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

Department of the Treasury Internal Revenue Service

▶ Do

2018

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and many of the Terror		umbers on this form as it may be made public	
partment of the Treasury rnal Revenue Service	► Go to www.irs.gov/Form99	0 for instructions and the latest information.	01
For the 2018 calend	dar year, or tax year beginning	, 2018, and ending	-

Open to Public Inspection

ì	B	Check if	applicable	C Name of organization Vermont Association of Realtors		To Employ	yer identification number
		Address	change	Doing business as Vermont Realtors		03-0	265065
Ē,		Name ch	nange	Number and street (or P O box if mail is not delivered to street address) Room	/suite	E Telepho	one number
		Initial ret	urn	148 State Street		(802)229-0513
u •■ 4* •}		Final retu	m/terminated	City or town, state or province country, and ZIP or foreign postal code			
		Amende	d return	Montpelier, VT 05602		G Gross r	eceipts \$ 981,709.
~		Applicat	ion pending	F Name and address of principal officer	H(a) is this a	group return for	r subordinates? Yes X No
		• •		Helen Hossley, 148 State Street, Montpelier, VI/10			
S		Tax-eye	mpt status	501(c)(3) X 501(c) (6) 4 (insert no) 4947(a)(1) or 52			a list (see instructions)
issi		Websito		www.vermontrealtors.com	H(c) Grou	p exemption	n number 🕨
Ξ'	K	Form of		Corporation ☐ Trust ☐ Association ☐ Other ➤ L Year of form			e of legal domicile VT
\approx		art I	Summ				
9		1			ISSION OF VERYOUT	R 21 280T IARS	TO SERVE ITS HEMBERS BY PROVIDING
	ę,	-	-	RCES THAT HELP THEM DELIVER REAL ESTATE SERVICE			
	and			OFESSIONAL MANNER; AND TO ADVOCATE FOR THE RIGHT			
	Governance	2		his box ► if the organization discontinued its operations or dispose			
	Š	3		of voting members of the governing body (Part VI, line 1a).		i -	17
	∞ ⊗	4		of independent voting members of the governing body (Part VI, line 1			17
	es	5		mber of individuals employed in calendar year 2018 (Part V, line 2a)	10,	. 5	
	Vitr	6		mber of volunteers (estimate if necessary)	•	6	17
	Activities &	7a		related business revenue from Part VIII, column (C), line 12		7a	-29,736.
	~	b		elated business taxable income from Form 990-T, line 38		. 7b	-29, 736. -29, 736.
		- 0	ivet unie	nated business taxable income from Form 990-1, line 38	Pnor		Current Year
		8	Contribu	itions and grants (Part VIII, line 1h)			
	Revenue	9		service revenue (Part VIII, line 2g)		27 <u>,889.</u> 30,230.	
	Ver	10	-	ent income (Part VIII, column (A), lines 3, 4, and 7d)			
	æ	11		veriue (Part VIII, column (A), lines 5, 6d. 8c. 9c, 10c, and 11e)	·	<u>13,473.</u>	
		i		renue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		20,273.	
		12		and similar amounts paid (Part IX, column (A), lines 1–3)	8	44,373.	937,623.
		13					
		I		paid to or for members (Part IX, column (A), line 4)	ļ <u>-</u>		200 700
	Expenses	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)	20	61 <u>,107.</u>	308,788.
	Ë	16a		onal fundraising fees (Part IX, column (A), line 11e)			
	쫎	b		ndraising expenses (Part IX, column (D), line 25) ► 0.	· · · · · · · · · · · · · · · · · · ·		111 615
	_	17		xpenses (Part IX, column (A), lines 11a-11d, 11f-24e)	· · · · · · · · · · · · · · · · · · ·	70,123.	
		18		penses Add lines 13-17 (must equal Part IX, column (A), line 25)		31,230.	
		19	Revenue	e less expenses. Subtract line 18 from line 12		13,143.	
	ssets or Balances			sets (Part X, line 16)	Beginning of		
	sset	20				51,655.	1,286,554.
တ	Net As Fund B	21	Total lial	hilitiae (Rart X Juna 26)		14,272.	
Õ	조근		Net asse			<u>37,383.</u>	306,622.
₽		art II-	Signa	iture Block			
SCANNED	Un			ury, I doclare that I have examined this return, including accompanying schedules and s			my knowledge and belief, it is
四		e, corre	ct, and comp	olete. Declaration of preparer (other than officer) is based on all information of which prep	oarer has any kno		
			A	Ree A. White CP4		<u> </u>	5-F7
FEB	Siç	_	Sigi	nature of officer		Date	•
8	He	re	a	LEE WHITE CHA		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
89				e or print name and title			
0	Pa	iid -	Print/T	ype prepaier's name Pieparer's signature	Date		III PTIN
		epar	er Lee /	1. White CPA, PFS, CFP Lee A. White CPA	11/14/20		nployed P00750923
2020		se On		name ▶ WHITE & ASSOCIATES	F	irm's EIN 🕨	04-3366373
J	_	, U U I I	Film's	address ► 86 SUMMER ST, BARRE, VT 05641			802)476-6191
	Ma	y the l		ss this return with the preparer shown above? (see instructions) .		•	🗶 Yes 🗌 No
	For	Paper	work Red	uction Act Notice, see the separate instructions. BAA	REV 05/20/19 PR	0	Form 990y 2018)

CETALLY	Checklist		

			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	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		
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 98-197 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	×	
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? If "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		×
12a	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	<u> </u>	×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	 	×
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		×
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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 17 கேட்கும் நக்கு plete Schedule I, Parts I and II .	21		×
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Part.	Checklist of Required Schedules (continued)			
			Yes	No
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		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		×
	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		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		·—·
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		×
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	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	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	L	×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	ļ	×
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	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 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? If "Yes," complete Schedule R. Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	×	
Pari				
	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 . 1a 0	}		1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10	×	

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ala	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
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		.	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) .			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	×	
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	_×	Ĺ
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		×
ь	If "Yes," enter the name of the foreign country ▶			ļ.
	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	<u> </u>	_×_
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	L	_×
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	<u> </u>	ļ
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	CL		
~	gifts were not tax deductible?	6b	 	
7	Organizations that may receive deductible contributions under section 170(c).)
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	ļ	1
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	 -	╂
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		 	┼
С	required to file Form 8282?	7c	1	1
d	If "Yes," indicate the number of Forms 8282 filed during the year		 	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	 	1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	†	<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			1
	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	<u> </u>	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	Ì	Ì	1
а	Initiation fees and capital contributions included on Part VIII, line 12]		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		1
11	Section 501(c)(12) organizations. Enter			1
а	Gross income from members or shareholders	4		1
b	Gross income from other sources (Do not net amounts due or paid to other sources			
40-	against amounts due or received from them.)	۔مدا	ļ	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		╁
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b	-	1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a	+-	+
а	Note. See the instructions for additional information the organization must report on Schedule O.	134	┼─	+
	<u> </u>			
ь	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	1	1	
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		+
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	170	 	-
13	excess parachute payment(s) during the year?	15		Ì
	If "Yes," see instructions and file Form 4720, Schedule N.	··•	+	+-
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
. •	If "Yes," complete Form 4720, Schedule O.		†	
			ببيسه	

Form 990				age b
Part \				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S.			_
<u> </u>	Check if Schedule O contains a response or note to any line in this Part VI	<u>:</u>		<u>X</u>
Section	on A. Governing Body and Management	г		 -
4.5	Enter the gumber of voting members of the governing body at the and of the tay year.		Yes	No
14	Enter the number of voting members of the governing body at the end of the tax year 1a 17			
	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	. 1		
	committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent . 15 17	1	Ì	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	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		<u>×</u> _
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		_ <u>X</u> _
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u> </u>
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 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,	l i		
_	stockholders, or persons other than the governing body?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.			
а	The governing body?	8a	×	
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 be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		×
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.)	,
	_	لــــا	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		×
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	×	ļ
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		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	×	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	×	
13	Did the organization have a written whistleblower policy?	13	-^-	×
14	Did the organization have a written document retention and destruction policy?	14	-	×
15	Did the process for determining compensation of the following persons include a review and approval by		-	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	×	
b	Other officers or key employees of the organization	15b	×	ļ
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	}	×
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			ļ
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			1
	organization's exempt status with respect to such arrangements?	16b		İ
	ion 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 (1024 or 1024-A if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	1 (2ec	uon	30 I (C
	Own website Another's website 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 in the second of the secon	terect	nolic	v and
13	financial statements available to the public during the tax year	.5, 55(p0110	,,
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	; ▶	
	Bonnie Parker, 148 STATE STREET, MONTPELIER, VT 05602 (802)249-8642			

Form	990	(2018)	

Page 7

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated 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.

		(C)								
(A)	(B)	Position				(0)	(E)	(F)		
Name and Title	Average	(do not check more than one box, unless person is both an				Reportable	Reportable	Estimated		
	hours per						compensation	compensation from	amount of	
	week (list any hours for	악方	95 5 0 5 9 5 7		from the	related organizations	other compensation			
	related	dire	attu	Officer	у ег	ples	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	ctor	ģ	,	미	st cc yee	=	(W-2/1099-MISC)		organization and related
	line)	Individual trustee or director	al to		Key employee	m p	ļ			organizations
,		tee	Institutional trustee			Highest compensated employee				
			•			ted				
						1				
(1) LISA KELLEY	1.00					ĺ				
TREASURER		×		×			<u> </u>			
(2) JOHN HATTON	1.00		i i					}		
DIRECTOR	<u></u>	×								
(3) PETER TUCKER	1.00		:		ŀ					
NAT'L DIRECTOR		×		×	<u></u>					
(4) DONNA CUSSON	1.00				ŀ					
NAT'L DIRECTOR		×		×						
(5) KEN LIBBY	1.00			}				}		
PAST PRESIDENT	ļ <u>.</u>	×		×		_	L_			
(6) SARAH PELUSO	1.00					ļ				
DIRECTOR		×			<u> </u>		<u> </u>			
(7) LISA MEYER	1.00]								
DIRECTOR		_×		L_	<u> </u>		ļ			
(8) TINA LEBLOND	1.00					}		1		•
DIRECTOR		×					<u> </u>			
(9) MARK MONTROSS	1.00						1	1		
DIRECTOR		×			<u> </u>	ļ <u>.</u>	<u> </u>			
(10) TERESA MERELMAN	1.00									
DIRECTOR	<u> </u>	×	<u> </u>	ļ	<u> </u>					
(11) TAMBREY VUTECH	1.00				ł			1		
DIRECTOR		×	ļ	L_						
(12) BARBARA TROUSDALE	1.00	}			1		1		}	
DIRECTOR		×	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>			
(13) KENDALL MCCAUSLAND	1.00					Ì	ŀ			
PRESIDENT		×	<u> </u>	×		<u> </u>				
(14)CLAUDIA HARRIS	1:00]			'					
DIRECTOR		×	L_	<u> </u>						

1

	(A) Name and title	(B) Average hours per week (list any	box, ı	ot che inless r and	a du	nore son	than o is both or/trust	an	(D) Reportable compensation from	compensation	(E) Reportable compensation from related		ated int of	
		hours for related organizations below dotted line)	Individual fristee or director	Institutional inistee	Officer	Кеу етрюуее	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)		comper from organi and re organiz	nsation the zation elated	
	LISON CUMMINGS CE PRESIDENT	1.00	×		×									
	LLY STANTON RECTOR	1.00	×											
	LEN HOSSLEY TING CEO	40.00			×				105,000.		0.			0
PA	AAC CHAVEZ ST CEO	40,00			×									
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
1b c	Sub-total	•						A A	105,000.		0.			0
d 2	Total (add lines 1b and 1c)	t not limite				ed		<u>₽</u> e) w	105,000. tho received m	ore than \$10	0.	of		0
3	Did the organization list any former of employee on line 1a? If "Yes," complete	fficer, direc				ee,	key (emp	oloyee, or high	nest compe	nsated	3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations	e sum of re	porta	ble d	con	пре	nsatio							<u>×</u>
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or inc	 Iividual	5		×
Section	on B. Independent Contractors	77 703,		7010	00,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			auch person					
1	Complete this table for your five highest compensation from the organization. Re year													ax
	(A) Name and business ad	dress							(8) Description of	services		(C) Compens	ation	
										-				

PartVIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII . (D) Revenue (A) Total revenue (C) Unrelated excluded from tax under sections 512-514 exempt function business revenue 1a Federated campaigns Contributions, Gifts, Grants and Other Similar Amounts 1a 646,853. Membership dues 16 Fundraising events 1c d Related organizations . 1d Government grants (contributions) 1e All other contributions gifts, grants, and similar amounts not included above 11 26,049 Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f 672,902 Program Service Revenue **Business Code** 541900 190,996. 2a VIPD Education 190,996. 0. 0. 541900 2,880. b Meetings & Events 2,880. 0. 541900 c Base Package Service 79,686. 79,686. 0. RAMCO d 541900 4,000. 4,000. Ò. All other program service revenue. Total. Add lines 2a-2f. 277,562. 3 Investment income (including dividends, interest, and other similar amounts) . 9,395. 9,395. 0 0. 4 Income from investment of tax-exempt bond proceeds 5 Royalties . . . (i) Real (ii) Personal 14,350 6a Gross rents b Less rental expenses 44,086. c Rental income or (loss) -29,736. -29,736.0. d Net rental income or (loss) -29,7360. (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses Gain or (loss) . 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 . c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from garning activities . 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold þ Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 900099 0. 7,500. 7,500. 0. 11a Facility rental All other revenue . ₽ 7,500. Total. Add lines 11a-11d Total revenue. See instructions 937,623. 285,062. -29,736. 9,395.

	0 (2018)				Page 10
	Statement of Functional Expenses n 501(c)(3) and 501(c)(4) organizations must com	plete all columns. Al	l other organization	s must complete colu	ımn (A).
	Check if Schedule O contains a respons			· · · · · · · · · · · · · · · · · · ·	🗆
Do по 8b, 9b	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total exponses	(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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	105,000.	105,000.	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 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	135,088.	135,088.	0.	0.
9	Other employee benefits	47,489.	47,489.	0.	0.
10	Payroll taxes	21,211.	21,211.	0.	0.
11	Fees for services (non-employees).				
а	Management				
b	Legal				· · · · · · · · · · · · · · · · · · ·
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees			<u></u>	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion .	109.	0.	109.	0.
13	Office expenses	9,135.	0.	9,135.	0.
14	Information technology .				
15	Royalties				
16	Occupancy	35,326.	35,326.	0.	0.
17 18	Travel	32,091.	32,091.	0.	0.
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,810.	2,810.	0.	
20	Interest	2,010.	2,010.	 	0.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,759.	8,759.	0.	0.
23	Insurance	3,509.	0.	3,509.	0.
24	Other expenses Itemize expenses not covered	, , , , , , , , , , , , , , , , , , ,			
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	Awards and gifts	2,074.	0.	2,074.	0.
b	Credit card fees	4,509.	0.	4,509.	0.
C	Dues & subscriptions	5,034.	0.	5,034.	0.
d	Postage	349.	0.	349.	0.
е	All other expenses	340,940.	275,136.	65,804.	0.
25	Total functional expenses. Add lines 1 through 24e	753,433.	662,910.	90,523.	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 (2018) Page 11 ¥Part X ∉ **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year Cash-non-interest-bearing 739,058. 1 598,306. 1 2 Savings and temporary cash investments . 2 3 Pledges and grants receivable, net 3 7,321. 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 6,040. 6,595. Notes and loans receivable, net . 7 111. Inventories for sale or use . . 111. 8 8 13,270. Prepaid expenses and deferred charges . 225. 9 Land, buildings, and equipment cost or other basis, Complete Part VI of Schedule D 10a 610,814. 10b 211,192. 417,141. 399,622. Less accumulated depreciation 10c h 129,832. 120,577. 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). 1,151,655. 16 1,286,554. 19,253. 17 Accounts payable and accrued expenses 25,319. 17 18 Grants payable. 18 617,145. 605,474. 19 Deferred revenue . . 19 20 Tax-exempt bond liabilities . 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 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 23 288,141. 276,291. Secured mortgages and notes payable to unrelated third parties . . . 23 Unsecured notes and loans payable to unrelated third parties . . . 24

Other liabilities (including federal income tax, payables to related third

parties, and other liabilities not included on lines 17-24) Complete Part X

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and

Organizations that follow SFAS 117 (ASC 958), check here >

Paid-in or capital surplus, or land, building, or equipment fund.

Retained earnings, endowment, accumulated income, or other funds

complete lines 27 through 29, and lines 33 and 34.

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances .

25

27

29

30

31

32

33

Net Assets or Fund Balances

of Schedule D

Unrestricted net assets .
Temporarily restricted net assets

complete lines 30 through 34.

Total liabilities. Add lines 17 through 25

Permanently restricted net assets.

Total net assets or fund balances.

30 31 32 33 306,622. 34 1,286,554.

78,914.

979,932.

306,622.

Form 990 (2018)

83,667.

137,383.

137,383.

1,151,655.

1,014,272.

25

26

27

28

29

the Single Audit Act and OMB Circular A-133?

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

×

3a

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

► 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.

OMB No 1545-0047

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Department of the Treasury Internal Revenue Service

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

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

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

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

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

	ee separate instructions), tr				•
	ction 501(c)(4), (5), or (6) orga	nizations: Complete Part III			
	of organization			1	lentification number
	ont Association of			03-026	
Lan		e organization is exempt unde			
1		the organization's direct and in-	direct political ca	impaign activities in Pa	art IV. (see instructions for
	definition of "political can	. •			Φ.
2		y expenditures (see instructions) .			\$
3	Volunteer nours for politic	cal campaign activities (see instruc	tions)	-1/0)	
Pen		organization is exempt und			\$
1 2		excise tax incurred by the organization			
3		excise tax incurred by organization and a section 4955 tax, did it file For	-		
ა 4a	Was a correction made?		m 4/20 for this ye	ear'	Yes No
4a b	If "Yes," describe in Part				. Tes INO
		e organization is exempt und	er section 501/	c) except section 5	01(c)(3)
1		y expended by the filing organiz			01(0)(0).
•	activities .	y expended by the filling organiz	ation to section		\$
2		filing organization's funds contrib	outed to other ord	ranizations for section	
-	527 exempt function activ				\$
3	,	expenditures. Add lines 1 and 2			
•	•			The state of the s	\$
4		file Form 1120-POL for this year			. Yes No
5		ses and employer identification nui			anizations to which the filing
_		ents For each organization listed,			
		entributions received that were pro			
	as a separate segregated	fund or a political action committee	e (PAC). If addition	nal space is needed, pro	ovide information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			(-)	filing organization's	contributions received and
				funds if none, enter -0-	promptly and directly delivered to a separate
					political organization
			ĺ		If none, enter -0-
(1)					
(1)					
(2)					
(2)					
(3)					
(0)					
(4)			j		
(*/	~ ~~~				
(5)					
(4)				<u> </u>	
(6)					
(0)			ļ		

Page	2
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	II . A	Complete if the organization section 501(h)).	is exempt u	nder section 50	1(c)(3) and file	d Form 5768 (ele	ction under
A Ch	neck 🗠	if the filing organization belong address, EIN, expenses, and s		liated group memb	er's name,		
B Cł	neck 🏲	if the filing organization check		·			
		Limits on Lobby				(a) Filing	(b) Affiliated
		(The term "expenditures" me	ans amounts p	paid or incurred.)		organization's totals	group totals
1a	Total le	obbying expenditures to influence	public opinion (grass roots lobbyi	ng)		
b	Total le	obbying expenditures to influence	a legislative boo	dy (direct lobbying			
С		obbying expenditures (add lines 1a	and 1b)				
d		exempt purpose expenditures	•	•			
e		exempt purpose expenditures (add					
f	colum	ing nontaxable amount. Enter t	he amount fro	om the following	table in both		
	If the a	mount on line 1e, column (a) or (b) is:	The lobbying r	nontaxable amount	IS.		
	Not ove	er \$500,000	20% of the am	ount on line 1e			
ļ		00,000 but not over \$1,000,000	7	15% of the excess of			
}		,000,000 but not over \$1,500,000		10% of the excess of			
		,500,000 but not over \$17,000,000		5% of the excess or	/er \$1,500,000.		
		7,000,000 roots nontaxable amount (enter 25	\$1,000,000.	····		 	
g h		nots nontaxable amount (enter 25 act line 1g from line 1a. If zero or le	•				
- ''		act line 1f from line 1c. If zero or les			• • •		
j	If ther	e is an amount other than zero	on either line		-	1	Yes No
	report	ing section 4911 tax for this year?				· · · · · · ·	
	(Son	ع-۱۰ ne organizations that made a sec		eriod Under Sec		of the five column	
				uctions for lines		of the five column	ns below.
		See the	separate instr		2a through 2f.)		ns below.
	Cal	See the	separate instr	uctions for lines	2a through 2f.)	(d) 2018	ns below.
2a		See the Lobbying endar year (or fiscal year	separate instructions	uctions for lines	2a through 2f.) veraging Period		
2a b	Lobby	Lobbying endar year (or fiscal year beginning in)	separate instructions	uctions for lines	2a through 2f.) veraging Period		
	Lobby Lobby (150%	Lobbying endar year (or fiscal year beginning in) ring nontaxable amount ring ceiling amount	separate instructions	uctions for lines	2a through 2f.) veraging Period		
b	Lobby Lobby (150% Total I	See the Lobbying endar year (or fiscal year beginning in) ring nontaxable amount ring ceiling amount of of line 2a, column (e))	separate instructions	uctions for lines	2a through 2f.) veraging Period		
b c	Lobby (150% Total I Grass Grass	Lobbying endar year (or fiscal year beginning in) fing nontaxable amount fing ceiling amount of line 2a, column (e)) obbying expenditures	separate instructions	uctions for lines	2a through 2f.) veraging Period		
b c d	Lobby (150% Total I Grass Grass (150%	Lobbying endar year (or fiscal year beginning in) ring nontaxable amount ring ceiling amount of line 2a, column (e)) obbying expenditures roots nontaxable amount roots ceiling amount	separate instructions	uctions for lines	2a through 2f.) veraging Period		

	ch "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(8	3)	(b)
scrip	otion of the lobbying activity.	Yes	No	Amount
	During the year, did the filing organization attempt to influence foreign, national, state, or local			1
	egislation, including any attempt to influence public opinion on a legislative matter or			
	referendum, through the use of			
	Volunteers?			
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
	Media advertisements?			
	Mailings to members, legislators, or the public?			
	Publications, or published or broadcast statements?	L		
	Grants to other organizations for lobbying purposes?		ļ	
-	Direct contact with legislators, their staffs, government officials or a legislative body?			
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<u> </u>	
	Other activities?		 -	
•	Total. Add lines 1c through 1i			<u> </u>
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
	If "Yes," enter the amount of any tax incurred under section 4912		1	\
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			ļ
		1/5)		ction
-11/13/1	501(c)(6).	1(0),	01 36	cuon
				Yes
1	Were substantially all (90% or more) dues received nondeductible by members?			1
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		•	2 ×
	Did the organization agree to carry over lobbying and political campaign activity expenditures from the		 vear?	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."	H (D)		t III-A, line 3
	Dues, assessments and similar amounts from members		1	<u> </u>
	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of		1.
а	Current year		2a	
b	Carryover from last year		2Ь	
_	Total		2c	
	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of			Į
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	yıng		1
	and political expenditure next year?	٠	4	<u> </u>
				į.
5	Taxable amount of lobbying and political expenditures (see instructions)		5	

Schedule C (Form	990 or 990-EZ) 2018 Page 4
Partity	Supplemental Information (continued)
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Schedule C (Form 990 or 990-EZ) 2018

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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.

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

OMB No. 1545-0047



	mont Association of Realtors			265065
Pa				Accounts.
	Complete if the organization answered '	~~~~~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	<u></u>	
		(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 Did the organization inform all donors and donor	advisors in views that the assets b	1	Japan advised
5	funds are the organization's property, subject to the	<u> </u>		
6	Did the organization inform all grantees, donors, a only for charitable purposes and not for the bene conferring impermissible private benefit?	• •	for any o	
	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	ition or education) 🔲 Preservation o	of a histo	orically important land area
	Protection of natural habitat	☐ Preservation o	of a certi	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization hi	eld a qualified conservation contribution	on in the	
	easement on the last day of the tax year		[Held at the End of the Tax Year
а	Total number of conservation easements			2a
р	Total acreage restricted by conservation easemen		,	2b
C	Number of conservation easements on a certified			2c
d	Number of conservation easements included in historic structure listed in the National Register	(c) acquired after 7/25/06, and not	on a	2d
3	Number of conservation easements modified, trantax year ▶	sferred, released, extinguished, or ter	minated	by the organization during the
a	Number of states where property subject to conse	anyatian apagimant is lighted by		
4 5	Does the organization have a written policy re		chaction	handling of
3	violations, and enforcement of the conservation ea		, , .	_
6	Staff and volunteer hours devoted to monitoring, inspe-	ecting, handling of violations, and enforcing	ng conse	ervation easements during the year
7	Amount of expenses incurred in monitoring inspectii	ng, handling of violations, and enforcing	conser	vation easements during the year
8	Does each conservation easement reported on line	e 2(d) above satisfy the requirements o	f section	n 170(h)(4)(B)(i)
_	and section 170(h)(4)(B)(ii)?			Yes 🗌 No
9	In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text	of the footnote to the organization's fir		
	organization's accounting for conservation easem		- 041	0: :1
	Organizations Maintaining Collection Complete if the organization answered	"Ves" on Form 000 Part IV line 8	r Other	Similar Assets.
1a				us statement and balance above
Id	works of art, historical treasures, or other simila public service, provide, in Part XIII, the text of the	ir assets held for public exhibition, e-	ducation	n, or research in furtherance of
b				
	works of art, historical treasures, or other simila public service, provide the following amounts rela-	ir assets held for public exhibition, e	ducation	n, or research in furtherance o
	(i) Revenue included on Form 990, Part VIII, line 1			&
	(ii) Assets included in Form 990, Part X	· · ·	•	▷ \$ ▷ \$
2	If the organization received or held works of an	t historical treasures or other cimile	r seest	e for financial dain provide the
<i>د</i> .	following amounts required to be reported under s			a for imanolal yain, provide the
а	Revenue included on Form 990, Part VIII, line 1	,		▶ \$
b	Assets included in Form 990, Part X .			. 🏲 💲

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۳	aq	8	4

Part	Organizations Maintaining	Colle	ections of A	Art, Hist	torical T	reasures,	or Ot	her Similar Ass	ets (c	ontin	ued)
3	Using the organization's acquisition, a collection items (check all that apply)										
а	Public exhibition			તા	T Loan	or exchange	a nrog	rame			
	Scholarly research				Other						
	☐ Preservation for future generations	;			00.						
4	Provide a description of the organizat		collections a	ind expla	in how t	hey further t	he org	anization's exem	pt pur	pose	in Part
	XIII.			•		•	_				
5	During the year, did the organization	solicit	or receive	donation	s of art,	historical tre	easure	s, or other simila	r		
	assets to be sold to raise funds rather			ined as p	oart of the	e organizatio	on's co	llection?		Yes [☐ No
Part											
	Complete if the organization	ansv	vered "Yes'	' on For	m 990, F	Part IV, line	9, or	reported an am	ount o	n Fo	rm
	990, Part X, line 21										
1a	Is the organization an agent, trustee,	custo	odian or oth	er intern	-				_		
	included on Form 990, Part X?								Ц.	Yes	No
b	If "Yes," explain the arrangement in Pa	art XIII	and comple	ete the to	llowing to	apie.		Α,	nount		
_	Beginning balance						10		- Iouric		
c d	Additions during the year		• • • •	• • •			10				
e	Distributions during the year						16				
f	Ending balance						11				
2a	Did the organization include an amount								? 🗍	Yes	□ No
b	If "Yes," explain the arrangement in P										
. Par											
	Complete if the organization										
		(a) (Current year	(b) Pri	or year	(c) Two year	s back	(d) Three years back	(e) Fo	ur year	s back
1a	Beginning of year balance								ļ		
þ	Contributions	<u> </u>							ļ		
С	Net investment earnings, gains, and								}		
	losses	ļ				 			<u> </u>		
a	Grants or scholarships Other expenditures for facilities and	ļ				 			 		
е	programs										
f	Administrative expenses .	 				 			 		
g g	End of year balance					 			 		
2	Provide the estimated percentage of	the cu	rrent year er	nd baland	e (line 1	a, column (a)) held	as:			
а	Board designated or quasi-endowme				,		•				
b	Permanent endowment >	%									
С	Temporarily restricted endowment		%								
	The percentages on lines 2a, 2b, and										
3a	Are there endowment funds not in the	e pos	session of th	ne organ	zation th	at are held	and ac	Iministered for th	е		
	organization by.								r		s No
	(i) unrelated organizations .							• • • •	3a		-
b	(ii) related organizations		· · · · ·	 ! ==		· · · · ·			3a(
4	Describe in Part XIII the intended use								_3t	<u> </u>	J
i e i	, r			3 6110		41103					
	Complete if the organization			" on Fo	m 990	Part IV line	112	See Form 990	Part \	(line	10
	Description of property		(a) Cost or of			or other basis		Accumulated .		ook va	
	,		(investm		1	other)		epreciation	,0, 0		.00
1a	Land . , , .	,	8	7,108.						87.	108.
b	Buildings		···	1,460.				181,223.			237.
c	Leasehold improvements .				T					<u>_</u>	
d	Equipment		3	2,246.				29,969.		2,	277.
е	Other	,									
Total	. Add lines 1a through 1e. (Column (d)	nust e	equal Form 9	90, Part	X, colum	n (B), line 10	(c.)	🔊		399,	622.

CECAVIL	Investments - Other Securi	ities.			Page 3			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.							
	(a) Description of security or ca (including name of securi		(b) Book value		i of valuation, year market value			
(1) Financial	derivatives			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
(2) Closely-h	neld equity interests							
		~~~~~~~						
(A)								
(B)								
(C)								
(D) (E)				<u></u>				
(F)								
(G)	***************************************							
(H)				· · · · · · · · · · · · · · · · · · ·				
Total. (Column (	b) must equal Form 990, Part X, col. (B) line 1.	2) ▶		1				
PartiVIII	Investments-Program Re	lated.						
	Complete if the organization	answered "Yes" on Fo	rm 990, Part IV, line	11c. See Form 9	90, Part X, line 13.			
	(a) Description of investin	ent	(b) Book value		d of valuation -year market value			
(1)								
(2)	<u></u>		<u> </u>					
(3)								
(4)			<del>                                     </del>					
(5) (6)			+					
(7)								
(8)			<del> </del>					
(9)			1.					
	(b) must equal Form 990, Part X. col. (B) line 1	3) ▶						
PartiX	Other Assets.							
	Complete if the organization		rm 990, Part IV, line	11d. See Form 9				
		(a) Description	· · · · · · · · · · · · · · · · · · ·		(b) Book value			
(1)								
(2)								
(3)								
(5)	······································	~-,·,,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,						
(6)			<del></del>		<del></del>			
(7)								
(8)								
(9)								
Part X	Other Liabilities. Complete if the organization		rm 990, Part IV, line	11e or 11f. See l	Form 990, Part X,			
1.	line 25.  (a) Description of liability	(b) Book value						
	income taxes	(N) DOOK VAIGE						
(2)Credi			678.					
	ll liabilities		0.					
	liabılıties	74,	236.					
(5)								
(6)								
(7)								
(8)								
(9) Table (0)	A)	07 l h						
	(b) must equal Form 990 Part X, col (B) line :		914.		1- Mark			
	or uncertain tax positions. In Part XII is liability for uncertain tax positions							

Rant			-	Return.	
	Complete if the organization answered "Yes" on Form 990,		V, line 12a.	<u>.</u>	
1	Total revenue, gains, and other support per audited financial statements			1	966,758.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		,	.	
а	Net unrealized gains (losses) on investments	2a	-14,951.		
b	Donated services and use of facilities	2b		.	
C	Recoveries of prior year grants	2c			
ď	Other (Describe in Part XIII.)	2d	44,086.		
е	Add lines 2a through 2d		· · · · .	2e	29,135.
3	Subtract line 2e from line 1	i ·		3	937,623,
4	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	4a			
ь	Other (Describe in Part XIII.)	46			
ç	Add lines 4a and 4b	101		4c	
5 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		, ,	5	937,623.
Para				r Retui	m.
	Complete if the organization answered "Yes" on Form 990,	Part	v, line 12a.		707 510
1 2	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	• •		1	797,519.
	Donated services and use of facilities	2a	1		
a b		2b		<u>`</u>	
c	Other losses	2¢			
d	Other (Describe in Part XIII )	2d	44,086.		
e	Add lines 2a through 2d	24	44,000.	2e	44,086.
3	Subtract line 2e from line 1			3	753,433.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	ĺ	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 expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ie 18.		5	753,433.
Pala	Supplemental Information.				
	te the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part				
Pt X	I, Line 2d: 44,086 of expenses are reflected on Po	age	9, revenue.		
Pt X	II, Line 2d: 44,086 of expenses are refelcted on	Page	9, revenue.	~~~~	
	······································				
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Schedule D (For	m 990) 2018	Page 5
Part XIIII	Supplemental Information (continued)	

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SCHEDULE O (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.

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047
2018

Open to Public Inspection

Name of the organization Employer identification number Vermont Association of Realtors 03-0265065 Pt VI, Line 6: Members of the Vermont Association of Realtors, Inc. are licensed real estate agents who apply for membership to take advantage of business tools, education, information and code of ethics processes. 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 annually by all board members. Board members announce when they have a conflict and recuse themselves from participation in discussion or voting. Pt VI, Line 15a: A review of the CEO is conducted by the president, president-elect and past president and is based on industry and national compensation studies, compensation is negotiated with the executive committee, which then goes to the full board for approval. Pt VI, Line 15b: The president's stipend is set during the budgeting 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 office. Pt IX, Line 24e: Description: Onlines services Total: \$1,405 Program services: \$0 Management and general: \$1,405 Fundraising: \$0 Description: RAMCO Total: \$8,622 Program services: \$0

Management and general: \$0