# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2017

Department of the Treasury

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

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

Open to Public

	nai Hevenu			1114	inspection		
<u>A</u>		2017 calendar year, or tax year beginning , 2017, and end	ng		, 20		
В	Check if a				er identification number		
Ш	Address o			03-02	265065		
	Name cha	nge Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite	E Telephoi	ne number		
	Initial retu			(802)	229-0513		
	Final return	/terminated City or town, state or province, country, and ZIP or foreign postal code					
$\boxtimes$	Amended	return Montpelier, VT 05602		G Gross re	ceipts \$ 1,080,93 <u>1</u> .		
	Applicatio	n pending F Name and address of principal officer:	H(a) Is this a gi		subordinates? Yes No		
	• •	Helen Hossley, 148 State Street, Montpelier, VT 056					
ī _	Tax-exem				list. (see instructions)		
J	Website:		. H(c) Group	exemption	number >		
ĸ	Form of or	ganization: X Corporation ☐ Trust ☐ Association ☐ Other ► L Year of form			of legal domicile: VT		
_	art I	Summary		<u> </u>			
		Briefly describe the organization's mission or most significant activities: THE HIS	CION OF REDVOKS DE	ATTODE IS TO	CEDITE TOO NEWDENDED BY DOUBLITHING		
ø		RESOURCES THAT HELP THEM DELIVER REAL ESTATE SERVICES			OURTH THE INDICATION OF TRAVELLE		
Governance	_	AND PROFESSIONAL MANNER; AND TO ADVOCATE FOR THE RIGHTS			NEDS IN VEDMONT		
Ę		Check this box ► if the organization discontinued its operations or disposed					
Š	1	Number of voting members of the governing body (Part VI, line 1a)		3	17		
8	J	lumber of independent voting members of the governing body (Part VI, line 1b)	$\mathcal{L}$	4	17		
es		otal number of individuals employed in calendar year 2017 (Part V, line 2a)	<i>"</i> /	5	5		
ξ	1	otal number of individuals employed in calendar year 2017 (Fart V, line 2a)	1	6			
Activities				7a			
~	b 1	otal unrelated business revenue from Part VIII, colump (C) line 12 let unrelated business taxable income from form 990-7, line 34		7b	-20,273.		
	B		Prior Ye		-20, 273.		
	8 0	Contributions and grants (Part VIII, line 1h).					
ne	1	Program service revenue (Part VIII, line 2g)		,652.	727,889.		
Z est	10	Program service revenue (Part VIII, line 2g)	,441.	280,230.			
Revenue	11 (	nvestment income (Part VIII, column (A), lines 3, 4, and Gelen . UT	,955.	-143,473.			
1		Other revenue (Part VIII, column (A), lines 5, 6th, 8c, 9c, 10c, and 11c)		,038.	-20,273.		
<b>—</b> —		otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	945	,010.	844,373.		
:		Grants and similar amounts paid (Part IX, column (A), lines 1–3)					
:		Benefits paid to or for members (Part IX, column (A), line 4)					
Expenses		calaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	342	,388.	261,107.		
ä	,	Professional fundraising fees (Part IX, column (A), line 11e)	Time Serial matters and	AND THE PROPERTY AND IN	CONTRACTOR OF STREET		
꿃		otal fundraising expenses (Part IX, column (D), line 25)   0.					
_		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		,433.	570,123.		
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		,821.	831,230.		
		Revenue less expenses. Subtract line 18 from line 12	_	,811.	13,143.		
Sor	_		Beginning of Cu		End of Year		
sset	20 T	otal assets (Part X, line 16)		,516.	1,151,655.		
Net Assets or Fund Balances	21 T	otal liabilities (Part X, line 26)		,441.	1,014,272.		
		let assets or fund balances. Subtract line 21 from line 20	109	,075.	137,383.		
Pa	art II	Signature Block					
Un	der penalti	es of penury, I declare that I have examined this return, including accompanying schedules and state	ements, and to the	e best of n	ny knowledge and belief, it is		
tru	e, correct,	and complete. Declaration of preparer (other than officer) is based on all information of which prepare	er nas any knowi	eage.			
		* Hell Stossly	لإل	(2)	2/19		
Sig		Signature of officer	Da	e ·	1.1		
Here		Helen Hossley, Acting CEO					
		Type or print name and title					
Pa	id		Pate	Check [			
	eparer	Lee A. White CPA, PFS, CFP Lee A. White CPA C	2/05/2019	self-emp	loyed P00750923		
	e Only	Firm's name ► WHITE & ASSOCIATES	Firm	's EIN ► (	04-3366373		
		Firm's address ▶ 86 SUMMER ST, BARRE, VT 05641	Pho	ne no. (80	02)476-6191		
Ma	y the IRS	discuss this return with the preparer shown above? (see instructions)			🗙 Yes 🗌 No		
For	Paperwo	rk Reduction Act Notice, see the separate instructions. BAA	EV 10/16/18 PRO		Form <b>990</b> (2017)		

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

	Page <b>2</b>
Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:  THE MISSION OF VERMONT REALTORS IS TO SERVE ITS MEMBERS BY PROVIDING  RESOURCES THAT HELP THEM DELIVER REAL ESTATE SERVICES IN AN ETHICAL
	AND PROFESSIONAL MANNER; AND TO ADVOCATE FOR THE RIGHTS OF PROPERTY OWNERS IN VERMONT.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 669,923. including grants of \$ ) (Revenue \$ 1,008,119.)
	THE VERMONT ASSOCIATION OF REALTORS, INC. CONDUCTS A LEADERSHIP SYMPOSIUM TO DEVELOP LEADERSHIP SKILLS FOR LOCAL BOARDS AND MAKE THEM AWARE OF RESOURCES THEY CAN ACCESS FOR THEIR MEMBERS. IN CONJUNCTION, WE ALSO ORGANIZE AN ANNUAL LEGISLATIVE DAY TO MAKE MEMBERS AWARE OF LEGISLATION THAT MIGHT EFFECT THE REAL ESTATE MARKET OR HOME OWNERS. THROUGHOUT THE YEAR, WE PROVIDE AN EXTENSIVE SCHEDULE OF CLASSES ON REGULATORY TOPICS WHICH ASSISTS MEMBERS IN MAINTAINING THEIR LICENSING REQUIREMENTS. FINALLY THE ASSOCIATION OFFERS AN ANNUAL CONFERENCE FOR MEMBERS TO PROVIDE PROFESSIONAL DEVELOPMENT SEMINARS AND INFORMATION ON MARKET AND INDUSTRY TRENDS FROM NATIONAL SPEAKERS.
4b	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
40	(Code) (Expenses \$)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
4e	(Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses ▶ 669,923

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Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		×
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		×
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		×
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	×	
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		×
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		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
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		×
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		×
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	×	ž-Nadžili
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
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		×
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," complete Schedule D, Part IX	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	×	
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		×
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	×
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		×
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		×
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		×
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		×
	<del></del>			

Form 99	90 (2017)		ı	Page 4
Part	IV Checklist of Required Schedules (continued)			
- 00	Did the executation execute and or years beguited facilities? If "Ves." complete Cabadida U	00-	Yes	No
zu a b	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," complete Schedule H	20a 20b	<del> </del>	×
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		
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			×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22	<del>                                     </del>	×
2.0	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		×
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		×
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b	_	
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d 25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		×
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		×
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):			8.37. 3.37. 3.85.
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		×
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		×
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		×
31	conservation contributions? <i>If "Yes," complete Schedule M </i>	30		×
	Part I	31		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	:	×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		×
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			.,
38	Part VI	37	×	×

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

	Check if Schedule O contains a response or note to any line in this Part V		•	<u> </u>
		CONTENT	Yes	No Second
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			4.5
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			25253
0-	•	1c	<u> </u>	123210333
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 5	27-7W	EPRES	CCE?
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	X	
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b	×	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3D	×	
4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		×
L		HARRIE .	STORE?	CHECK!
Ь	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).	10		
E.	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	lette Lifet	×
5a b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	_	<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		×
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).			138
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			21.
	and services provided to the payor?	7a	***************************************	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	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		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g_		ļ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	80 7 ES 6	10000 V
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		BEE!	
	sponsoring organization have excess business holdings at any time during the year?	8 ਹਾਤਵਨ	क्या <b>अ</b> श्व	E7432321
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	CINE.	經過期
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			22.5
ь 11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources			
-	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	المستنفة	12.00.00
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	经额线	EFA S	Me
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		1
u	Note. See the instructions for additional information the organization must report on Schedule O.	27. T		No.
b	Enter the amount of reserves the organization is required to maintain by the states in which			
-	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Form 9	90 (2017)			,	Page 6
Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 this	rough 7b below,	and	for a	"No"
_	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes				ions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>	• •		$\mathbf{x}$
Secti	on A. Governing Body and Management				
	entre makes entre de la constant de		10 (0)	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year.	<b>1a</b> 17			1 19
	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		12. T a	, ", ",	
	committee, explain in Schedule O.		)		
b	Enter the number of voting members included in line 1a, above, who are independent .	<b>1b</b> 17	3.	-	,
2	Did any officer, director, trustee, or key employee have a family relationship or a business r		ι. <sup>κ</sup>	,	ē Ca
_	any other officer, director, trustee, or key employee?		2	<del></del>	×
3	Did the organization delegate control over management duties customarily performed by or	under the direct	<del></del> -		
	supervision of officers, directors, or trustees, or key employees to a management company or other		3		×
4	Did the organization make any significant changes to its governing documents since the prior Form 99	0 was filed?	4		×
5	Did the organization become aware during the year of a significant diversion of the organization	n's assets?.	5		X
6	Did the organization have members or stockholders?		6	×	
7a	Did the organization have members, stockholders, or other persons who had the power to	elect or appoint		ļ	
	one or more members of the governing body?		7a	×	
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	- A	×
8	Did the organization contemporaneously document the meetings held or written actions und the year by the following:	zertaken during	1	25 44 25 44 14	£ 5
а	The governing body?		8a	×	سقسا
b	Each committee with authority to act on behalf of the governing body?		8b	×	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot				
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		×
Secti	on B. Policies (This Section B requests information about policies not required by the	Internal Reven	ue C	ode.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		<u> </u>
Ь	If "Yes," did the organization have written policies and procedures governing the activities of				
44	affiliates, and branches to ensure their operations are consistent with the organization's exemp		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	a filling the form?	11a	X	_ ( **)
b 12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>				لـنــا
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	rise to conflicts?	12a 12b	×	
C	Did the organization regularly and consistently monitor and enforce compliance with the p		125		
•	describe in Schedule O how this was done		12c	×	
13	Did the organization have a written whistleblower policy?		13		×
14	· · ·		14		×
15	Did the process for determining compensation of the following persons include a review a		63.6	£	3-3
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?	المالية المالية المالية المالية	11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
а	The organization's CEO, Executive Director, or top management official		15a	×	
b	Other officers or key employees of the organization		15b	<b>X</b>	9 - 4
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or simil with a taxable entity during the year?			<del></del>	السيئنا
h	If "Yes," did the organization follow a written policy or procedure requiring the organization		16a	·	×
b	participation in joint venture arrangements under applicable federal tax law, and take steps to		1.00	,	
	organization's exempt status with respect to such arrangements?		16b	luc.	<u> taramal</u>
Section	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, ar	nd 990-T (Section	501(	c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.				
	☐ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Sch				
19	Describe in Schedule O whether (and if so, how) the organization made its governing document	nts, conflict of inte	erest	policy	, and
	financial statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization HELEN HOSSLEY, 148 STATE STREET, MONTPELLER, VT 05602 (802) 229-		cords	: ▶	

	<u></u>		
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Comp	ensated Employees	, and
	Independent Contractors		

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.

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

Check this box it neither the organization nor any related organization compensated any current officer, director, or trustee.									, or trustee.	
(A) Name and Title	(B) Average hours per week (list any	Officer and a director tracted)						(D) Reportable compensation from	(E) Reportable compensation from related	(F) ' Estimated amount of other
,	hours for related organizations below dotted line)		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) LISA KELLEY TREASURER	1.00	×		×						
(2) JOHN HATTON DIRECTOR	1.00	×		_						
(3) PETER TUCKER NAT'L DIRECTOR	1.00	×		×	-		-			
(4) DONNA CUSSON NAT'L DIRECTOR	1.00	×		×						
(5) KEN LIBBY PAST PRESIDENT	1.00	×		×						
(6) SARAH PELUSO DIRECTOR	1.00	×								
(7)LISA MEYER DIRECTOR	1.00	×				_				
(8) TINA LEBLOND DIRECTOR	1.00	×								
(9) MARK MONTROSS DIRECTOR	1.00	×								
(10) TERESA MERELMAN DIRECTOR	1.00	×								
(11) TAMBREY VUTECH DIRECTOR	1.00	×								
(12) BARBARA TROUSDALE DIRECTOR	1.00	×								
(13) KENDALL MCCAUSLAND PRESIDENT	1.00	×		×						
(14) CLAUDIA HARRIS DIRECTOR	1.00	×								

Par	t VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees			lighe	st C	ompensated E	mployees	(contin	ued)
	(A) Name and title		box,	unles	Pos neck ss pe d a d	rson lirect	e than o is both or/trus	n an	(D) Reportable compensation from	(E) Reportal compensation	table tion from	(F) Estimated amount of other
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizat (W-2/1099-	ions	compensation from the organization and related organizations
	LLISON CUMMINGS TICE PRESIDENT	1.00	×		×							
	ELLY STANTON IRECTOR	1.00	×									
(17) H	ELEN HOSSLEY CTING CEO	40.00			×				75,485.			
	SAAC CHAVEZ AST CEO	40.00			×				39,695.			
(19)												
(20)								-				
(21)									,			
(22)												
(23)										<u> </u>		<del> </del>
(24)												
(25)	·											
1b	Sub-total	VII, Sectio	n A					<b>&gt;</b>	115,180.			
d 	Total (add lines 1b and 1c)	not limited						e) wi	L	ore than \$1	100,00	0 of
3	Did the organization list any former of employee on line 1a? If "Yes," complete S							-	loyee, or high			d Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep greater than	oortat an \$1 	ole d 50,0	000	per ? <i>II</i>	nsatio "Yes	n ai s,"	nd other comp complete Sch	ensation for edule J for	rom th	e h 4 ×
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or in		<del></del>
	on B. Independent Contractors											
1	Complete this table for your five highest compensation from the organization. Repyear.											
	(A) Name and business add	ress							(B) Description of so	ervices		(C) Compensation
											-	
2	Total number of independent contractor received more than \$100,000 of compensi							th	ose listed abo	ove) who		

Page 9 Form 990 (2017) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax (C) Unrelated business (B) Related or exempt function under sections 512-514 revenue Contributions, Gifts, Grants and Other Similar Amounts Federated campaigns 1a 1b 721,373 Membership dues Fundraising events . 1c Related organizations . 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f 6,516. Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f. 727,889. Program Service Revenue **Business Code** 541900 161,766. 161,766. 2a VIPD Education 541900 27,994. 27,994. 0. 0. Meetings & Events 0. 541900 75,530. 75,530. 0. Base Package Service 541900 0. 0. 290. 290. Affinity Programs 541900 10,000. 10,000. 0. 0. RAMCO 4,650. ο. 4,650. O All other program service revenue. 280,230. Total. Add lines 2a-2f. Investment income (including dividends, interest, and other similar amounts) 2,177. 2,177. Income from investment of tax-exempt bond proceeds ▶ 5 Royalties (ii) Personal (i) Reat 20,435. 6á Gross rents 40,708. Ь Less: rental expenses -20,273. Rental income or (loss) Net rental income or (loss) -20,273. -20,273(i) Securities (ii) Other Gross amount from sales of 7a assets other than inventory 50,200 Less: cost or other basis and sales expenses . 195,850 Gain or (loss) . 145,650 -145,650. -145,650 Net gain or (loss) Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses . . Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses . . . . Net income or (loss) from gaming activities . Gross sales of inventory, less 10a returns and allowances Less: cost of goods sold . Net income or (loss) from sales of inventory. Ċ Miscellaneous Revenue **Business Code** 11a All other revenue

844,373.

134,580.

-20,273.

Total, Add lines 11a-11d .

Total revenue. See instructions.

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses (D) Fundraising Do not include amounts reported on lines 6b, 7b, (A) Total expenses Management and 8b, 9b, and 10b of Part VIII. general expenses expenses 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 . . . . Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV. lines 15 and 16 . . . . Benefits paid to or for members . . . . 4 Compensation of current officers, directors, trustees, and key employees . . . . . 115,180. 115,180. 0 0. 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 7 Other salaries and wages . . . . . . 91,577. 91,577. 0. 0. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 5,394. 5,394. 0. 0. 9 Other employee benefits . . . . . . . . . 31,761. 31,761. 0. 0. 10 Payroll taxes . . . . . 17,195. 17,195. 0. 0. 11 Fees for services (non-employees): Management . . . . . . а Legal . . . . . . . . . . Ь Accounting . . . . . 51,138. 51,138. 0. C 0. d Lobbying . . . . . . . . . . . Professional fundraising services. See Part IV, line 17 е f Investment management fees . . . . . 150. 0. 150. 0. Other. (If line 11g amount exceeds 10% of line 25, column g (A) amount, list line 11g expenses on Schedule O.) . . 140,337. 35,292. 105,045. 0. 12 Advertising and promotion . . 226. 0. 226. 0. 0. ٥. 13 Office expenses 8,346. 8,346. 14 Information technology . . . 15 Royalties . . . . . . . . . 16 Occupancy . . . . . . . . . . . . 31,017. 31,017. 0. 0. 17 32,618. 32,618. 0. 0. Travel . . . . . . . 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 ٥. Conferences, conventions, and meetings . 16,704. 16,704. 0. 20 21 Payments to affiliates . . . . . . . . 9,689. 9,689 Ō. 0. 22 Depreciation, depletion, and amortization .  $4,\overline{198}$ . 23 4,198 Ο. 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.) Education 81,699. 81,699. 0. а 49,971. 49,971. 0. 0. b Gov't affairs 38,280. 38,280. 0. Dotloop premium 0. C 13,406. 0. Volunteer leadership 13,406. 0. d All other expenses 17,529. 74,815. 0. 92,344. е Total functional expenses. Add lines 1 through 24e 831,230. 669,923. 161,307. 0. 25 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 following SOP 98-2 (ASC 958-720)

ŧ

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	art X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	178,993.	1_	598,306.
	2	Savings and temporary cash investments	16,011.	2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	8,256.	4	
	5	Loans and other receivables from current and former officers, directors,			
	,	trustees, key employees, and highest compensated employees.  Complete Part II of Schedule L		5	
ts	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	6,040.
Ÿ	8	Inventories for sale or use	1,048.	8	111.
	9	Prepaid expenses and deferred charges	12,393.	9	225.
	10a	Land, buildings, and equipment: cost or		<b>海</b> 網	
		other basis. Complete Part VI of Schedule D 10a 610,814.			
	b	Less: accumulated depreciation 10b 193, 673.	436,517.	10c	417,141.
	11	Investments—publicly traded securities	165,121.	11_	129,832.
	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	132,177.	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	950,516.	16	1,151,655.
	17	Accounts payable and accrued expenses	27,346.	17	25,319.
1	18	Grants payable		18	·
	19	Deferred revenue	512,483.	19	617,145.
		Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	monacono de la la consulta de la consulta del consulta de la consulta de la consulta del consulta de la consulta del consulta della consulta	21	normania de companya da cara de cara d
ies	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Lial	23	Secured mortgages and notes payable to unrelated third parties	300,188.	23	288,141.
	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	1,424.	25	83,667.
	26	Total liabilities. Add lines 17 through 25	841,441.	26	1,014,272.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☒ and		CC.	
Net Assets or Fund Balances		complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	109,075.	27	137,383.
Ba	28	Temporarily restricted net assets		28	
g	29	Permanently restricted net assets		29	
교	,	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and			
ō		complete lines 30 through 34.			
şţŝ	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	·
¥	32	Retained earnings, endowment, accumulated income, or other funds .		32	<u> </u>
Se	33	Total net assets or fund balances	109,075.	33	137,383.
	34	Total liabilities and net assets/fund balances	950,516.	34	1,151,655.

Part	XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI				X				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	8	44,3	73.				
2	Total expenses (must equal Part IX, column (A), line 25)	2	8	31,2	30.				
3	Revenue less expenses. Subtract line 2 from line 1	3		13 <u>, 1</u>	43.				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	09,0	7 <u>5.</u>				
5	Net unrealized gains (losses) on investments	5		<u>15,1</u>	64.				
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			1.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line								
	33, column (B))	10	1	37 <u>,</u> 3	83.				
Part	XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII			· ·	No				
1	1 Accounting method used to prepare the Form 990:   Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.								
2a	the contract of the contract o								
b	Separate basis Consolidated basis Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?								
С	Separate basis								
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?		3a	LLIZLINGE E	×				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	rgo the	3b						
			Forr	ո 990	(2017)				

#### SCHEDULE C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

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

0MB No. 1545-0047

Open to Public
Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

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

Name	of organization	<del></del>		Employer idea	ntification number
Vern	nont Association o			03-02650	
Part	I-A Complete if th	e organization is exempt und	er section 501(	c) or is a section 527	organization.
1	definition of "political car				
2	Political campaign activity	ty expenditures (see instructions)			5
3	Volunteer hours for politi	cal campaign activities (see instruc	ctions)		
Part	I-B Complete if th	e organization is exempt und	er section 501(	c)(3).	
1	Enter the amount of any	excise tax incurred by the organiza	ation under sectio	n 4955 ▶ \$	)
2	Enter the amount of any	excise tax incurred by organization	n managers under	section 4955 <b>&gt;</b> \$	>
3	If the organization incurre	ed a section 4955 tax, did it file Fo	rm 4720 for this ye	ear?	Yes No
4a					Yes No
b	If "Yes," describe in Part				
Part	I-C Complete if the	e organization is exempt und	er section 501(	c), except section 501	(c)(3).
1		ly expended by the filing organiz		•	
2		filing organization's funds contrib			
		vities			
3		expenditures. Add lines 1 and 2		on Form 1120-POL,	
4	Did the filing organization	n file Form 1120-POL for this year	?		🗌 Yes 🔀 No
5	organization made paymethe amount of political co	ses and employer identification nu- ents. For each organization listed, ontributions received that were pro- fund or a political action committe	enter the amount mptly and directly	paid from the filing organic delivered to a separate p	ization's funds. Also enter political organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
(1)					
(2)	,				
(3)					
(4)					
(5)					
(6)					_

Total lobbying expenditures to influence public opinion (grass roots lobbying)	(a) Filing organization's totals	er's name,  (b) Affiliated group totals
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)  1a Total lobbying expenditures to influence public opinion (grass roots lobbying)  b Total lobbying expenditures to influence a legislative body (direct lobbying)  c Total lobbying expenditures (add lines 1a and 1b)		
(The term "expenditures" means amounts paid or incurred.)  1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
Total lobbying expenditures to influence public opinion (grass roots lobbying)	organization's totals	group totals
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		er of the state of
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:  Not over \$500,000 20% of the amount on line 1e.  Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000.  Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.		ika z wali. Salaka in da walio ka
columns         If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:         Not over \$500,000       20% of the amount on line 1e.         Over \$500,000 but not over \$1,000,000       \$100,000 plus 15% of the excess over \$500,000.         Over \$1,000,000 but not over \$1,500,000       \$175,000 plus 10% of the excess over \$1,000,000.		er and some species
Not over \$500,000         20% of the amount on line 1e.           Over \$500,000 but not over \$1,000,000         \$100,000 plus 15% of the excess over \$500,000.           Over \$1,000,000 but not over \$1,500,000         \$175,000 plus 10% of the excess over \$1,000,000.		A A A
Over \$500,000 but not over \$1,000,000         \$100,000 plus 15% of the excess over \$500,000.           Over \$1,000,000 but not over \$1,500,000         \$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.	CANAL COLUMN TO COMPANY	
O 64 FOO DOO L. 4 4 647 DOO DOO   600F DOO   FOO   1120		
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000 \$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f)		<del></del>
h Subtract line 1g from line 1a. If zero or less, enter -0	-	
i Subtract line 1f from line 1c. If zero or less, enter -0		
j If there is an amount other than zero on either line 1h or line 1i, did the organization f reporting section 4911 tax for this year?		Yes No
4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all o	of the five column	ns below.
Lobbying Expenditures During 4-Year Averaging Period		
Calendar year (a) 2014 (b) 2015 (c) 2016 Calendar year (a) 2014	(d) 2017	(e) Total
2a Lobbying nontaxable amount		
b Lobbying ceiling amount (150% of line 2a, column (e))		
c Total lobbying expenditures		
d Grassroots nontaxable amount		
e Grassroots ceiling amount		
(150% of line 2d, column (e))		

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 576	8
	(election under section 501(h)).	

For 6	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(;	a)	(b)
	ription of the lobbying activity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?			
b. C	Media advertisements?		ļ	
d	Mailings to members, legislators, or the public?			
е	Publications, or published or broadcast statements?		<u> </u>	
f	Grants to other organizations for lobbying purposes?		ļ	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<u> </u>	
! :	Other activities?		<u> </u>	
2a	Total. Add lines 1c through 1i	22372		
b	If "Yes," enter the amount of any tax incurred under section 4912	\$ 100 C	<u>श्रृह्म</u>	1
C	IS MOVED IN COLUMN TO A COLUMN			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	200 200	<u> </u>	EXPLOSE
Part		(5), (	or se	
				Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			1 X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 ×
_3_	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."			
1	Dues, assessments and similar amounts from members	•	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of		
а	Current year		2a	
b	Carryover from last year		2b	
C	Total		2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	ing		
_	and political expenditure next year?		4	
5 Part	Taxable amount of lobbying and political expenditures (see instructions)	_•	5	
Provid	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groundstructions); and Part II-B, line 1. Also, complete this part for any additional information.	up list	t); Pa	t II-A, lines 1 and

Schedule C (Forn	chedule C (Form 990 or 990-EZ) 2017				
Part IV	Supplemental Information (continued)				
	······································				
	***************************************				
	•••••••••••••••••••••••••••••••••••••••				
•					
		•			

### **SCHEDULE D** (Form 990)

# **Supplemental Financial Statements**

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

► Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name (	f the organization		Employer identification number
Ver	mont Association of Realtors		03-0265065
Pai			ds or Accounts.
	Complete if the organization answered	"Yes" on 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)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	r advisors in writing that the assets he	eld in donor advised
	funds are the organization's property, subject to the	ne organization's exclusive legal contro	l? 🗌 Yes 🗌 No
6	Did the organization inform all grantees, donors,	and donor advisors in writing that grar	nt funds can be used
	only for charitable purposes and not for the bene		
	conferring impermissible private benefit?	<u></u> . <u></u>	· · · · · · 🔲 Yes 🔲 No
Par	Conservation Easements.	· · · · · · · · · · · · · · · · · · ·	
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the	organization (check all that apply).	
	Preservation of land for public use (e.g., recrea	ation or education)   Preservation of	a historically important land area
	☐ Protection of natural habitat	☐ Preservation of	a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization h	eld a qualified conservation contributio	n in the form of a conservation
	easement on the last day of the tax year.	·	Held at the End of the Tax Year
а	Total number of conservation easements	. <b></b>	
b	Total acreage restricted by conservation easemen	ts	2b
, с	Number of conservation easements on a certified		
ď	Number of conservation easements included in		
3	Number of conservation easements modified, tran		L
	tax year ▶	<b></b>	
4	Number of states where property subject to conse	ervation easement is located >	
5	Does the organization have a written policy re		pection, handling of
-	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspec		
•	L	ming, flatialing of violations, and officioning c	oncorvation occomonic during the year
7	Amount of expenses incurred in monitoring, inspecting	no handling of violations, and enforcing o	conservation easements during the year
•	►\$	ig, mandaring or violations, and officioning t	someon valuer addeniance during the year
8	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)?		
9	In Part XIII, describe how the organization reports		
9	balance sheet, and include, if applicable, the text of	of the footnote to the organization's fine	ancial statements that describes the
	organization's accounting for conservation easeme		ariolal statements that accombos the
Part			Other Similar Assets
Fell	Complete if the organization answered		Other Online Assets.
10	If the organization elected, as permitted under SF		royanua statement and balance sheet
1a	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the		
_	•		
b	If the organization elected, as permitted under S works of art, historical treasures, or other similar		
			ucation, or research in furtherance of
	public service, provide the following amounts relat		<b>.</b> •
	<ul><li>(i) Revenue included on Form 990, Part VIII, line 1</li><li>(ii) Assets included in Form 990, Part X</li><li>If the organization received or held works of art</li></ul>		🟲 💲
_	(ii) Assets included in Form 990, Part X		, <b>▶</b> \$
2	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 S		
а	Revenue included on Form 990, Part VIII, line 1 .		
b	Assets included in Form 990, Part X		

Par	Organizations Maintaining	Collections of	Art, His	torical	Treasures	s, or O	ther Similar A	ssets (c	ontinu	ıed)
3	Using the organization's acquisition, collection items (check all that apply):		ther reco	rds, che	ck any of th	ne follo	wing that are a	significan	t use	of its
а	☐ Public exhibition		d	☐ Loan	or exchan	ge prog	rams			
b	☐ Scholarly research		е	☐ Othe	er					
С	☐ Preservation for future generations									
4	Provide a description of the organization.	tion's collections	and expl	ain how 1	they further	the or	ganization's exe	mpt purp	ose in	Parl
5	During the year, did the organization assets to be sold to raise funds rather								es [	] No
Par	Escrow and Custodial Arra								_	
	Complete if the organization 990, Part X, line 21.						•		n Fori	m 
1a	Is the organization an agent, trustee, included on Form 990, Part X?								es [	] No
b	If "Yes," explain the arrangement in Pa	art XIII and compl	ete the fo	llowing t	able:		, ,	Amount		
C	Beginning balance					10				
d	Additions during the year					10				
e	Distributions during the year					16				
f	Ending balance					11				
2a	Did the organization include an amour									_
Dor	If "Yes," explain the arrangement in Pa	art XIII. Check her	e if the e	kplanatio	n has been	provid	ed on Part XIII .	<u> </u>	<u>_</u> _	<u> </u>
Par	Endowment Funds. Complete if the organization	anawarad "Vac	" on For	m 000 l	Dort IV lin	0.10				
	Complete if the organization	(a) Current year		or year	(c) Two yea		(d) Three years bac	k (e) Fou	r years l	back
1a	Reginning of year balance	(a) Current year	(5)111		(0) 1110 yea	- Daox	(a) Thice years bac	(6).00		
_	Beginning of year balance Contributions					-	(~)	-		
Ь	Net investment earnings, gains, and							<del> </del>		
С	losses									
d	Grants or scholarships									
e	Other expenditures for facilities and						-	1		
	programs							İ		
f	Administrative expenses					-				
g	End of year balance				<del></del>					
2	Provide the estimated percentage of the	he current vear en	d balanc	e (line 1c	r column (s	a)) held	as:			
– a	Board designated or quasi-endowmer	nt 🕨	%	o (o 19	,, 00,0,,,,,,	.,, 1101a	40.			
b	Permanent endowment ►		'0							
c	Temporarily restricted endowment ▶	%								
•	The percentages on lines 2a, 2b, and 2		nn%							
3a	Are there endowment funds not in the			zation th	at are held	and ad	ministered for th	ne		
	organization by:	possosion or u							Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations					• •		3a(ii)		
ь	If "Yes" on line 3a(ii), are the related or							3b		
4	Describe in Part XIII the intended uses					• •				
Part										
	Complete if the organization		" on For	m 990 l	Part IV. lin	e 11a.	See Form 990	Part X	line 1	0.
	Description of property	(a) Cost or ot			or other basis	r	Accumulated		ok value	
	Description of property	(investm		(0	ther)	ď	epreciation	(0) 50		
1a	Land				87,108.	<b>HENRY</b>			87,1	08.
b	Buildings			4	91,460.		163,704.	3	27,7	56.
С	Leasehold improvements									
d	Equipment				32,246.		29,969.		2,2	77.
е	Other									
Total.	Add lines 1a through 1e. (Column (d) m	ust equal Form 9	90, Part )	(, column	(B), line 10	Oc.) .	•	4	17,1	41.

Pårt VII	Investments—Other Securities Complete if the organization ans		n 99	0 Part IV lin	e 11h. See Form	1990 Part X line 12
	(a) Description of security or categor (including name of security)			) Book value	(c) Met	hod of valuation of-year market value
(1) Financial						
• •	neld equity interests					
(A)						
(B)						
(C)						
(D)						
(E)						
(F) (G)				<del></del>		<del></del>
(H)						
	b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII	Investments—Program Related	d			Terror, surgement to the or the second of the	CHETALETY THE SHAME IN SOME LAND TO AND THE SHAME AND
	Complete if the organization ans		n 991	0, Part IV, lin	e 11c. See Form	990, Part X, line 13.
	(a) Description of investment			) Book value	(c) Met	thod of valuation: -of-year market value
(1)					<del></del>	<u> </u>
(2)				<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)	o) must equal Form 990, Part X, col. (B) line 13.)			<del></del>	ALBOARSANING AT SHOW	
Part IX	Other Assets.	<u></u>			establication of the second	
raitix	Complete if the organization ans	wered "Yes" on Form	n 990	0 Part IV lin	e 11d. See Form	990 Part X line 15
	<del></del>	) Description		o, , a ,	5 1 1 d. 0 d d 1 d 1 1 1 1	(b) Book value
(1)		<u> </u>				
(2)		· · · · · · · · · · · · · · · · · · ·				
(3)						
(4)	, , , , , , , , , , , , , , , , , , , ,					
(5)						
(6)						
_(7)						
(8)						
(9)	nn (b) must equal Form 990, Part X, co	ol (P) line 15 )				
Part X	Other Liabilities.	л. (b) ше тэ.)	•	<del>- · · · · ·</del>	· · · · · · · · · · · · · · · · · · ·	
FaitA	Complete if the organization ans	wered "Ves" on Form	a a a	0 Part IV line	a 11e or 11f See	Form 990 Part X
	line 25.	Weled les official	1 550	o, i aitiv, iii	0 110 01 111. 000	> 1 OIIII 000, 1 tare 20,
1.	(a) Description of liability	(b) Book value	].			
(1) Federal in						
(2)Credit		12,98	9.			
	l liabilities		7.			
	liabilities	69,98				
(5)						
(6)		,				
(7)						
(8)						
(9)						
	n) must equal Form 990, Part X, col. (B) line 25.) ▶	83,66				
2. Liability for	uncertain tax positions. In Part XIII, provi	de the text of the footnot	e to t	the organizatior	r's financial stateme	nts 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

Schedule D (Form 990) 2017

BAA

Pari			Return.	
	Complete if the organization answered "Yes" on Form 990,			000 015
1	Total revenue, gains, and other support per audited financial statements		1	900,245.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1-1		
а	Net unrealized gains (losses) on investments	2a 15,164.	- 5653	
b	Donated services and use of facilities	<del></del>		
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	55,872.
3	Subtract line 2e from line 1		3	844,373.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	844,373.
Part	XII Reconciliation of Expenses per Audited Financial States	-	er Returi	٦.
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	871,938.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		172162	
а	Donated services and use of facilities	2a		•
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		2e	40,708.
3	Subtract line 2e from line 1		3	831,230.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		See S	
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	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin		5	831,230.
Part			1	
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar			
2; Pan	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additional if	normation	) <b>.</b>
Pt X	I, Line 2d: 40,708 of expenses are relected on Pa	ge 9. revenue		
		,		
Pt X	II, Line 2d: 40,708 of expenses are reflected on	Page 9, revenue		
			<del></del>	

REV 10/16/18 PRO

Schedule D (For		Page 5
Part XIII	Supplemental Information (continued)	
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¢		
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	,	
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	<u> </u>	

#### **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.

Open to Public

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization	Employer identification number			
Vermont Association of Realtors	03-0265065			
Pt VI, Line 6: Members of the Vermont Association of Realtors, In	c. are licensed			
real estate agents who apply for membership to take advantage of business tools,				
education, information and code of ethics processes.				
Pt VI, Line 7a: Members elect the governing body by vote.				
Pt VI, Line 11b: The 990 is reviewed by the executive committee.				
Pt VI, Line 12c: The conflict of interest policy is signed annual	ly by all board			
members. Board members announce when they have a conflict and rec	use themselves			
from participation in discussion or voting.				
Pt VI, Line 15a: A review of the CEO is conducted by the presiden	t, president-elect			
and past president and is based on industry and national compensa	tion studies,			
compensation is negotiated with the executive committee, which th	en goes to the			
full board for approval.				
Pt VI, Line 15b: The president's stipend is set during the budget	ing process			
each year. There is no review as it is an elected position.				
Pt VI, Line 19: The association's governing documents are posted	on the website.			
The financial statements are available for public view in the off	ice.			
Pt XI: Line 9 rounding.				
Pt IX, Line 11g:				
Description: Bank charges				
Total: \$2,125				
Program services: \$0				
Management and general: \$2,125				
Fundraising: \$0				
Description: Credit card fees				
Total: \$33,167				

Total: \$1,620

Program services: \$0

Name of the organization	Employer identification number
Vermont Association of Realtors	03-0265065
Management and general: \$1,620	
Fundraising: \$0	
Description: Commercial division	
Total: \$1,061 `	
Program services: \$0	
Management and general: \$1,061	
Fundraising: \$0	
Description: Dues and subscriptions	
Total: \$6,726	
Program services: \$0	
Management and general: \$6,726	
Fundraising: \$0	
Description: Equipment repairs	
Total: \$955	
Program services: \$955	
Management and general: \$0	
Fundraising: \$0	
Description: Inman select	
Total: \$10,000	
Program services: \$0	
Management and general: \$10,000	
Fundraising: \$0	
Description: Local board services	
Total: \$3,253	
Program services: \$3,253	
Management and general: \$0	
Fundraising: \$0	

Name of the organization	Employer identification number
Vermont Association of Realtors	03-0265065
Description: NERC expenses	
Total: \$1,500	
Program services: \$0	
Management and general: \$1,500	
Fundraising: \$0	
Description: Public relations sponsors	
Total: \$100	
Program services: \$100	
Management and general: \$0	
Fundraising: \$0	
Description: Service contracts	
Total: \$494	
Program services: \$494	
Management and general: \$0	
Fundraising: \$0	
Description: Vehicle expenses	
Total: \$9,977	
Program services: \$0	
Management and general: \$9,977	
Fundraising: \$0	
Dogovintian, UDOD subscriptions	
Total: \$7,149	
Program services: \$0	
Management and general: \$7,149	
Fundraising: \$0	
Description: Postage	
Total: \$1,126	

Program services: \$86

Management and general: \$0

Schedule O (Form 990 or 990-EZ) (2017)