sec	ction 170(b)(1)(A)(iii)).		
4		A medical research organiza)(iii). Enter ti	ne hospital's name,
		city, and state.							
5		An organization operated for	r the benefit of a coll	ege or university owned	or operate	ed by a go	vernmental u	ınıt describe	ed in
_		section 170(b)(1)(A)(iv). (Complete Part II)							
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).							
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in							
		section 170(b)(1)(A)(vi). (Co	mplete Part II)		•			_	
8		A community trust described	•	1)(A)(vi). (Complete Part	II)				
9	X	An organization that normall				contributio	ns, members	ship fees, ar	d gross receipts from
		activities related to its exem	-						
		income and unrelated busin							
		See section 509(a)(2). (Con	nplete Part III)						
10		An organization organized a	nd operated exclusiv	vely to test for public saf	fety See s	ection 50	9(a)(4).		
11		An organization organized a	nd operated exclusiv	vely for the benefit of, to	perform tl	he function	ns of, or to c	arry out the	purposes of one or
		more publicly supported org	ganizations described	d in section 509(a)(1) or	section 5	609(a)(2) S	See section	509(a)(3). C	neck the box in
		lines 11a through 11d that of	describes the type of	supporting organization	n and com	plete lines	11e, 11f, an	d 11g	
а		Type I. A supporting orga	nızatıon operated, sı	upervised, or controlled	by its supp	oorted orga	anızatıon(s),	typically by	giving
		the supported organizatio	n(s) the power to req	gularly appoint or elect a	majority c	of the direc	tors or trust	ees of the su	upporting
		organization. You must c	omplete Part IV, Se	ctions A and B.					
b	L								
		control or management of	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or man	age the sup	ported
	_	organization(s) You must	•						
С								ally integrate	d with,
	_	ıts supported organization		•	-				
d	ــــا	☐ Type III non-functionally							
		that is not functionally into						id an attenti	veness
	_	requirement (see instructing Check this box if the organization).	•	•				a II. Two a III.	
е		·					Type I, Type	з п, туре п	
	Ent	functionally integrated, or er the number of supported or		rially integrated support	ing Organiz	ation			
		vide the following information	J	ed organization(s)					L
		(i) Name of supported	(ii) EIN	(III) Type of organization	(ıv) Is the o	rganızatıon	(v) Amount o	of monetary	(vi) Amount of
		organization		(described on lines 1.9 above or IRC section	listed i governing d	n your document?	suppor		other support (see
				(see instructions))	Yes	No	Instruc	tions)	instructions)
								_	
									, -
		- <u></u>			ļ				
						[
						 			
			ļ		-	-		•	

	dule A (Form 990 or 990-EZ) 2014			0 11 170		1.470(1.1/4)/4)/	Page 2
Pa		-					-
	(Complete only if you checked			•	on failed to qualify t	under Part III If the	organization
	fails to qualify under the tests	ilsted below, pleas	se complete Part	··· <i>;</i>			
	tion A. Public Support	··· ·					
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")				ļ		
	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
_	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3				ļ		
5	The portion of total contributions		ı				
	by each person (other than a						
	governmental unit or publicly	1					
	supported organization) included				İ		
	on line 1 that exceeds 2% of the amount shown on line 11,						
	column (f)						
6	•			 	-		
	Public support. Subtract line 5 from line 4 tion B. Total Support	<u> </u>	<u></u> .	<u>L</u>	1		
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	(a) 2010	(b) 2011	(6) 2012	(0) 2013	(6) 2014	(i) rotai
8	Gross income from interest,				+		
O	dividends, payments received on	'			Ì		
	securities loans, rents, royalties		•				
	and income from similar sources						
9	Net income from unrelated business						
3	activities, whether or not the			è			
	business is regularly carried on	,					
10	Other income Do not include gain						
	or loss from the sale of capital	<u> </u>				İ	
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities	, etc (see instructi	ons)		<u> </u>	12	
13	First five years. If the Form 990 is fo	r the organization'	s first, second, th	ird, fourth, or fifth	tax year as a section		
	organization, check this box and sto	p here			•		▶□
Se	ction C. Computation of Pub	lic Support Pe	rcentage				
14	Public support percentage for 2014	(line 6, column (f) d	livided by line 11,	column (f))		14	%
15	Public support percentage from 2013	3 Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2014. If the	organization did ne	ot check the box	on line 13, and line	e 14 is 33 1/3% or	more, check this b	ox and
	stop here. The organization qualifies	as a publicly supp	oorted organizatio	n			
ŀ	33 1/3% support test - 2013. If the	organization did ni	ot check a box or	line 13 or 16a, an	id line 15 is 33 1/39	% or more, check t	his box
	and stop here. The organization qua	lifies as a publicly	supported organi	zation		•	▶□
178	a 10% -facts-and-circumstances tes	st - 2014. If the org	ganization did not	check a box on lii	ne 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fa			· · · · · · · · · · · · · · · · · · ·		art VI how the orga	nızatıon
	meets the "facts-and-circumstances				=		▶□
ı	10% -facts-and-circumstances te						
	more, and if the organization meets				•		e
	organization meets the "facts-and-cir					-	> -
<u>18</u>	Private foundation. If the organization	on did not check a	box on line 13, 1	6a, 16b, 17a, or 1			ns

Schedule A (Form 990 or 990 EZ) 2014 YOUNG CHILDREN Part III Support Schedule for Organizations Described in Section 509(a)(2)

(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

Sect	tion A. Public Support	elow, please comp	lete Part II)					
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
	Gifts, grants, contributions, and	(a) 2010	(0) 2011	(0) 2012	(a) 2013	(e) 2014	(I) TOTAL	
	nembership fees received (Do not	,		:				
	nclude any "unusual grants ")	194,509.	295 850	146 461	146,857.	222,677.	1006354.	
	Gross receipts from admissions,		_2,5,050.	140,401.	140,057.	222,011.	1000224.	
1	merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	89,108.	80,259.	103,572.	46,181.	73,858.	392,978.	
3	Gross receipts from activities that							
	are not an unrelated trade or bus- ness under section 513							
	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf							
	The value of services or facilities				·			
_	furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5	283,617.	376,109.	250,033.	193,038.	296,535.	1399332.	
	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.	
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.	
	Add lines 7a and 7b						0.	
	Public support (Subtract line 7c from line 6)					-	1399332.	
	tion B. Total Support		-		·			
Caler	idar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
9	Amounts from line 6	283,617.	376,109.	250,033.	193,038.	296,535.	1399332.	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	290.	234.	1.	186.	46.	757.	
	Unrelated business taxable income				200		737.	
	(less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b	290.	234.	1.	186.	46.	757.	
	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 assets (Explain in Part VI)	15,010.	13,670.	18,208.	11,481.	14,530.	72,899.	
13	Total support. (Add lines 9, 10c, 11, and 12)	000 015				311,111.	1472988.	
14	First five years. If the Form 990 is for	or the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a section	n 501(c)(3) organiz		
	check this box and stop here							
Sec	tion C. Computation of Pub	lic Support Pe	rcentage					
15	Public support percentage for 2014	• • • • • • • • • • • • • • • • • • • •	•	column (f))		15	<u>95.00 %</u>	
<u>16</u>	Public support percentage from 201					16	94.22 %	
Sec	ction D. Computation of Inve							
17	Investment income percentage for 2		•	ne 13, column (f))		17	.05 %	
18	Investment income percentage from	•	•		•	18	.09 %	
19a	33 1/3% support tests - 2014. If the							
b	more than 33 1/3%, check this box a 33 1/3% support tests - 2013. If the	e organization did i	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,		
	line 18 is not more than 33 1/3%, ch					_		
<u>20</u>	20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions							

Part IV **Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	_1		
	2		
	3a		<u> </u>
	3b_		
	2-		
	3c	ļ. 	
	4a_		
	4b_		
	ļ		
	4c	<u> </u>	
	5a		
	5b		
	5c		<u> </u>
	6	 	
	7	-	
	8		
	9a		
	34	1	
	9b	-	-
	9c		
	10a		
	104	1	
_	10b		<u></u>
m	990 or 9	190-E2	L) 2014

Part	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	Ì		
		1a	1	
		1b		
	• • • • • • • • • • • • • • • • • • • •	1c		
	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	\neg	103	140
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		1	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		1	
	controlled the organization's activities. If the organization had more than one supported organization,		i	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	.		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported		ļ	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		- 1	
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		 -
Sect	tion C. Type II Supporting Organizations	$\overline{}$	I	
		\longrightarrow	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	- 1		
	or management of the supporting organization was vested in the same persons that controlled or managed	İ		
	the supported organization(s)	1		
Sect	tion D. Type III Supporting Organizations		1	
		\rightarrow	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax		Ì	
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	1		l
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			ĺ
	significant voice in the organization's investment policies and in directing the use of the organization's			ĺ
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			l
	supported organizations played in this regard	3		<u> </u>
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions):			
а	The organization satisfied the Activities Test. Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instru	ctions;)	
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,	,		
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
~	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			1
	reasons for the organization's position that its supported organization(s) would have engaged in these	,		
	activities but for the organization's position that its supported organization(s) would have engaged in these	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	LN		
			1	
а	trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
D	of its supported organizations? If "Yes," describe in <i>Part VI</i> the role played by the organization in this regard	2h		
	or its supported organizations: ii res, describe iii Part vi the role played by the organization in this regard	<u>3b</u>		

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Organ		13-03133/9 Pag
1 .				uctions. All
٠	other Type III non-functionally integrated supporting organizations must con			101101101741
ecti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5	-	
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
•	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other			
-	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recovenes of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		-
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lly-integrat	ed Type III supporting or	ganization (see

instructions)

Schedule A (Form 990 or 990-EZ) 2014 YOUNG CHILDREN 03-0313379 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2014 from Section C, line 6 10 Line 8 amount divided by Line 9 amount (ii) (iii) (i) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2014 Amount for 2014 Distributable amount for 2014 from Section C, line 6 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2014 b С d e From 2013 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions) j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2014 from Section D, tine 7 a Applied to underdistributions of prior years **b** Applied to 2014 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) Excess distributions carryover to 2015. Add lines 3j and 4c Breakdown of line 7 8 а b C d Excess from 2013 e Excess from 2014

Schedule A (Form 990 or 990-EZ) 2014

VT ASSOCIATION FOR THE EDUCATION OF Schedule A (Form 990 or 990-EZ) 2014 YOUNG CHILDREN 03-0313379 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12 Also complete this part for any additional information (See instructions)

SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Financial Statements

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

➤ Attach to Form 990.

➤ Information about Schedule D (Form 990) and its instructions is at www.lrs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

VT ASSOCIATION FOR THE EDUCATION OF

Employer identification number 03-0313379

YOUNG CHILDREN Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

	ule D,(Form 990) 2014 YOUNG CI							<u> 13379</u>	
Par	III Organizations Maintaining C	ollections of Ar	t, Histe	orical Tre	easures, or Oth	<u>ier Sin</u>	nilar Asset	t s (continu	ed)
з.	Using the organization's acquisition, accession	on, and other record	s, check	any of the	following that are a	significa	nt use of its	collection i	items
	(check all that apply).								
а	Public exhibition	d	L	oan or excl	hange programs				
ь	Scholarly research	е		Other					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	n how the	ev further th	he organization's ex	empt pu	irpose in Parl	t XIII.	
	During the year, did the organization solicit or	•		-	•		-		
	to be sold to raise funds rather than to be ma							Yes	☐ No
Par						o Form 9	990. Part IV. I		
	reported an amount on Form 990, Par			9	.,		, , , , , , , , , , , , , , , , , , , ,	,	
	Is the organization an agent, trustee, custodi		liany for c	ontribution	e or other assets n	nt includ	ed	-	
Ia	on Form 990, Part X?	arror other intermed	nary for c	,on thibution	is of other assets in	ot il lolad		Yes	☐ No
_	-	and complete the fo	llauman te	shla			L	J 162	140
D	If "Yes," explain the arrangement in Part XIII	and complete the to	ilowing to	able			\neg	Amaunt	
	Barrer and Later and						_	Amount	
	Beginning balance						<u>c</u>		
	Additions during the year				-		d		
	Distributions during the year			•			<u>e </u>		
	Ending balance						<u>f</u>		
	Did the organization include an amount on Fe					•	<u> </u>	」Yes	∐ No
	If "Yes," explain the arrangement in Part XIII								
Par	t V Endowment Funds. Complete	f the organization ar						Γ	
		(a) Current year	(b) Pi	nor year	(c) Two years back	(d) Thr	ree years back	(e) Four y	years back_
1a	Beginning of year balance								
b	Contributions							ļ	
С	Net investment earnings, gains, and losses								
d	Grants or scholarships					<u> </u>			
е	Other expenditures for facilities		1					l	
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	a. column (a	a)) held as				
	Board designated or quasi-endowment	,	%	,	"				
	Permanent endowment	 %							
	Temporarily restricted endowment	% %							
·	The percentages in lines 2a, 2b, and 2c sho								
20	Are there endowment funds not in the posse		ation tha	it are held a	and administered fo	r the oro	ianization		
Ja	·	ession of the organiz	ation the	it are rield a	and administered to	i tile olg	anzadon	[·	Yes No
	by								163 140
	(i) unrelated organizations							3a(i)	
	(ii) related organizations		an Caba	iula DO				3a(ii)	
	If "Yes" to 3a(i), are the related organization	· · · · · · · · · · · · · · · · · · ·						3b	
Ba	Describe in Part XIII the intended uses of the		owment i	unas					
ra	t VI Land, Buildings, and Equipm		0 104 114	lino 11a C	Pag Form 000 D	V line 4	0		
	Complete if the organization answere							(-0.D-::	
	Description of property	(a) Cost or o		· · ·	1 7 7	Accumi		(d) Book	value
		basis (invest	ment)	Dasis	(other)	deprecia	LIOIT		
	Land								
b	Buildings								
С	Leasehold improvements								
	Equipment								
	Other			L					
Tata	L Add lines 12 through 1e (Column (d) must	oqual Form 900 Par	+ Y colur	nn (R) linn	1001				Λ

Schedule D (Form 990) 2014 YOUNG CHILDI	CON FOR THE P	DUCKTION OF	03-0313379 Page 3
Part VII Investments - Other Securities.	·		
Complete if the organization answered "Yes" t	o Form 990, Part IV, line	11b. See Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost of	or end-of-year market value
1) Financial derivatives			
2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)	-		
(G)			
(H)			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		<u> </u>	
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			and of the surprise of the sur
(a) Description of investment	(b) Book value	(c) Method of valuation. Cost	or end-or-year market value
(1)			
(2)			
(3)		· · · · · · · · · · · · · · · · · · ·	
(4)			
(5)			
(6)			
<u>(7)</u>	<u>. </u>		
(8)			
(9) Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX Other Assets.	<u> </u>		
Complete if the organization answered "Yes"	to Form 990. Part IV. line	11d See Form 990. Part X. line 15	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)	_		
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15)		>
Part X Other Liabilities.			
Complete if the organization answered "Yes"	to Form 990, Part IV, line		ine 25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(5)			
(6)	į.		

(7) (8) (9)

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

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

03-0313379 Page 4 Schedule D (Form 990) 2014 YOUNG CHILDREN Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a 311,110. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains (losses) on investments 2a b Donated services and use of facilities 2b c Recoveries of prior year grants 2c d Other (Describe in Part XIII) 2d 0. e Add lines 2a through 2d 2e 311.110. Subtract line 2e from line 1 3 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) 0. c Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 110. Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a 314,792. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a 122 b Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII.) 2d 122. Add lines 2a through 2d 314.670. Subtract line 2e from line 1 3 3 Amounts included on Form 990, Part IX, line 25, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIII) c Add lines 4a and 4b 4c Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information PART X, LINE 2: VAEYC IS EXEMPT FROM FEDERAL INCOME TAXATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, THOUGH IT WOULD BE SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSES (UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE CODE). THE TAX YEARS ENDING MAY 31, 2014, 2013, AND 2012 ARE STILL OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES. CONTRIBUTIONS TO VAEYC ARE TAX DEDUCTIBLE TO DONORS UNDER SECTION 170 OF THE INTERNAL REVENUE CODE. VAEYC IS NOT CLASSIFIED AS A PRIVATE FOUNDATION.

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. VT ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN

Employer identification number 03-0313379

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AND SUPPORT FOR CHILDHOOD PROGRAMS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
QUALITY EARLY CHILDHOOD PROGRAMS.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
QUALITY IMPROVEMENT - THIS PROGRAM PROVIDES DIRECT TECHNICAL
ASSISTANCE TO CENTER-BASED, REGULATED PROGRAMS ADVANCING THROUGH
VERMONT'S STEP AHEAD RECOGNITION SYSTEM AND/OR NATIONAL ACCREDITATION
THROUGH MENTORS WHOM VAEYC HAS TRAINED THROUGH THE STATE OF VERMONT.
EXPENSES \$ 61,854. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
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 EXECUTIVE DIRECTOR MONITOR COMPLIANCE WITH THE POLICY
FORM 990, PART VI, SECTION B, LINE 15:
SALARIES 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.

Name of the organization VT ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN	Employer identification number 03-0313379
FORM 990, PART VI, SECTION C, LINE 19:	
INFORMATION IS PROVIDED UPON REQUEST	
	111227 - 1774
	<u> </u>

Schedule O (Form 990 or 990-EZ) (2014)

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