294931	7009705
	OMB No 1545-0047

Return of Organization Exempt From Income Tax

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

2019

Open to Public

Department of the Treasury Internal Revenue Service

(Rev January 2020)

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

	110111010	riue cei vice	- do to www.nasgovn bimoso for mandenona and the fates		110	mopeotion		
<u>A</u>	For the	2019 calend	dar year, or tax year beginning , 2019, and endi	ng		, 20		
8	Check if	f applicable	C Name of organization Vermont Association of Realtors		D Employ	er identification number		
	Address	change	Doing business as Vermont Realtors		03-026	55065		
	Name cl	hange	Number and street (or P O box if mail is not delivered to screet address)	Room/suite	E Telepho	Telephone number		
	Initial ref	turn	148 State Street		(802)229-0513			
	Final reti	urn/terminated	City or tovin, state or province, country, and ZIP or foreign postal code					
	Amende	ed return	Montpelier, VT 05602		G Gross re	eceipts \$ 981,341.		
	Applicat	tion pending	F Name and address of principal officer	H(a) is inis a gr	oup return for s	subordinates? ☐ Yes 🗵 №o		
			Helen Hossley, 148 State Street, Montpelier, VT 05	602 H(b) Are all s	ubordinates	included? Yes No		
ī_	Tax-exe	mpt status	501(c)(3)	f 'No,"	attach a list	(see instructions)		
J	Website	e. ► MMM . A	ermontrealtors.com	H(c) Group e	xemption n	umber ▶		
		organization 🔀	Corporation ☐ Trust ☐ Association ☐ Other ►	nation 1945	M State o	flegal domicile VT		
P	art I	Summa						
	1	Briefly des	cribe the organization's mission or most significant activities 🥶 🖽	SICK OF VERMONT REALI	ORS IS TO SE	TRVE ITS MEMBERS BY PROVIDING		
CB			ES THAT HELP THEM DELIVER REAL ESTATE SERVICE					
Jan			FESSIONAL MANNER; AND TO ADVOCATE FOR THE RIGHT			ERS IN VERMONT.		
Je 13	2	Check this	box > 🗌 if the organization discontinued its operations or dispose	d of more than	25% of it	s net assets.		
ő	3	Number of	voting members of the governing body (Part VI, line 1a)		3	17		
අජ	4	Number of	independent voting members of the governing body (Part VI, line 1	b)	4	17		
Activities & Governance	5	Total numl	per of individuals employed in calendar year 2019 (Part V, line 2a)		5	3		
Ę	6	Total numi	per of volunteers (estimate if necessary)		6	17		
Ac	7a	Total unrel		7a	11,050.			
	b		ted business taxable income from Form 990-T, line 39		7b	G		
				Prior Yes	r	Current Year		
0	8	Contribute	ons and grants (Part VIII, line 1h)	672	902.	686,347.		
ä	9	Program s	ervice revenue (Part VIII, line 2g)	277	562.	264,163		
Revenue	10	Investmen	t income (Part VIII, column (A), lines 3, 4, and 7d)	9	395.	4,763.		
Œ	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		236.	26,068.		
	12	Total rever	nue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	937	623.	981, 34 L.		
	13	Grants and	d similar amounts paid (Part IX, column (A), lines 1-3)					
	14	Benefits pa	aid to or for members (Part IX, column (A), line 4)					
Ś	15	Salaries, of	ther compensation, employee benefits (Part IX, column (A), lines 5-10)	308	788.	341.4_7.		
1.Se	16a	Profession	al fundraising fees (Part IX, column (A), Iline 11e)					
Expenses	b	Total fund	raising expenses (Part IX, column (D), line 25) 🕨 0.					
Ω.	17	Other expe	enses (Part IX, column (A), lines 11a-11d, 11f-24e)	444	645.	559,090.		
	18	Total expe	nses Add lines 13-17 (must equal Part IX, column (A), line 25)	753	, 433.	900,517.		
	19	Revenue le	ess expenses. Subtract line 18 from line 12	184	190.	80,824.		
Ses.				Beginning of Cur		End of Year		
Assets or disalances	20	Total asse	ts (Part X line 16)	1,286	,554.	1,389,479.		
Assed A Bal	21		ities (Part X, line 26)		, 932.	960,371.		
Fet F	22	Net assets	or fund balances. Subtract line 21 from line 20	306	,622.	429,108.		
	art II.		ire Block					
								

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer		Dat	e						
Here	Stephanie Corev, Presi Type or pnnt name and title	aent								
Paid	Print/Type prepare's name Lee A. White CPA, PFS, CFP	Preparer s signature Rea A. White CPA	Date 11/16/2020	Check if self-employed	PTIN P00750923					
Preparer Use Only		Firm	Firm's EIN > 04-3366373							
Ose Offiny	Firm's address ▶ 86 SUMMER ST.	Pho	Phone no (802) 476-6191							
May the IRS discuss this return with the preparer shown above? (see instructions)										

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

REV 10/27/20 PRO

Form **990** (2013)



4d Other program services (Describe on Schedule O)
(Expenses \$ including grants of \$

4e Total program service expenses ▶

) (Revenue \$

	△ 1		~
	" MOONING	AT MONITINGS	* COCCIIIOC
Part IV	CHECKISI	of Required	* 34 - F 18-71 F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

		- 1	1	
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		×
Ą	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 98-19? 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			
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	6		<u>×</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> 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	9		
J	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 donor-restricted endowments or in 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, 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	115		×
C	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	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	iid		×
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	111		×
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		×
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		Х
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? It "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		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		×
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		Y
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		×
20a	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 1? If 'Yes," complete Schedule I, Parts I and II	21		×
	13 THE 4 O POT TO BE DO	-		

Parti	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	×	
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		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		ļ
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 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		×
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) 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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	2 6a		×
þ	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV .	285	<u> </u>	×
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? 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		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	<u> </u>	×
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		ļ
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	×	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		,	<u>, []</u>
			Yes	No
ta b	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 8 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	~-1	,	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	- * · · · ·		

L CHILL	3 Statements Regarding Other Ind Fillings and Lax Compliance (continued)		,	
0	Foton the mumber of excitores assessed as Fig. W.C. Towns (In) of M.C. T.	डिम स्ट्रट	Yes	No
Za.	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	2 5 9 0	35	5 1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		MEET:	2363
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	77.20		22.16
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	امرتناط X	د ملتشد،
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	×	
4a	At any time during the calendar year did the organization have an interest in, or a signature or other authority ov			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×
b	If "Yes," enter the name of the foreign country ▶	The state of the s	2 4	19.60
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBA	(R) 學證	200	13.
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. 5a		×
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<u> </u>	×
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	. <u>5c</u>	 	ļ
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to 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 gifts were not tax deductible?	or 6b		
7	Organizations that may receive deductible contributions under section 170(c).	TO SERVICE	7	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good and services provided to the payor?	ds 7a	100	23%
b	If "Yes," did the organization notify the dorior 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 w	as		
	required to file Form 8282?	. 7c	ļ	ļ
đ	If "Yes," indicate the number of Forms 8282 filed during the year		372	1000
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract		ļ	ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		 	
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as require if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-		 	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by t	<u> </u>	4,393	58.7
Ū	sponsoring organization have excess business holdings at any time during the year?	. 8	3wZ.	
9	Sponsoring organizations maintaining donor advised funds.	10.38	3 E	1755
а	Did the sponsoring organization make any taxable distributions under section 4966?	. 9a	31 -45-2	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0f	Section 501(c)(7) organizations. Enter.	\$1.00 m	100	1
a	Initiation fees and capital contributions included on Part VIII, line 12		1	18.5
į)	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		1317 2300	27.13
11	Section 501(c)(12) organizations. Enter:	il in	1	13.03
a •	Gross income from members or shareholders		3	13.7
Ġ	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	\$2.75		3
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041	7 12a		3,20
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	YVES	200	b 504
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			7
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	133,7	15.3
	Note: See the instructions for additional information the organization must report on Schedule O.	7. F. F. T. T.	7,457	363
ä	Enter the amount of reserves the organization is required to maintain by the states in which		3	1 - 40 m. 9 h.
	the organization is licensed to issue qualified health plans		4370	3
С	Enter the amount of reserves on hand		1.18	2012
14a	Did the organization receive any payments for indoor tanning services during the tax year?			×
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O			ļ
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration	1	-	
	excess parachute payment(s) during the year? '	15	<u> </u>	-
16	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income.		37.	
	If "Yes " complete Form 4720. Schedule O	<u> </u>	NOW.	1.25

- C. I. J. O. A.				
Rarti	Governance, Wanagement, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O Check if Schedule O contains a response or note to any line in this Part VI			
Section	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . 1a 17			
	If there are material differences in voting rights among members of the governing body, or	į		•
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule C.	į		
þ	Enter the number of voting members included on line 1a, above, who are independent . [1b] 1/7	į		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		×
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?.	3		×
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		×
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		×
6	Did the organization have members or stockholders?	6	Ж	
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,			
	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?	d8	×	
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 on 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		_ ×_
þ	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	×	
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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	×	<u> </u>
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40		
40	describe in Schedule O how this was done	12c	×	
13 14	Did the organization have a written whistleblower policy?	13		×
15	Did the process for determining compensation of the following persons include a review and approval by	1-4		 ^ -
	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	×	<u> </u>
	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 participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	L	<u> </u> J
Secti	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 (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. Own website Another's website Upon request Other (explain on Schedule O)	T (Sed	ction	501(c)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	of inte	rest p	oolicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	>	

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

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

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

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

×				((C)					
(A) Name and title	(8) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organization
(1) Barbara Trousdale	1.00									
Treasurer		×		×		<u> </u>	Ĺ			<u> </u>
(2) Alison Cummnqs Past President	1.00	×		×						
(3) Sarah Peluso Director	1.00	×								
(4) Nancy Liberatore Director	1.00	×								
(5)Lisa Kelly Director	1.00	×								
(6) Mike Hickey Director	1.00	×								
(7) Brian Armstrong Director	1.00	×								
(8) Claudia Harris Director	1.00	×								
(9) Robbi Holmes Director	1.00	×								
(10)Stephanie Corrie President	1.00	×		×				12,000.		
(11) Patrice Schneider Director	1.00	×								
(12)Mark Montross Vice President	1.00	×		×						
(13) Steve Poulin Director	1.00	×								
(14) Kathy Sweeten CEO	40.00			×						

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A) Name and title	(B) Average hours per week	(C) Position (do not check more than o box, unless person is both officer and a director/trust						(D) Reportable compensation from the	(E) Reportable compensation from related	ıtıon	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizati (W-2/1099-1	ons	from the organization and related organizations
(15) Helen Hossley	40.00			х			×	70 676			
Former Ex. Director (16) Mark Roden	1.00		<u>!</u>	_	<u> </u>		 	79,676.			
Director		×									
(17) Kendall McCausland NAR	1.00	×		×							
(18) Ken Libby	1.00	×		×							
NAR (19)				1	-	-					
(20)					 		-				
(21)			-			i					
(22)			-								
(23)						 	-				
(24)											
(25)											
1b Subtotal	• • • •,		٠	٠.			<u></u>	91,676.			
c Total from continuation sheets to Part							₽	01 676			
d Total (add lines 1b and 1c). 2 Total number of individuals (including but reportable compensation from the organic						above	₽ e) w	91,676. The received more	e than \$10	0,000	of
3 Did the organization list any former	officer, dire						mpl	loyee, or highe	st comper	nsated	
employee on line 1a? If "Yes," complete 4 For any individual listed on line 1a, is the organization and related organizations individual .	sum of re	porta	ble	con	npe	nsatio					
5 Did any person listed on line 1a receive of for services rendered to the organization									tion or indi	ividual	4 ×
Section B. Independent Contractors		331115			100	0.00	0, 0	saon porcon .		<u> </u>	<u> </u>
Complete this table for your five high compensation from the organization. Rep											
(A) Name and business add	Iress							(B) Description of ser	vices		(C) Compensation
2 Total number of independent contractor received more than \$100,000 of compens		_					o th	nose listed abov	ve) who		- y 34m

Form 900 (2019)

**Check if Schedule O cont

		Check if Schedule	O co	ntains a re	spon	se or note to a	ny line in this Pa	urt VIII		🔲
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts ts	1a	Federated campaign	ns .		1a			SACKA CARRELL	第二条 新向部	A STANDARD STANDARD
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	.`		1b	676,347.				
ع ق	С	Fundraising events			1c					The Later of the Control of the Cont
fts,	ď	Related organization			1d					
<u>15</u> <u>18</u>	е	Government grants			1e					
Si E	f	All other contribution			 					
is is	•	and similar amounts no			1f	10,000.				
the bu	_				-	10,000.				
E O	g	g Noncash contributions included in lines 1a-1f 1g \$			œ.			THE SACTOR AND A	网络沙沙沙	
S S	h	Total. Add lines 1a-			19		Jeza z Menta Tellan	P. S. A. L.		
	<u>h</u>	Total. Add lines Ta-	-11		•	. 🌣	686,347.	Washington Address	The first of the first of the first	
a)		WIDD Dales - A				Business Code		P.W. Call Miles St. V.	in the state of the	CERCY YARES
3	2a	VIPD Education				541900	148,256.	148,256.	0.	0.
gram Ser Revenue	b	Meetings & Ev				541900	19,310.	19,310.	0.	0.
6 6	C	Base Package				541900	74,717.	74,717.	0.	. 0.
e v	d	Issue Mobiliz	atic	n		541900	21,880.	21,880.	0.	0.
Program Service Revenue	e									
ā.	. f	All other program se	revenue .	•						
	g	Total. Add lines 2a-	-2i .			▷	264,163.		通過中央機構	克勒斯马勒尼亚
	3	Investment income	(ıncl	uding divi	dends	s, interest, and				
		other similar amoun					4,763.	0.	0.	4,763.
	Ą	Income from investr	•				· · · · · · · · · · · · · · · · · · ·			
	5	Royalties								·
			[(i) Rea	i	(ii) Personal	STORY AND AND		1022 31337	SACONSERVO
	6a	Gross rents .	6a	11,(250					
	b	Less rental expenses	6b		550.					
	C	Rental income or (loss)		11,0	250					
	d	Net rental income o			750.		11,050.	STREETH FOR THE STREET STREET	FREE TO SEE SEE SEE SEE	1882 ACASTO 121 P. 1885 1
ĺ			1 (105)	(i) Securit		(ii) Other	11,030.	0.	11,050.	0.
	7a	Gross amount from		(i) Gecum		(ii) Other				
		sales of assets		{						
_	_	other than inventory	7a		<u> </u>					
Revenue	b	Less. cost or other basis	·							
,er		and sales expenses	7i2	ļ						
é	C	Gain or (loss) .	7c	<u> </u>		<u> </u>		STATE OF THE STATE		
	d	Net gain or (loss)			<u>. </u>	🔛				
Other	8a	Gross income from		ndraising						
0		events (not including								
		of contributions rej		d on line						
		1c). See Part IV, line	e 18		8a				1000 1000 1000 1000 1000 1000 1000 100	
	b	Less: direct expens	es .		8b					
	С	Net income or (loss)) from	fundraisin	g eve	nts . 🗈				
ļ	9a	Gross income f	from	gaming	Ī		THE PARTY	\$7.4XTT#165.543T		
		activities. See Part I			9a					
	b	Less: direct expens			9b					17232
	, c	Net income or (loss)				es	North Was a end over 10 Miles and year	Charles wit macapitalisticate and	Professional Charles	ANT HAT BEEN THE THE PERSONS
	10a	Gross sales of in				<u> </u>	AUTO AND	ent i i de l'altaire	ACTENA COMBANI	LOS TRANSPORTER DE LA COMPANION DE LA COMPANIO
	102	returns and allowan		ory, less	100					
	h.				10a		一种企业的		HE THOUGH	NEED AND ASSESSED.
	b	Less: cost of goods				brv. D	MESSAGE RESIDEN	THE SHIETS OF THE	西洋电影会员要高加	海野节 清晰。积约
	С	Net income or (loss)	HOLU	sales of it	Meuro		E decision of the second section	t entitle to be the most to the territory	material in Heart on 1. 40 - all	1.75 A 5 7 8 47 45 15 15 7 C
sn	١					Business Code	2 20 20 4 Marin	\$250.05854户,第	THE ATTENDED	国际民共產業的
Ded The	11a	Non-dues inco	шe			900099	9,950.	9,950.	0.	0.
scellaneo Revenue	b	FPC Travel				900099	3,000.	3,000.	0.	0.
cel ev	С	Misc. Income				900099	2,068.	2,068.	0.	0.
Miscellaneous Revenue	d	All other revenue								
2	e	Total. Add lines 11a				🔊	15,018.	的更新地区和共	的是教育的特	REVENUE SE
	12	Total revenue. See	ınstr	uctions		🔊	981,341.	279,181.	11,050.	4,763.

Pan	Ki Statement of Functional Expenses				rage 117
	n 501(c)(3) and 501(c)(4) organizations must comp			must complete colu	ımn (A)
	Check if Schedule O contains a response	or note to any line	e in this Part IX .		
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members			20世紀 1995年 1	14、14年15年16年17
5	Compensation of current officers, directors, trustees, and key employees	79,676.	79,676.	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	191,677.	191,677.	0.	0.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	37,164.	. 37,164.	0.	0.
10	Payroll taxes	32,910.	32,910.	0.	C.
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
Ç	Accounting	11,358.	0.	11,358.	0.
d d	Lobbying	ļ 	MESSER COMMES ALTERA	MARKET CANDA	
e f	Investment management fees		A SELVE WAS THE STREET, M.	Contract and and the contract they	
g 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	3,447.	3,447.	0.	0.
13	Office expenses	6,895.	0.	6,895.	0.
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	42,625.	42,625.	0.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	17,584.	17,584.	0.	0.
20	Interest	17,801.	17,801.	0.	0.
21	Payments to affiliates	17 510	17 510		
22 23	Depreciation, depletion, and amortization . Insurance	17,519.	17,519.	0.	0.
		3,828.	3,828.	0.	0.
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses on 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	671.	671.	0.	0.
b	Credit card fees	32,778.	32,778.	٠0.	0.
C	Dues & subscriptions	5,019.	5,019.	0.	0.
đ	Postage	229.	229.	0.	0.
9	Ail other expenses	399,336.	399, 336.	0.	()
<u>25</u> 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joinf costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	900,517.	882,264.	18,253.	0
	following SOP 98-2 (ASC 958-720)	•		İ	i ı

PanoX Balance Sheet

					(A) Beginning of year		(B) End of year
_	1	Cash - non-interest-bearing			739,058.	1	785,487.
	2	Savings and temporary cash investments				2	518.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			7,321.	4	38,251.
	5	Loans and other receivables from any current of trustee, key employee, creator or founder, subst controlled entity or family member of any of thes	tantial cor	ntributor, or 35%		0 (M	
	6	Loans and other receivables from other disquaunder section 4958(f)(1)), and persons described				6	是在张四次的
ţ	7	Notes and loans receivable, net			6,595.	7	
Assets	8	Inventories for sale or use			111.	8	111.
ä	9	Prepaid expenses and deferred charges .			13,270.	9	
	10a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a	610,814.			
	b	Less, accumulated depreciation	10b	228,711.	399,622.	10c	382,103.
	11	Investments—publicly traded securities			120,577.	11	183,009.
	12	Investments—other securities See Part IV, line				12	
	13	Investments- program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add imes 1 through 15 (must equa			1,286,554.	16	1,389,479.
	17	Accounts payable and accrued expenses .			19,253.	17	138,276.
	18	Grants payable			505 474	18	533,870.
	19 20	Tax-exempt bond liabilities			605,474.	19	333,870.
	21	Escrow or custodial account liability. Complete				21	
Liabilities	22	Loans and other payables to any current or trustee, key employee, creator or founder, subst controlled entity or family member of any of these	r former tantıal co	officer, director, ntributor, or 35%	紧紧紧紧	· 1000	PARTY PROPERTY.
Ľ.	23	Secured mortgages and notes payable to unrela	•		276,291.	22	264,598.
-	24	Unsecured notes and loans payable to unrelated			270,231.	24	204, 5.70.
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines	payables	to related third			
		of Schedule D	'		78,914.	25	23,621.
	26	Total liabilities. Add lines 17 through 25 .	<u> </u>		979,932.	26	960,371.
secu		Organizations that follow FASB ASC 958, cha and complete lines 27, 28, 32, and 33.	ck here	×X		a Mil	
ala	27	Net assets without donor restrictions			306,622.	27	429,108.
Ω	28	Net assets with donor restrictions				28	
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 9 and complete lines 29 through 33.	958, chec	k here ▶ 🗌	是語名	沒	
O S	29	Capital stock or trust principal, or current funds				29	
Set	30	Paid-in or capital surplus, or land, building, or e				30	
r.	31	Retained earnings, endowment, accumulated in				31	
et	32				306,622.	32	429,108.
2	33	Total liabilities and net assets/fund balances .		<u> </u>	1,286,554.	33	1,389,479.

Page	1	2

	Reconciliation of Net Assets			rage ra
	O Constitution			
	Check if Schedule O contains a response or note to any line in this Part XI	~		<u>. </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		L,341.
2	Total expenses (must equal Part IX, column (A), line 25)	2		0,517.
3	Revenue less expenses. Subtract line 2 from line 1	3	98	0,824.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4	306	6,622.
5	Net unrealized gains (losses) on investments	5	2,	2,036.
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8	19	9,626.
9	Other changes in net assets or fund balances (explain on Schedule O)	9		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))	10	429	9,108.
Peli	Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			. []
			Y	es No
1	Accounting method used to prepare the Form 990 Cash Accrual Other		STATE OF	Mr. Street
	If the organization changed its method of accounting from a prior year or checked "Other,"	explain	in la	
	Schedule O	onp.a	7	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were co	 mpilod		73 7
	reviewed on a separate basis, consolidated basis, or both.	mphed	U 2 2 2 2 5 6 1	¥.~.
	Separate basis Consolidated basis Both consolidated and separate basis			34
h	Were the organization's financial statements audited by an independent accountant?		2b	30.7
V	- ,			27584 12-12-1
	If "Yes," check a box below to indicate whether the financial statements for the year were aud separate basis, consolidated basis, or both.	iitea on	a gran	
	·			建
	Separate pasis Consolidated basis Both consolidated and separate basis		21075	150
C	if "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or		i !	
	the audit, review, or compilation of its financial statements and selection of an independent account		2c	×',
	If the organization changed either its oversight process or selection process during the tax year,	explain	on large	** 1 - 5
	Schedule O.		1	· \\
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set f	orth in t	he	i
	Single Audit Act and OMB Circular A-133?		3a	×
Ċ	If "Yes," did the organization undergo the required audit or audits? If the organization did not ur			
	required audit or audits, explain why on Schedule C and describe any steps taken to undergo such	audits .	35	
			C (008 :00.0

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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

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-FZ, 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 50 i(h)). Complete Part II-B. Do not complete Part II-B.

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

• Se	ection 501(c)(4), (5), or (6) orga	inizations Complete Part III			
Name (of organization			Employer ider	ntification number
Verm	ont Association of	f Realtors		03-02650	065
Part	Complete if the	e organization is exempt u	nder section 501(c) or is a section 527 o	organization.
1	Provide a description of definition of "political can	the organization's direct and npaign activities")	indirect political ca	impaign activities in Part	IV. (see instructions for
2	Political campaign activity	y expenditures (see instructions	s)		
_3		cal campaign activities (see inst			
Part		e organization is exempt u			
1		excise tax incurred by the orgai)
2		excise tax incurred by organiza)
3	•	ed a section 4955 tax, did it file	Form 4720 for this y	ear?	. Yes Mo
4a	Was a correction made?				. Yes No
c स्टब्स	If "Yes," describe in Part			a) F04	(-)(0)
(En	· · · · · · · · · · · · · · · · · · ·	e organization is exempt u			(C)(3).
1	activities	ly expended by the filing orga		` ⊳ \$; ;
2	Enter the amount of the 527 exempt function acti	filing organization's funds convities	tributed to other org		
3	Total exempt runction of line 17b	expenditures. Add lines 1 and		on Form 1120-POL, ▶ \$	
4	Did the filing organization	file Form 1120-POL for this ye	ear?		Yes No
5	organization made payme the amount of political co	ses and employer identification ents. For each organization listed ontributions received that were fund or a political action comm	ed, enter the amount promptly and directly	paid from the filing organ 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)					

Ρį	ΙŢ	ľΑ		Complete if the organization section 501(h)).	on is exempt u	nder section 50	11(c)(3) and filed	d Form 5768 (ele	ection u	nder
A	Ch	eck l	▶	if the filing organization belo address, EIN, expenses, and				ated group memb	per's nam	е,
B	Ch	eck I	>	if the filing organization chec	ked box A and "	limited control" pr	ovisions apply.			
					bying Expenditu			(a) Filing		liated
				(The term "expenditures" n				organization's totals	group	totals
•	la			bbying expenditures to influence	•					
	b			obbying expenditures to influence		dy (direct lobbying	3)	<u></u>		
	ر د			obbying expenditures (add lines	· ·			<u></u>		
	d e			exempt purpose expenditures . xempt purpose expenditures (ac		 d)				
	f		уі	ng nontaxable amount. Enter			table in both			
	Γ			nount on line 1e, column (a) or (b) i	s: The tobbying	กontaxable amouni	is.	TELLETING STORE	W. A. S.	EYES Y
	-			r \$500,000		nount on line 1e				
				00,000 but not over \$1,000,000		15% of the excess of	over \$500,000.			
		Over	\$1	,000,000 but not over \$1,500,000		10% of the excess				
	[Over	\$1	,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess or	ver \$1,500,000			
		Over	\$1	7,000,000	\$1,000,000.				""	and Section
	h i j	Subi	tra ere	ct line 1g from line 1a. If zero or ct line 1f from line 1c. If zero or less an amount other than zero ng section 4911 tax for this yea	less, enter -0- o on either line r?	<u> </u>	· · · · · · · ·		Yes	сИ
		(Sc	m	e organizations that made a s See th	ection 501(h) ele le separate instr	ructions for lines	e to complete all 2a through 2f.)	of the five colum	ns belov	
				Lobbyir	ig Expenditures	During 4-Year Av	veraging Period	·	 -	
		С	ale	endar year (or fiscal vear beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e)	Fotal
	2a	Lobl	οу	ing nontaxable amount				1		
	b			ing ceiling amount of line 2a, column (e))		Name of		验证		
	c	Tota	d le	obbying expenditures						
	d	Gras	ssr	roots nontaxable amount						
	e			roots ceiling amount of line 2d, column (e))		NAME OF THE PARTY				
	f	Gras	ssr	oots lobbying expenditures						
	BA	\				REV 10/27/20 PRO		Schedule C (For	m 990 or 9	90-EZ) 2019

1 Were substantially all (90% or more) dues received nondeductible by members?	Rant	Complete if the organization is exempt under section 501(c)(3) and he (election under section 501(h)).	as NOT	filed	Form	5768		
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 Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? d Malings to members legislators, or the public? Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2b of the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred by organization managers under section 4912 of if the filing organization incurred a section 4912 tax, did if life Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (50% or more) dues received nondeductible by members? but the organization agree to carry over lobbying expenditures of \$2,000 or less? but the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6), and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, lines answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeducticle lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c	For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a	detailed	(;	a)		(b)	
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Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2 exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines		CANCOLA I I I I I I I I I I I I I I I I I I I	.0., 00.,0	·/(•/,	0. 00	011011		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?							Yes	No
Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line answered "Yes." Dues, assessments and similar amounts from members	1	Were substantially all (90% or more) dues received nondeductible by members?				1		×
Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines	2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? .				2	×	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeducticle lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 Current year 3 Curryover from last year 4 Total 5 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 5 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines	3	Did the organization agree to carry over lobbying and political campaign activity expenditur	es from the	prior	year?	3		×
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 Current year		501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."			Part		line (3, is
Current year	-	·	• •	٠.	L			
to Total		political expenses for which the section 527(f) tax was paid).	amount	s of				
a Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	-	•						
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	_	· · · · · · · · · · · · · · · · · · ·			-	 		
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines	_		· · ·	•				
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines	ري م		• •		0 47			
and political expenditure next year?	4		•		183			
5 Taxable amount of lobbying and political expenditures (see instructions) 5 Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines				ying	A***	1		
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines	5	·				 		
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines			<u> </u>			<u> </u>		
	Control 2	Name	filiated are	aug lie	4\: Do	rt II A	linos	1 00
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	L (000	,						
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	n 990 or 990-E2) 2019	Page 4
aparanya	Supplemental Information (continued)	
W-18-18-18-18-18-18-18-18-18-18-18-18-18-	Cappionicital meditidator (continued)	
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SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

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, 11i, 12a, or 12b.
➤ Attach to Form 990.

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

OMB No 1545-0047

2019
Open to Public.

Name of the organization Employer identification number Vermont Association of Realtors Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Parti Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 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 writing that the assets held in donor advised tunds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Yoar Total number of conservation easements 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2đ Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 . (ii) Assets included in Form 990, Part X . . . If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

Schedu	le D (Form 990) 2019					Page 2
Par	Organizations Maintaining	Collections of	Art, Historical	Treasures, or O	ther Similar Ass	ets (continued)
3	Using the organization's acquisition, collection items (check all that apply)	accession, and ot	her records, che	ck any of the follo	wing that make sig	gnificant use of its
а	☐ Public exhibition		d 🗌 Loan	or exchange prog	ram	
b	Scholarly research		e 🗌 Othe	r		
С	☐ Preservation for future generations	;				
4	Provide a description of the organizat	tion's collections a	and explain how	they further the or	ganization's exem	ot purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather					Yes No
YPar	Escrow and Custodial Arra	angements.				
	Complete if the organization 990, Part X, line 21.	answered "Yes	" on Form 990,	Part IV, line 9, or	reported an amo	ount on Form
1a	Is the organization an agent, trustee included on Form 990, Part X?				r other assets not	☐ Yes ☐ No
á	If "Yes," explain the arrangement in P	art XIII and comple	ete the following	table.		
					<u>Ā</u> m	ount
C	Beginning balance			1	c	
đ	Additions during the year			10	d	
9	Distributions during the year			1 1	e	
f	Ending balance					
2 a	Did the organization include an amount					
b	If "Yes," explain the arrangement in P	art XIII. Check her	e if the explanation	on has been provid	led on Part XIII .	
Par	Endowment Funds.					
	Complete if the organization	answered "Yes	" on Form 990,	Part IV, line 10.		
		(a) Current year	(b) Prior yeai	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance					
ხ	Contributions					
c	Net investment earnings, gains, and					
	•					

.

1a	Is the organization an agent, trustee, cus included on Form 990, Part X?			•	r contribut	tions or	other assets not	☐ Yes ☐ No
á	If "Yes," explain the arrangement in Part X							□ .03 □ :00
	,,				.2.0.	[Arr	nount
C	Beginning balance					1c		
d	Additions during the year					1d	 	
e	Distributions during the year				• • •	1e	- 	
f	Ending balance				• • •	11		
2a	Did the organization include an amount or				scrow or c	£	. 1 .	Yes No
b	If "Yes," explain the arrangement in Part X							
Pale	Endowment Funds.			17.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.		p. ov.oc		• • • • • • • • • • • • • • • • • • • •
W. F. F. F.	Complete if the organization and	swered "Yes"	on For	m 990. F	art IV line	e 10		
		3) Current year	(b) Pric		(c) Two year		(d) Three years back	(e) Four years back
1a	Beginning of year balance	, , ,		,,,,,,,	(-, ,	- June	(2)	(0) 1 001 / 001 0 0001
b	Contributions							
c	Net investment earnings, gains, and							
~	losses							
ď	Grants or scholarships							
8	Other expenditures for facilities and							
-	programs							
1	Administrative expenses	·						
g	End of year balance				·			
2	Provide the estimated percentage of the c	surrent vear en	d balano	o fino 1a	column (c	// bold (20	ļ
2	Board designated or quasi-endowment			e (iiile ig	, column (c	ij) Heid a	20	
á		· %	70					
C	Term endowment > %	7 0						
·	The percentages on lines 2a, 2b, and 2c s	thouse blund	nno/.					
3a					لدامط منمية			
Sa	Are there endowment funds not in the poorganization by.	esession of th	e organi.	zauon ina	it are neio	and adi	ministered for the	Yes No
	(i) Unrelated organizations							3a(i)
	(ii) Related organizations		• •				• • • •	3a(ii)
b	If "Yes" on line 3a(ii), are the related organ							35
4	Describe in Part XIII the intended uses of						• • •	30
	ME Land, Buildings, and Equipme		113 61100	WITH CITE TO	1103			
	Complete if the organization and		on Fou	m gan E	ert IV Im	0112	See Form 900 I	Part V Juna 10
	Description of property	(a) Cost or other			r other basis		Accumulated	(d) Book value
	bescription of property	(investm			ner)		epreciation	(a) Book value
1 a	Land	+	0.		37,108.		 \	87,108.
b	Buildings		0.		91,460.	<u>```</u>	198,742.	292,718.
C	Leasehold improvements			-	71,700.		170,142.	232,110.
d	Equipment			 -	32,246.		29,969.	2,277.
u e	Other			<u> </u>	, <u>, , , , , , , , , , , , , , , , , , </u>		25,509.	4,411,
	Add lines 1a through 1e. (Column (d) must	Hayal Form 00	O Part	Column	(B) line 11	20.)	. 🔊	382,103.
	rica intes la tinough le. (Column (d) must		V 10/27/20 P		ισ), ime T	<i>,</i> ,		
BAA		RE	v 10/2//20 P	NO			Sched	lule D (Form 990) 2019

Partyll	Investments - Other Securities.		*************************************	
	Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	e 11b. See Form 99	0, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method (Cost or end-or-y	of valuation ear market value
(1) Financial	derivatives			
	ield equity interests			
(3) Other				
(A)				
(B)				
(C)			,	
(D)			,	
(E)				
(F) (G)				
(H)				
	rnn (b) must equal Form 990, Part X, col (B) line 12.) . 🕨		.4	* * * *
CEGAMIL	Investments—Program Related.	-L	<u> </u>	· · · · · · · · · · · · · · · · · · ·
Mark Street	Complete if the organization answered "Yes" on Fo	orm 990. Part IV line	e 11c. See Form 99	0 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method	
(1)			,	
(2)		-	<u> </u>	
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 13.) . 🕨		1, 4, 11 - 17 - 1	· ₹ ' - ' . ' . ' . ' . ' . ' . ' . ' . ' .
Par X	Other Assets.			
	Complete if the organization answered "Yes" on Fo	orm 990. Part IV, lin	e 11d. See Form 99	0, Part X, line 15.
	(z) Description			(b) Book value
(1)				
(2)	· · · · · · · · · · · · · · · · · · ·			
(3)		·····		
(4)				•
(5)				
<u>(6)</u>			·	
(7)				
(8)				
CONTROL SECTION AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities.	· · · · · · · · · · · · · · · · · · ·		
#Part X1	Complete if the organization answered "Yes" on Fo	orm 990, Part IV, lin	e 11e or 11f. See F	orm 990, Part X,
	line 25. (a) Description of liability			(b) Dealers
				(b) Book value
(1) Federal in				1 205
(2) Credi				1,705
	ll liab:lities liabil:ties			0 21,922
(5)	TIONTITOTO			21,922
(<i>U)</i>				
(6)			l	
(6) (7)				
(6) (7) (8)				
(6) (7) (8) (9)	ımn (b) must equal Form 990, Part X, col. (B) line 25.)		. >	23,627

	Complete if the exceptation angulated "Var" at Farm 200	Dort IV line 10s		
<u>.</u>	Complete if the organization answered "Yes" on Form 990,			
1	Total revenue, gains, and other support per audited financial statements		1 (6)	1,003,378.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 00 036		,
а	Net unrealized gains (losses) on investments	2a 22,036		
þ	Donated services and use of facilities	2b		
C	Recoveres of prior year grants	2c	1.5	
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	22,036.
3	Subtract line 2e from line 1		3	981,342.
4	Amounts included on Form 990, Part VI'l, 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.)	45		
C	Add lines 4a and 4b		4c	
5 **********	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	981,342.
Pan.			er Retu	m.
	Complete if the organization answered "Yes" on Form 990,	Part IV line 12a.	. 	
1	Total expenses and losses per audited financial statements		1	900,517.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	. 1	45-25	
а	Donated services and use of facilities	2a	- E-20	
b	Prior year adjustments	2b		
C	Other losses	2c		
đ	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	900,517.
4	Amounts included on Form 990. Part IX, line 25, but not on line 1:		e de la companya de l	
а	Investment expenses not included on Form 990, Part Vill, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b		4c	
U		· · · · · · · · ·	70	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, III.	ne 18.)	5	900,517.
5 Provid	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 15.	d 4, Part IV, lines 1b and 2	5 2b; Part V	
Provice 2 Far	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.	d 4, Part IV, lines 1b and 2 to provide any additional age 9, revenue.	5 2b; Part V	, line 4; Part X, line
Provice 2 Par	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 1XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part II. Line 2d: 44,086 of expenses are reflected on Part XII.	d 4, Part IV, lines 1b and 2 to provide any additional age 9, revenue.	5 2b; Part V	, line 4; Part X, line
Provice 2 Far	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 1XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part II. Line 2d: 44,086 of expenses are reflected on Part XII.	d 4, Part IV, lines 1b and 2 to provide any additional age 9, revenue.	5 2b; Part V	, line 4; Part X, line
Provice 2 Par	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 1XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part II. Line 2d: 44,086 of expenses are reflected on Part XII.	d 4, Part IV, lines 1b and 2 to provide any additional age 9, revenue.	5 2b; Part V	, line 4; Part X, line
Provice 2 Par	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 1XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part II. Line 2d: 44,086 of expenses are reflected on Part XII.	d 4, Part IV, lines 1b and 2 to provide any additional age 9, revenue.	5 2b; Part V	, line 4; Part X, line

Schedule D (Forr		Page 5
Peraballi	Supplemental Information (continued)	
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SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Verm	ont Association of Realtors 03-0265065			
Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form		4	YAN
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items	1	130	18.50
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use	3	(30)	3
	Travel for companions Payments for business use of personal residence		北後	12.7
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	21.57	13.5	17.00
	☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, cheī)	1	是意	. 793
		144 m. C.	100	135
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment		1	1.236
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	1		
	explain	1b	- T	1.00
_	•		. 32	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by a			
	directors, trustees, and officers including the CEO/Executive Director, regarding the items checked on lin	1		
	1a?	2	<u> </u>	<u> </u>
3	Indicate which, if any, of the following the organization used to establish the compensation of the	7	1	729
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			1 25. 47.
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		13.33	
	Compensation committee Written employment contract		16	地
	☐ Independent compensation consultant ☐ Compensation survey or study	3 9	1782	18.
	Form 990 of other organizations Approval by the board or compensation committee	13:3		
	Downster and the control of the cont	32	13.5	
4	During the year, did any person listed on Form 990, Part VII Section A, line 1a, with respect to the filing organization or a related organization:		133	No.
		37.		TOTALE
a -	Receive a severance payment or change-of-control payment?	4a		X X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b 4c		^
C	Participate in, or receive payment from, an equity-based compensation arrangement?	333	<u> </u>	+:
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	1 4 mg	17.	計会を
	Outropation F01/o)(2) F01/o)(4) and F01/o)(90) argonizations much complete lines F.O.	1		1:47
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. For person's listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue an	773	引為	
٥	compensation contingent on the revenues of.	y in		132
_	The organization?	5a	1 3112	7 277
a 5	Any related organization?	5a		
ı,	If "Yes" on line 5a or 5b, describe in Part III.	F.J. 7.	r. 12855	- 1:1-
	THE TEST OF MICE OR OF SD, GOSOFIDE AT LARTIN.	2 4	C 4	,
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue an	v S		1
•	compensation contingent on the net earnings of.	<u>}</u>		
а	The organization?	6a	1 5:50	à 1 .w/ ~.
b	Any related organization?	6b		
_	If "Yes" on line 6a or 6b, describe in Part III.	34.7	1130	8 343 7
	The second of th			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixe	d m	1	1 3190
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued puisuant to a contract that was subject	-	-	+
~	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describ	e		
	in Part III	8		
			£ 12.42	162
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described	יייים מ	u racide.	-
	Regulations section 53.4958-6(c)?	9	1	

Schedule J (Form 990) 2019

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. **LEGIOU**

000 For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the (F) Compensation in column (B) reported as deferred on prior Form 990 Schedule J (Form 990) 2019 Note: The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual. 79,676. (E) Total of columns (B)(I)–(D) 00 (D) Nontaxable benefits 00 (C) Retirement and cther aeterred compensation -000 (iti) Other reportable compensation (B) Breakdown of W-2 and/or 1099-MISC compensation instructions, on rovi (ii). Do not list any individuals that aren't listed on Form 990, Part Vii. 00 ----(ii) Bonus & incentive compensation REV 10/27/20 PRO 79,676. (i) Base compensation ΞÊ Ξ € € SESE EE ΞΞ ΞΞ ΞΞ SE Ξ **3 3** Former Ex. Director (A) Name and Title Helen Hossley BAA Ø က 4 Ŋ 9 Φ 20 œ ű చ 5 16 Ξ 4

Provote the information, explanation or descriptions required for Part I, lines 1s, 1b, 3, 4s, 4b, 4c, 5s, 5b, 5s, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.	Schedule J (Form 990) 2019	Page 3
Ober 202201 1/35	Provide the information, explan for any additional information.	ation. or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a. 5b, 6a. 6b, 7, and 8, and for Part II. Also complete this part
Ober 02/20/1 v. 43b		
OM-GZIZOT /-AS-		
Obe GRIZON /AB		
ONF GELEON (-SP)		
Obe dazzon (-Zib-		
Oek GOLZON /ABb		
AREV 10277220 PRO		
GEV 1027/220 PRO		
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REV 10027/230 PRO	ŧ	
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. REV 10/27/29 PRO		
REV 10/27/20 PRO		
. REV 10/27/20 PRO		
REV 10/27/29 PRO		
	ВАА	. REV 10/27/20 PRO Schedule J (Form 990) 2019

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.

► Attach to Form 990 or 990-EZ.

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

2019 40-20-20

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Vermont Association of Realtors	03-0265065			
Pt VI, Line 6: Members of the Vermont Association of Realton	rs, Inc. are licensed			
real estate agents who apply for membership to take advantage	ge 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 commit	tee.			
Pt VI, Line 12c: The conflict of interest policy is signed a	annually by all board			
members. Board members announce when they have a conflict ar	nd recuse themselves			
from participation in discussion or voting.				
Pt VI, Line 15a: A review of the CEO is conducted by the pre	esident, president-elect			
and past president and 1s based on industry and national cor	mpensation studies,			
compensation is negotiated with the executive committee, whi	ich then goes to the			
full board for approval.				
Pt VI, Line 15b: The president's stipend is set during the	oudgeting process			
each year. There is no review as it is an elected position.				
Pt VI, Line 19: The association's governing documents are po	osted on the website.			
The financial statements are available for public view in the	ne office.			
Pt Jx, Line 24e:				
Description: Onlines services				
Total: \$5,190	······			
Program services: \$5,190				
Management and general: \$0				
Fundraising: \$0				
Description: RAMCO				
Total: \$7,566				
Program services: \$7,566				